

Submitted: 10/15/2018 8:50 AM Year: 2018 Quarter: 3

Huellmantel & Affiliates (480) 921-2800

PO Box 1833 Tempe, AZ, 85280

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: Charles Huellmantel Phone:

This lobbyist has no expenditures.

List of Single Expenditures More than \$25

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: Lauren Proper Potter 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
			44.44
		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: Katherine Senini EMAIL:

katherine.senini@huellmantel.com