

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

Quarterly Lobbyist Expenditure Report for Organization						
Submitte	ed: 10/15/2020 8:10 P	M Year: 20	20 0	Quarter: 4		
	Shannon Whiteake yist has no expenditures.	r Phone:	:			
List of Single Expenditures More than \$25						
Date	Name and Address on Whose Behalf Expenditure Made	Nature of Expenditure	City Official Receiving/Benefi ing from Expenditure	t Amount of Expenditure		
		Total of Single Expendit		5 \$0.00		
List of Expenditures \$25 or Less						
City Official Receiving/Benefiting from Expenditure			Amount of Expenditure			
		Total Expend	ditures \$25 or Less	s \$0.00		
	List of Expenditur	es for Events (City C	Code Section 2-1	001.4)		
Date	Description of	Event	Location	Amount of Expenditure		
		Total of E	Event Expenditures	s \$0.00		

Total Campaign Expenditures\$0.00

Quarterly Lobbyist Expenditure Report for Organization						
Submitte	ed: 10/15/2020 8:10 P	M Year: 20	20 (Quarter: 4		
	Jennifer Woods yist has no expenditures.	Phone				
	List of Si	ngle Expenditures M	lore than \$25			
Date	Name and Address on Whose Behalf Expenditure Made	Nature of Expenditure	City Official Receiving/Benefi ing from Expenditure	t Amount of Expenditure		
		Total of Single Expendit	ures More than \$2	5 \$0.00		
	List	of Expenditures \$25	or Less			
	City Official Receiving	g/Benefiting from Expend	diture	Amount of Expenditure		
		Total Expend	ditures \$25 or Less	s \$0.00		
List of Expenditures for Events (City Code Section 2-1001.4)						
Date	Description of	Event	Location	Amount of Expenditure		
		Total of E	Event Expenditures	s \$0.00		

Total Campaign Expenditures\$0.00



Quarterly Lobbyist Expenditure Report for Organization

Submitted: 10/15/2020 8:10 PM

Year: 2020

Quarter: 4

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: Jennifer Woods

EMAIL: jennifer@traversantgroup.com