

OFFICE OF THE  
DETROIT CITY CLERK

2023 JAN -6 P 1:53

### CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

1. REGISTRANT'S NAME (Only one person may register with this form) <b>A'Lynne Boles Dukes</b>	2. REGISTRANT'S ID NUMBER <b>2023-1</b>
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3. BUSINESS ADDRESS (All mail will be sent to this address) <b>27777 Franklin Rd. #1150 Southfield, MI 48034</b>	4. TELEPHONE NUMBER(S) <b>(517) 899-3447 (248) 939-5800</b>
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5. TYPE OF LOBBYIST (Check all applicable boxes.)

- Registered lobbyist under Federal Law
- Registered lobbyist under Michigan Law
- Registered lobbyist in other states (name state(s)):
- A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials
- A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official (See definition of "lobbyist" on reverse)

6. NAME AND ADDRESS OF CLIENT(S)  
**American Heart Association  
7272 Greenville Ave.  
Dallas, TX 75231**

7. VERIFICATION

I swear, or affirm, that:

a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and

b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

**A'Lynne Boles Dukes**  
Type or print name of registrant

*A'Lynne Boles Dukes*  
Signature

Subscribed and sworn to me this 6<sup>th</sup> day of Jan. 2023

*Terri L. Sloan*  
Notary Public, Wayne County, Michigan  
My Commission Expires: 8-3-2028

Terri L. Sloan  
NOTARY PUBLIC - STATE OF MICHIGAN  
County of Oakland  
My Commission Expires August 3, 2028  
Acting in the County of Wayne

**FOR OFFICIAL USE ONLY:**



DATE OF ANNUAL REGISTRATION <b>1 6 2023</b> Month Day Year	THIS REGISTRATION IS VALID: From <b>1 6 2023</b> Month Day Year To <b>1 6 2024</b> Month Day Year	Amount of fee paid: <b>\$125.00</b> Date of payment: <b>1/6/2023</b>
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# CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 APR 10 A 10:00

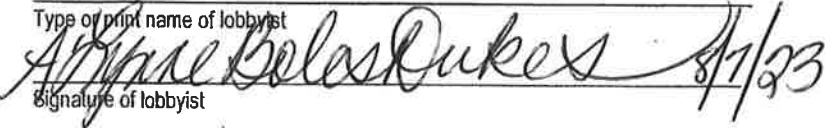
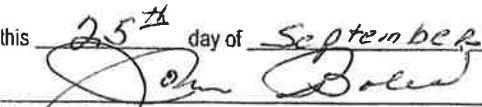
<b>1. LOBBYIST'S NAME</b> <b>A'Lynne Boles Dukas</b>		<b>2. LOBBYIST'S ID NUMBER</b> <b>2023-1</b>																
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) <b>26555 Evergreen Rd. Ste. 530 Southfield, MI 48076</b>		<b>4. TELEPHONE NUMBER(S)</b> <b>(51) 899-3447</b>																
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX																
<b>5. DATE OF ANNUAL REGISTRATION</b> <div style="display: flex; justify-content: space-around; align-items: center;"> <span><u>01</u> Month</span> <span><u>06</u> Day</span> <span><u>2023</u> Year</span> </div> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		<b>6. PERIOD FOR THIS REPORT</b> <input checked="" type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)																
<b>7. NAME OF CLIENT</b> <b>American Heart Association</b>																		
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <p style="text-align: center;"><b>I scheduled and attended introductory meetings with Council Membe</b></p> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.																		
<b>9. EXPENDITURES BY CATEGORY</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;"></th> <th style="width: 25%;">THIS REPORTING QUARTER</th> <th style="width: 25%;">REGISTRATION DATE THROUGH END OF THIS QUARTER</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....</td> <td style="padding: 2px;">9a. \$ <u>0</u></td> <td style="padding: 2px;">9a. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....</td> <td style="padding: 2px;">9b. \$ <u>3,000</u></td> <td style="padding: 2px;">9b. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9c. ALL OTHER LOBBYING EXPENDITURES .....</td> <td style="padding: 2px;">9c. \$ <u>0</u></td> <td style="padding: 2px;">9c. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, &amp; 9c).....</td> <td style="padding: 2px;">9d. \$ <u>3,000</u></td> <td style="padding: 2px;">9d. \$ _____</td> </tr> </tbody> </table>			THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER	9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....	9a. \$ <u>0</u>	9a. \$ _____	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>3,000</u>	9b. \$ _____	9c. ALL OTHER LOBBYING EXPENDITURES .....	9c. \$ <u>0</u>	9c. \$ _____	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>3,000</u>	9d. \$ _____
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>3,000</u>	9d. \$ _____																
<b>10. VERIFICATION</b> I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. <b>A'Lynne Boles Dukas</b> Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me This <u>5<sup>th</sup></u> day of <u>April</u> <u>2023</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>4/27/23</u>																		
<table style="width: 100%;"> <tr> <td style="width: 50%;"> <b>FOR OFFICIAL USE ONLY:</b>                      Amount of fee paid: <u>\$25.00</u> </td> <td style="width: 50%;">                     Date of payment: <u>4/10/23</u> </td> </tr> </table>				<b>FOR OFFICIAL USE ONLY:</b> Amount of fee paid: <u>\$25.00</u>	Date of payment: <u>4/10/23</u>													
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#4146

**CITY OF DETROIT  
QUARTERLY REPORT**

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

<b>1. LOBBYIST'S NAME</b> A'Lynne Boles Dukes		<b>2. LOBBYIST'S ID NUMBER</b> 2023-1	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) 26555 Evergreen, Southfield, Mi 48034  <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (517) 899-3447 (248) 936-5755  <input checked="" type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
<b>5. DATE OF ANNUAL REGISTRATION</b> 04                      10                      2023 Month                      Day                      Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		<b>6. PERIOD FOR THIS REPORT</b> <input type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)	
<b>7. NAME OF CLIENT</b> American Heart Association			
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.)  I provided educational information to Councilmembers regarding a F  <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
<b>9. EXPENDITURES BY CATEGORY</b>		<b>THIS REPORTING QUARTER</b>	<b>REGISTRATION DATE THROUGH END OF THIS QUARTER</b>
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....		9a. \$ _____	9a. \$ _____
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ <u>3,000</u>	9b. \$ _____
9c. ALL OTHER LOBBYING EXPENDITURES .....		9c. \$ _____	9c. \$ _____
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>3,000</u>	9d. \$ _____
<b>10. VERIFICATION</b>  I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. A'Lynne Boles Dukes Type or print name of lobbyist  Signature of lobbyist  Subscribed and sworn to me this sworn to before me this <u>25<sup>th</sup></u> day of <u>September</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>Nov. 27, 2023</u>			
JOHN BOLES NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF EATON My Commission Expires November 27, 2023 Acting in the County of <u>Eaton</u>			
<b>FOR OFFICIAL USE ONLY:</b> Amount of fee paid: <u>\$25.00</u> Date of payment: <u>11/1/23</u> <div style="text-align: center; color: red; font-weight: bold; font-size: 1.5em;">KW</div>			

# CITY OF DETROIT QUARTERLY REPORT

**TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT**  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)



<b>1. LOBBYIST'S NAME</b> A'Lynne Boles Dukes		<b>2. LOBBYIST'S ID NUMBER</b> 2023-1	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) 26555 Evergreen Southfield, MI 48034  <input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (51) 899-3447 ( ) _____  <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
<b>5. DATE OF ANNUAL REGISTRATION</b> <div style="display: flex; justify-content: space-around; align-items: center;"> <span>07</span> <span>9</span> <span>2024</span> </div> <div style="display: flex; justify-content: space-around; font-size: small;"> <span>Month</span> <span>Day</span> <span>Year</span> </div> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		<b>6. PERIOD FOR THIS REPORT</b> <input type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)	
<b>7. NAME OF CLIENT</b> American Heart Association			
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 25%;"> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.                      (Provide a brief description and, if necessary, attach additional sheets.)                 </div> <div style="width: 75%;">                     Individual Meetings with Councilmembers regarding Complete street                 </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.                 </div>			
<b>9. EXPENDITURES BY CATEGORY</b>		<b>THIS REPORTING QUARTER</b>	<b>REGISTRATION DATE THROUGH END OF THIS QUARTER</b>
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....		9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 5,000	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES .....		9c. \$ 5,000	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 10,000	9d. \$ 0
<b>10. VERIFICATION</b>  I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. A'Lynne Boles Dukes Type or print name of lobbyist  Signature of lobbyist  Subscribed and sworn to me this sworn to before me this 11 day of July 2024  Notary Public, Wayne County, Michigan My Commission Expires: 11/27/29			
<b>FOR OFFICIAL USE ONLY:</b> Amount of fee paid: \$ 25.00 Date of payment: 7/18/24			

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# CITY OF DETROIT QUARTERLY REPORT

RECEIVED SEP 17 2024


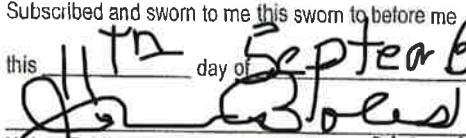
**TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT**  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

<b>1. LOBBYIST'S NAME</b> A'Lynne Boles Dukes		<b>2. LOBBYIST'S ID NUMBER</b> 2023-1	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) 26555 Evergreen Southfield, MI 48034  <input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (51) 899-3447 ( ) _____  <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
<b>5. DATE OF ANNUAL REGISTRATION</b> Sept                      12                      2023 <small>Month                      Day                      Year</small>  (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	<b>6. PERIOD FOR THIS REPORT</b> <input type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)		
<b>7. NAME OF CLIENT</b> American Heart Association			
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small>  Meeting with Councilmembers. Attend District and community meeti  <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
<b>9. EXPENDITURES BY CATEGORY</b>  9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS ..... 9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING..... 9c. ALL OTHER LOBBYING EXPENDITURES ..... 9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	<b>THIS REPORTING QUARTER</b>  9a. \$ _____ 9b. \$ 3,000 9c. \$ _____ 9d. \$ 3,000	<b>REGISTRATION DATE THROUGH END OF THIS QUARTER</b>  9a. \$ _____ 9b. \$ 9,000 9c. \$ _____ 9d. \$ 9,000	
<b>10. VERIFICATION</b>  I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.  A'Lynne Boles Dukes Type or print name of lobbyist   Signature of lobbyist  Subscribed and sworn to me this sworn to before me this <u>16<sup>th</sup></u> day of <u>September</u> <u>2024</u>   Notary Public, <u>Wayne County</u> , Michigan <u>EATON CO.</u> My Commission Expires: <u>11/27/29</u>			
<b>FOR OFFICIAL USE ONLY:</b> Amount of fee paid: <u>\$ 25.00</u> Date of payment: <u>9/17/24</u>  <div style="text-align: center; color: red; font-weight: bold;">KW</div>			

# CITY OF DETROIT LOBBYIST REGISTRATION

RECEIVED SEP 17 2024

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

<b>1. REGISTRANT'S NAME</b> (Only one person may register with this form) <b>A'Lynne Boles Dukes</b>	<b>2. REGISTRANT'S ID NUMBER</b> <b>2023-1</b>	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) 26555 Evergreen, Southfield, MI 48034	<b>4. TELEPHONE NUMBER(S)</b> (517) 899-3447 ( ) _____	
<b>5. TYPE OF LOBBYIST</b> (Check all applicable boxes.) <ul style="list-style-type: none"> <li><input type="checkbox"/> Registered lobbyist under Federal Law</li> <li><input type="checkbox"/> Registered lobbyist under Michigan Law</li> <li><input type="checkbox"/> Registered lobbyist in other states (name state(s)): _____</li> <li><input checked="" type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials</li> <li><input type="checkbox"/> A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official (See definition of "lobbyist" on reverse)</li> </ul>		
<b>6. NAME AND ADDRESS OF CLIENT(S)</b> American Heart Association 7272 Greenville Ave, Dallas, Texas 75231		
<b>7. VERIFICATION</b>  I swear, or affirm, that:  a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and  b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.  <u>A'Lynne Boles Dukes</u> Type or print name of registrant   Signature  Subscribed and sworn to me this <u>11<sup>th</sup></u> day of <u>September</u> <u>2024</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>11/27/29</u>		
<b>FOR OFFICIAL USE ONLY:</b>		
<b>DATE OF ANNUAL REGISTRATION</b> <u>1</u> <u>9</u> <u>2024</u> Month Day Year	<b>THIS REGISTRATION IS VALID:</b> From <u>1</u> <u>9</u> <u>2024</u> Month Day Year To <u>1</u> <u>9</u> <u>2025</u> Month Day Year	Amount of fee paid: <u>\$125.00</u> Date of payment: <u>9/17/24</u>

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RECEIVED SEP 17 2024

# CITY OF DETROIT QUARTERLY REPORT


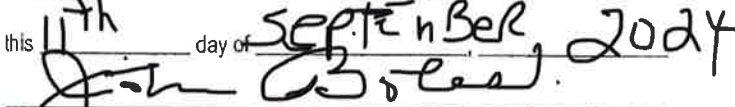
TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

1. LOBBYIST'S NAME <b>A'Lynne Boles Dukes</b>		2. LOBBYIST'S ID NUMBER <b>2023-1</b>	
3. BUSINESS ADDRESS (All mail will be sent to this address) <b>26555 Evergreen, Southfield, MI</b>  <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) <b>(513) 899-3447</b> ( ) _____  <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION <u>April 12 2024</u> Month Day Year  (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT <b>American Heart Association</b>			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.)  <b>Councilmember Meetings. District Meetings</b>  <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....		REGISTRATION DATE THROUGH END OF THIS QUARTER	
9a. \$ _____		9a. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ <b>3,000</b>	
9c. ALL OTHER LOBBYING EXPENDITURES .....		9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <b>3,000</b>	
10. VERIFICATION  I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.  <b>A'Lynne Boles Dukes</b> Type or print name of lobbyist  <u>A'Lynne Boles Dukes</u> Signature of lobbyist  Subscribed and sworn to me this sworn to before me this <u>11<sup>th</sup></u> day of <u>sept.</u> , 20 <u>24</u> <u>John D. [Signature]</u> Notary Public, Wayne County, Michigan <u>ENTIRE CO.</u> My Commission Expires: <u>11/27/20</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: <b>\$25.00</b> Date of payment: <b>9/17/24</b> <b>KK</b>			

# CITY OF DETROIT QUARTERLY REPORT

RECEIVED SEP 17 2024

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)


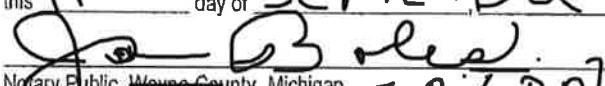
<b>1. LOBBYIST'S NAME</b> A'Lynne Boles Dukes		<b>2. LOBBYIST'S ID NUMBER</b> 2023-1	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) 26555 Evergreen, Southfield, MI 48034  <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (51) 899-3447 ( ) _____  <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
<b>5. DATE OF ANNUAL REGISTRATION</b> Jul 12 2024 <small>Month Day Year</small>  (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	<b>6. PERIOD FOR THIS REPORT</b> <input type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)		
<b>7. NAME OF CLIENT</b> American Heart Association			
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 25%;"> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.  <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> </div> <div style="width: 75%;">                 Meeting with Councilmembers. Attend District and community Meeti             </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.             </div>			
<b>9. EXPENDITURES BY CATEGORY</b>	<b>THIS REPORTING QUARTER</b>	<b>REGISTRATION DATE THROUGH END OF THIS QUARTER</b>	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....	9a. \$ _____	9a. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 3,000	9b. \$ _____	
9c. ALL OTHER LOBBYING EXPENDITURES .....	9c. \$ _____	9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 3,000	9d. \$ _____	
<b>10. VERIFICATION</b>  I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.  A'Lynne Boles Dukes Type or print name of lobbyist   Signature of lobbyist  Subscribed and sworn to me this sworn to before me this 11 <sup>th</sup> day of September, 2024  Notary Public, Wayne County, Michigan EAT. J Co. My Commission Expires: 11/27/29			
<b>FOR OFFICIAL USE ONLY:</b>			
Amount of fee paid: \$ 25.00		Date of payment: 9/17/24	

KW



## CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)


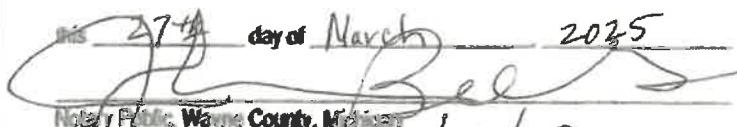
<b>1. LOBBYIST'S NAME</b> A'Lynne Boles Dukes		<b>2. LOBBYIST'S ID NUMBER</b> 2023-1	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) 26555 Evergreen, Southfield, Mi 48034  <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (51) 899-3447 ( ) _____  <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
<b>5. DATE OF ANNUAL REGISTRATION</b> Sept 11 2024 <small>Month Day Year</small>  (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		<b>6. PERIOD FOR THIS REPORT</b> <input type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)	
<b>7. NAME OF CLIENT</b> American Heart Association			
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small>  Councilmember Meetings. District and Community Meetings  <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
<b>9. EXPENDITURES BY CATEGORY</b>		<b>THIS REPORTING QUARTER</b>	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....		9a. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ _____	
9c. ALL OTHER LOBBYING EXPENDITURES .....		9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ _____	
<b>10. VERIFICATION</b>  I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.  A'Lynne Boles Dukes <small>Type or print name of lobbyist</small>  <small>Signature of lobbyist</small>  Subscribed and sworn to me this sworn to before me this 11 <sup>th</sup> day of September 2024  <small>Notary Public, Wayne County, Michigan</small> My Commission Expires: 11/27/29			
<b>FOR OFFICIAL USE ONLY:</b>			
Amount of fee paid: \$ 25.00		Date of payment: 9/17/24	

KW

RECEIVED MAR 31 2025

# CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT  
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

<b>1. LOBBYIST'S NAME</b> A'Lynne Boles Dukes		<b>2. LOBBYIST'S ID NUMBER</b> 2023-1							
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) 26555 Evergreen #507, Southfield, MI 48076  <input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (51) 899-3447  <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX							
<b>5. DATE OF ANNUAL REGISTRATION</b> <table style="width:100%; text-align:center;"> <tr> <td style="border-bottom: 1px solid black;">01</td> <td style="border-bottom: 1px solid black;">12</td> <td style="border-bottom: 1px solid black;">2025</td> </tr> <tr> <td>Month</td> <td>Day</td> <td>Year</td> </tr> </table> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		01	12	2025	Month	Day	Year	<b>6. PERIOD FOR THIS REPORT</b> <input checked="" type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)	
01	12	2025							
Month	Day	Year							
<b>7. NAME OF CLIENT</b> American Heart Association									
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small>  <p style="text-align:center; font-size: 1.2em;">Meetings with Councilmembers regarding Complete Streets and Par</p> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.									
<b>9. EXPENDITURES BY CATEGORY</b>		<b>THIS REPORTING QUARTER</b>	<b>REGISTRATION DATE THROUGH END OF THIS QUARTER</b>						
<b>9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS</b>		9a. \$ 100	9a. \$ 100						
<b>9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING</b>		9b. \$ 0	9b. \$ 0						
<b>9c. ALL OTHER LOBBYING EXPENDITURES</b>		9c. \$ 0	9c. \$ 0						
<b>9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, &amp; 9c)</b>		9d. \$ 100	9d. \$ 100						
<b>10. VERIFICATION</b>  I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.  <b>A'Lynne Boles Dukes</b> Type or print name of lobbyist   Signature of lobbyist  Subscribed and sworn to me this _____ day of _____, 2025   Notary Public, Wayne County, Michigan My Commission Expires: 11/27/29  <div style="text-align: right;"> <b>JOHN BOLES</b>            NOTARY PUBLIC - STATE OF MICHIGAN            COUNTY OF EATON            My Commission Expires November 27, 2029            Acting In the County of <u>Eaton</u> </div>									

FOR OFFICIAL USE ONLY      \$25.00 KE      3/31/25