

Submitted: 10/15/2019 5:10 PM

Year: 2019

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: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Tlm McCabe 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

Amount of Expenditure

Total Expenditures \$25 or Less \$0.00

Date	Description of Event	Location	Amount of Expenditure
		<b>Total of Event Expenditures</b>	\$0.00
		Total Campaign Expenditures	\$0.00



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Penny Wulzen 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 Expendit	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
		<b>Total of Event Expenditures</b>	\$0.00
		Total of Event Experiences	ψ0.00
		Total Campaign Expenditures	\$0.00



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Judy Scates 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 Expendit	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 of Event Experiences	ψ0.00
		<b>Total Campaign Expenditures</b>	\$0.00



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Greg Colyar Phone:

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

Date	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 Expendit	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 of Event Expenditures	ψ0.00
		<b>Total Campaign Expenditures</b>	\$0.00



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Dan Tennessen Phone:

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

Date	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 Expendit	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
		<b>Total of Event Expenditures</b>	\$0.00
		Total Campaign Expenditures	\$0.00



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Raynetta Hughes 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	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 of Event Experiences	ψ0.00
		<b>Total Campaign Expenditures</b>	\$0.00



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Debbie Roth 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

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



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

Name: Mark Miller 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



Submitted: 10/15/2019 5:10 PM Year: 2019 Quarter: 3

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@afamaz.org