

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: 1/14/2019 4:01 PM	Year: 20	18 (Quarter: 4		
	Michael J. Phalen yist has no expenditures.	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	it Amount of Expenditure		
		Fotal of Single Expenditu		5 \$0.00		
	List of Expenditures \$25 or Less					
City Official Receiving/Benefiting from Expenditure			Amount of Expenditure			
		Total Expend	litures \$25 or Les	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	vent Expenditure	s \$0.00		

Total Campaign Expenditures\$0.00

Quarterly Lobbyist Expenditure Report for Organization							
Submitte	ed: 1/14/2019 4:01 PM	Year: 20	18	Quarter: 4			
Name:	Heidi K. Short	Phone:					
This lobby	yist 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/Benef ing from Expenditure	it Amount of Expenditure			
	1	Total of Single Expenditu	ures More than \$2	\$0.00			
List of Expenditures \$25 or Less							
	City Official Receiving	/Benefiting from Expend	liture	Amount of Expenditure			
		Total Expend	litures \$25 or Les	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	vent Expenditure	s \$0.00			

Total Campaign Expenditures\$0.00



Quarterly Lobbyist Expenditure Report for Organization

Submitted: 1/14/2019 4:01 PM

Year: 2018

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: Sherry Henderson

EMAIL: shenderson@lrrc.com