

Submitted: 10/12/2022 5:11 PM Year: 2022 Quarter: 3

Arizona Food Marketing Alliance (602) 252-9761 120 East Pierce St. Phoenix, AZ, 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



Submitted: 10/12/2022 5:11 PM Year: 2022 Quarter: 3

Name: Mark Miller Phone:

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 Expenditu	ures 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	

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Date	Description of Event	Location	Amount of Expenditure
		Total of Event Expenditures	\$0.00
		Total of Event Expenditures	φ0.00
		Total Campaign Expenditures	\$0.00



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Name: Tim Magino Phone:

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 Expenditu	ures 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	

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



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Name: Dan Tennessen Phone:

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 Expendite	ures 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	

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Description of Event	Location	Amount of Expenditure
	Total of Event Expenditures	\$0.00
	Total of Event Experiences	ψ0.00
	Total Campaign Expenditures	\$0.00
	Description of Event	Total of Event Expenditures



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Name: Penny Hrtanek 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 Expendite	ures 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

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



Submitted: 10/12/2022 5:11 PM Year: 2022 Quarter: 3

Name: Kristi briceno Phone:

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 \$2			ures 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	

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Description of Event	Location	Amount of Expenditure
	Total of Event Expenditures	\$0.00
	Total of Event Experiences	ψ0.00
	Total Campaign Expenditures	\$0.00
	Description of Event	Total of Event 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: Mark Miller EMAIL: mmiller@afmaaz.org