9	Quarterly Lobbyis Org	t Expenditure ganization	Report for
Submitted:	10/6/2020 2:18 PM	Year: 2020	Quarter: 3
Goodm	an Schwartz Public		tral Ave. Suite 2200 Arizona 85012

Affairs (602) 277-0911

Phoenix, Arizona, 85012

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				
Submitt	ed: 10/6/2020 2:18 PM	Year: 20	20 Q	luarter: 3
Name:	David Schwartz	Phone:		
	List of Sir	ngle Expenditures M	ore than \$25	
Date	Name and Address on Whose Behalf Expenditure Made	Nature of Expenditure	City Official Receiving/Benefit ing from Expenditure	Amount of Expenditure
	٦	Fotal of Single Expenditu	res More than \$25	\$0.00
	List	of Expenditures \$25	or Less	
	City Official Receiving	/Benefiting from Expend	liture	Amount of Expenditure
		Total Expend	litures \$25 or Less	\$0.00
	List of Expenditur	es for Events (City C	ode Section 2-10	001.4)
Date	Description of	Event	Location	Amount of Expenditure
		Total of E	vent Expenditures	\$0.00

Total Campaign Expenditures\$0.00

Quarterly Lobbyist Expenditure Report for Organization				
Submitt	ed: 10/6/2020 2:18 PM	Year: 20	20 G	Quarter: 3
Name:	Stuart Goodman	Phone:		
	List of Sir	ngle Expenditures M	ore than \$25	
Date	Name and Address on Whose Behalf Expenditure Made	Nature of Expenditure	City Official Receiving/Benefit ing from Expenditure	t Amount of Expenditure
	٢	Fotal of Single Expenditu	ures More than \$25	5 \$0.00
	List	of Expenditures \$25	or Less	
	City Official Receiving	/Benefiting from Expend	liture	Amount of Expenditure
		Total Expend	litures \$25 or Less	\$0.00
	List of Expenditure	es for Events (City C	ode Section 2-1	001.4)
Date	Description of	Event	Location	Amount of Expenditure
		Total of E	vent Expenditures	\$0.00

Total Campaign Expenditures\$0.00

Quarterly Lobbyist Expenditure Report for Organization				
Submitt	ed: 10/6/2020 2:18 PM	Year: 20	20 C	Quarter: 3
Name:	Brandy Petrone	Phone:		
	List of Sir	ngle Expenditures M	ore than \$25	
Date	Name and Address on Whose Behalf Expenditure Made	Nature of Expenditure	City Official Receiving/Benefit ing from Expenditure	Amount of Expenditure
		Fotal of Single Expendite	ures More than \$25	\$0.00
	List	of Expenditures \$25	or Less	
	City Official Receiving	/Benefiting from Expend	liture	Amount of Expenditure
		Total Expend	litures \$25 or Less	\$0.00
	List of Expenditur	es for Events (City C	ode Section 2-10	001.4)
Date	Description of	Event	Location	Amount of Expenditure
		Total of E	vent Expenditures	\$0.00

Total Campaign Expenditures\$0.00

Quarterly Lobbyist Expenditure Report for Organization				
Submitt	ed: 10/6/2020 2:18 PM	Year: 20	20 C	Quarter: 3
Name:	Rachelle Hadland	Phone:		
	List of Sir	ngle Expenditures M	ore than \$25	
Date	Name and Address on Whose Behalf Expenditure Made	Nature of Expenditure	City Official Receiving/Benefit ing from Expenditure	t Amount of Expenditure
	1	Fotal of Single Expendite	ures More than \$25	5 \$0.00
	List	of Expenditures \$25	or Less	
	City Official Receiving	/Benefiting from Expend	liture	Amount of Expenditure
		Total Expend	litures \$25 or Less	\$0.00
	List of Expenditur	es for Events (City C	ode Section 2-1	001.4)
Date	Description of	Event	Location	Amount of Expenditure
		Total of E	vent Expenditures	\$0.00

Total Campaign Expenditures

\$0.00



Quarterly Lobbyist Expenditure Report for Organization

Submitted: 10/6/2020 2:18 PM

Year: 2020

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: David Schwartz

EMAIL: david@goodmanschwartz.com