

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



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Name: Mark Miller Phone:

#### **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

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: Tim Magino Phone:

### **List of Single Expenditures More than \$25**

Name and Address of Date Whose Behalf Expenditure Made	n 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
		<b>Total of Event Expenditures</b>	\$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	

### 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 of Event Expenditures	ψ0.50
		Total Campaign Expenditures	\$0.00



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Name: Penny Hrtanek Phone:

This lobbyist has no expenditures.

**List of Single Expenditures More than \$25** 

**City Official** Name and Address on Receiving/Benefit **Amount of Date Whose Behalf Nature of Expenditure** ing from **Expenditure Expenditure Made Expenditure** 

> **Total of Single Expenditures More than \$25** \$0.00

**List of Expenditures \$25 or Less** 

**Amount of** City Official Receiving/Benefiting from Expenditure **Expenditure** 

> **Total Expenditures \$25 or Less** \$0.00

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

**Amount of Description of Event** Location **Date** 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**

Name and Address on City Official

Date Whose Behalf Nature of Expenditure ing from Expenditure

Expenditure Made Expenditure

Total of Single Expenditures More than \$25 \$0.00

### **List of Expenditures \$25 or Less**

City Official Receiving/Benefiting from 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
		<b>Total of Event Expenditures</b>	\$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: Mark Miller EMAIL: mmiller@afmaaz.org