



Quarterly Lobbyist Expenditure Report for Organization

Submitted: 7/11/2025 2:24 PM

Year: 2025

Quarter: 2

Womble Bond Dickinson
(602) 262-5311

201 E. Washington
Phoenix, Arizona, 85004

No Officer or Employee in Organization Has Expenditures

| Summary | This Quarter |
|---|---------------|
| Total of single expenditures more than \$25 | \$0.00 |
| Total of single expenditures \$25 or less | \$0.00 |
| Total of events expenditures | \$0.00 |
| Total Expenditures | \$0.00 |



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Name: John Rawicz

Phone:

This lobbyist has no expenditures.

List of Single Expenditures More than \$25

| Date | Name and Address on Whose Behalf Expenditure Made | Nature of Expenditure | City Official Receiving/Benefiting from Expenditure | Amount of Expenditure |
|---|---|-----------------------|---|-----------------------|
| Total of Single Expenditures More than \$25 | | | | \$0.00 |

List of Expenditures \$25 or Less

| City Official Receiving/Benefiting from Expenditure | Amount of Expenditure |
|---|-----------------------|
| Total Expenditures \$25 or Less | \$0.00 |

List of Expenditures for Events (City Code Section 2-1001.4)

| Date | Description of Event | Location | Amount of Expenditure |
|-----------------------------|----------------------|----------|-----------------------|
| Total of Event Expenditures | | | \$0.00 |
| Total Campaign Expenditures | | | \$0.00 |



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Name: Bryant Barber

Phone:

This lobbyist has no expenditures.

List of Single Expenditures More than \$25

| Date | Name and Address on Whose Behalf Expenditure Made | Nature of Expenditure | City Official Receiving/Benefiting from Expenditure | Amount of Expenditure |
|--|---|-----------------------|---|-----------------------|
| Total of Single Expenditures More than \$25 | | | | \$0.00 |

List of Expenditures \$25 or Less

| City Official Receiving/Benefiting from Expenditure | Amount of Expenditure |
|---|-----------------------|
| Total Expenditures \$25 or Less | |
| | \$0.00 |

List of Expenditures for Events (City Code Section 2-1001.4)

| Date | Description of Event | Location | Amount of Expenditure |
|------------------------------------|----------------------|----------|-----------------------|
| Total of Event Expenditures | | | \$0.00 |
| Total Campaign Expenditures | | | \$0.00 |



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Name: Justin Gowan

Phone:

This lobbyist has no expenditures.

List of Single Expenditures More than \$25

| Date | Name and Address on Whose Behalf Expenditure Made | Nature of Expenditure | City Official Receiving/Benefiting from Expenditure | Amount of Expenditure |
|--|---|-----------------------|---|-----------------------|
| Total of Single Expenditures More than \$25 | | | | \$0.00 |

List of Expenditures \$25 or Less

| City Official Receiving/Benefiting from Expenditure | Amount of Expenditure |
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| Total Expenditures \$25 or Less | |
| | \$0.00 |

List of Expenditures for Events (City Code Section 2-1001.4)

| Date | Description of Event | Location | Amount of Expenditure |
|------------------------------------|----------------------|----------|-----------------------|
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| Total Campaign Expenditures | | | \$0.00 |



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Name: Laura LoBianco

Phone:

This lobbyist has no expenditures.

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|--|---|-----------------------|---|-----------------------|
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List of Expenditures \$25 or Less

| City Official Receiving/Benefiting from Expenditure | Amount of Expenditure |
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Name: Brandon Hellewell

Phone:

This lobbyist has no expenditures.

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| | | | Total of Event Expenditures |
| | | | \$0.00 |
| | | | Total Campaign Expenditures |
| | | | \$0.00 |



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Name: Michael J. Phalen

Phone:

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Name: Gale Toombs

Phone:

This lobbyist has no expenditures.

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Name: Heidi K. Short

Phone:

This lobbyist has no expenditures.

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By checking this box and typing my name below, the undersigned does hereby certify under penalty of perjury that: (1) all the information contained in the reporting form is true and correct to the best of my knowledge; (2) I am a registered lobbyist filing this report on my own behalf or I am duly authorized to file this report on behalf of the registered lobbying entity named on the reporting form; and (3) by typing my name below I acknowledge that such action constitutes the legal equivalent of my signature and by typing my name I hereby waive any requirement that this form be notarized in order to be legally enforceable.

TYPED NAME: Sherry Henderson

EMAIL: sherry.henderson@wbd-us.com