

Submitted: 10/29/2020 1:25 PM Year: 2020 Quarter: 3

Pivotal Policy Consulting (602) 294-0202

826 N. 3rd Avenue Phoenix, Arizona, 85003

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: Brittany Bingold 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: Nick Simonetta 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 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 of Event Expenditures	ψ0.00
		Total Campaign Expenditures	\$0.00



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Name: Jessica Rainbow 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 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: 10/29/2020 1:25 PM **Year: 2020 Quarter: 3**

Name: Anna Oliver 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 \$0.00 **Total of Event Expenditures**

Total Campaign Expenditures

\$0.00



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Name: Kristen Boilini 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 \$0.00 **Total of Event Expenditures**

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: Anna Oliver EMAIL:

anna@pivotalpolicyconsulting.com