

Submitted: 9/25/2018 6:04 PM Year: 2018 Quarter: 2

Lazarus, Silvyn & Bangs, P.C. (602) 340-0900

420 W. Roosevelt Street Phoenix, AZ, 85003

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: Rory Juneman Phone:

This lobbyist has no expenditures.

List of Single Expenditures More than \$25

Name and Address on

Date Whose Behalf Nature of Expenditure

Expenditure Made City Official

Receiving/Benefit Amount of

ing from Expenditure

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: Keri L. Silvyn Phone:

This lobbyist has no expenditures.

List of Single Expenditures More than \$25

Name and Address on

Date

Whose Behalf
Expenditure Made

Nature of Expenditure

Expenditure Made

City Official

Receiving/Benefit

ing from
Expenditure

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: Heather N. Dukes 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/Benefit ing 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)

Total Campaign Expenditures

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

\$0.00



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Name: Marci Z. Rosenberg Phone:

This lobbyist has no expenditures.

List of Single Expenditures More than \$25

Name and Address on

Date Whose Behalf Nature of Expenditure
Expenditure Made

City Official
Receiving/Benefit Amount of
ing from Expenditure
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: Larry S. Lazarus 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/Benefit ing 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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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: Mary Keating EMAIL: mkeating@lsblandlaw.com