

Submitted: 12/10/2021 4:04 PM Year: 2021 Quarter: 4

Harvest Health & Recreation Inc.

(303) 827-9039

1155 W. Rio Salado Pkwy Ste. 201 Phoenix, AZ, 85281

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: Lauren Niehaus 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: Ben Kimbro 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
			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: Lauren Niehaus EMAIL: lauren.niehaus@trulieve.com