

FILE WITH:

City Clerk Department
 Phoenix City Hall, 15th Floor
 200 West Washington Street
 Phoenix, Arizona
 85003-1611 (602) 262-6811
 lobbyist@phoenix.gov



City of Phoenix
 CITY CLERK DEPARTMENT

Date: _____

Check

Quarter 1 2 3 4

QUARTERLY LOBBYIST CAMPAIGN CONTRIBUTION REPORT FOR INDIVIDUALS

COMPLETE REPORT ONLY IF LOBBYIST HAS MADE AND/OR SOLICITED CONTRIBUTIONS

(City Code Section 2-1003)

NAME OF LOBBYIST			
BUSINESS NAME		BUSINESS TELEPHONE	
BUSINESS ADDRESS		CITY	STATE ZIP

LIST Campaign Contributions **MADE BY** Lobbyist. Attach separate page or photocopy form for additional listings.

Date	City Official Receiving Contribution	Amount of Contributions

Campaign Contributions **SOLICITED** by Lobbyist. If lobbyist knows solicitations resulted in contributions, complete the following. Attach separate page or photocopy form for additional listings.

Date	Name and Address of Contributor	Occupation and Employer of Contributor	City Official Receiving Contribution	Amount of Contributions

TOTAL CAMPAIGN CONTRIBUTIONS _____

SIGNATURE DECLARATION

By checking this box and typing or signing 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 whether by signing or typing my name I hereby waive any requirement that this form be notarized in order to be legally enforceable.

DATE

TYPED NAME OR SIGNATURE

EMAIL ADDRESS