

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) A'Lynne Boles Dukes	2. REGISTRANT'S ID NUMBER 2023-1
3. BUSINESS ADDRESS (All mail will be sent to this address) 27777 Franklin Rd. #1150 Southfield, MI 48034	4. TELEPHONE NUMBER(S) (517) 899-3447 (248) 939-5800

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)
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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 _____ day of _____, 2023

this 16th 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 1 6 2023 Month Day Year	THIS REGISTRATION IS VALID: From 1 6 2023 Month Day Year To 1 6 2024 Month Day Year	Amount of fee paid: \$125.00 Date of payment: 1/6/2023
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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 10:12

1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1											
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen Rd. Ste. 530 Southfield, MI 48076		4. TELEPHONE NUMBER(S) (513) 899-3447											
☒ IF THIS ADDRESS HAS CHANGED, CHECK BOX		☐ IF A NUMBER HAS CHANGED, CHECK BOX											
5. DATE OF ANNUAL REGISTRATION <u>01</u> Month <u>06</u> Day <u>2023</u> Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☒ 1 st Quarter (ending 3 months after annual registration) ☐ 2 nd Quarter (ending 6 months after annual registration) ☐ 3 rd Quarter (ending 9 months after annual registration) ☐ 4 th Quarter (ending 12 months after annual registration)											
7. NAME OF CLIENT American Heart Association													
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) I scheduled and attended introductory meetings with Council Membe ☐ I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.													
9. EXPENDITURES BY CATEGORY		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">THIS REPORTING QUARTER</th> <th style="width: 50%;">REGISTRATION DATE THROUGH END OF THIS QUARTER</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">9a. \$ <u>0</u></td> <td style="padding: 2px;">9a. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9b. \$ <u>3,000</u></td> <td style="padding: 2px;">9b. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9c. \$ <u>0</u></td> <td style="padding: 2px;">9c. \$ _____</td> </tr> <tr> <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. \$ <u>0</u>	9a. \$ _____	9b. \$ <u>3,000</u>	9b. \$ _____	9c. \$ <u>0</u>	9c. \$ _____	9d. \$ <u>3,000</u>	9d. \$ _____
THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER												
9a. \$ <u>0</u>	9a. \$ _____												
9b. \$ <u>3,000</u>	9b. \$ _____												
9c. \$ <u>0</u>	9c. \$ _____												
9d. \$ <u>3,000</u>	9d. \$ _____												
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. \$ _____											
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. A'Lynne Boles Dukes Type or print name of lobbyist Signature of lobbyist Subscribed and sworn to me this _____ day of _____, 2023. Notary Public, Wayne County, Michigan My Commission Expires: <u>4/27/23</u>													
FOR OFFICIAL USE ONLY: Amount of fee paid: \$25.00 Date of payment: 4/10/23													

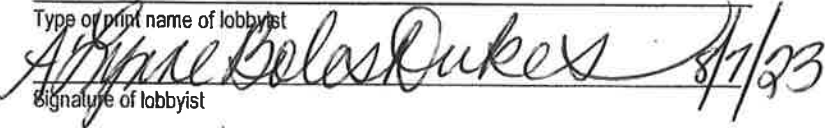
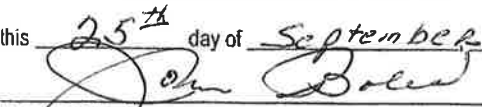
K

#4146

RECEIVED NOV 01 2023

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 A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen, Southfield, Mi 48034		4. TELEPHONE NUMBER(S) (517) 899-3447 (248) 936-5755	
☐ IF THIS ADDRESS HAS CHANGED, CHECK BOX		☒ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION 04 10 2023 Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☐ 1st Quarter (ending 3 months after annual registration) ☒ 2nd Quarter (ending 6 months after annual registration) ☐ 3rd Quarter (ending 9 months after annual registration) ☐ 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT American Heart Association			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ 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 ☐ 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		9a. \$	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 3,000	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 3,000	
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. A'Lynne Boles Dukes Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 25th day of September  Notary Public, Wayne County, Michigan My Commission Expires: Nov. 27, 2023 JOHN BOLES NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF EATON My Commission Expires November 27, 2023 Acting in the County of Eaton			
FOR OFFICIAL USE ONLY: Amount of fee paid: \$25.00 Date of payment: 11/1/23 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)

1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen Southfield, MI 48034 ☒ IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (513) 899-3447 ☐ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION 07 Month 9 Day 2024 Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☐ 1st Quarter (ending 3 months after annual registration) ☐ 2nd Quarter (ending 6 months after annual registration) ☐ 3rd Quarter (ending 9 months after annual registration) ☒ 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT American Heart Association			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) Individual Meetings with Councilmembers regarding Complete street ☐ 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		9a. \$ 0	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 5,000	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 5,000	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 10,000	
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. A'Lynne Boles Dukes 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 11 day of July 2024 <u>[Signature]</u> Notary Public, Wayne County, Michigan My Commission Expires: 11/27/29			
FOR OFFICIAL USE ONLY: Amount of fee paid: \$ 25.00 Date of payment: 7/18/24			

**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)

1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen Southfield, MI 48034 ☒ IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (51) 899-3447 () _____ ☐ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION Sept 12 2023 MonthDayYear (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☐ 1st Quarter (ending 3 months after annual registration) ☐ 2nd Quarter (ending 6 months after annual registration) ☒ 3rd Quarter (ending 9 months after annual registration) ☐ 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT American Heart Association			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) Meeting with Councilmembers. Attend District and community meeti ☐ 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		9a. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 3,000	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 3,000	
		REGISTRATION DATE THROUGH END OF THIS QUARTER	
		9a. \$ _____	
		9b. \$ 9,000	
		9c. \$ _____	
		9d. \$ 9,000	
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. A'Lynne Boles Dukes Type or print name of lobbyist Signature of lobbyist Subscribed and sworn to me this _____ day of _____ 2024 Notary Public, Wayne County, Michigan My Commission Expires: 11/27/29			
FOR OFFICIAL USE ONLY: Amount of fee paid: \$ 25.00 Date of payment: 9/17/24 KW			

**CITY OF DETROIT
LOBBYIST REGISTRATION**

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

RECEIVED SEP 17 2024

1. REGISTRANT'S NAME (Only one person may register with this form) A'Lynne Boles Dukes	2. REGISTRANT'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen, Southfield, MI 48034	4. TELEPHONE NUMBER(S) (517) 899-3447	
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, Texas 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 <i>A'Lynne Boles Dukes</i> Signature Subscribed and sworn to me this <u>11th</u> day of <u>September</u> <u>2024</u> <i>[Signature]</i> Notary Public, Wayne County, Michigan My Commission Expires: <u>11/27/29</u>		
FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION 1 9 2024 Month Day Year	THIS REGISTRATION IS VALID: From 1 9 2024 Month Day Year To 1 9 2025 Month Day Year	Amount of fee paid \$125.00 Date of payment 9/17/24

K6

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 A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen, Southfield, MI ☐ IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (513) 899-3447 () ☐ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION April 12 2024 Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☒ 1 st Quarter (ending 3 months after annual registration) ☐ 2 nd Quarter (ending 6 months after annual registration) ☐ 3 rd Quarter (ending 9 months after annual registration) ☐ 4 th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT American Heart Association			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) Councilmember Meetings. District Meetings ☐ I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		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. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 3,000	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 3,000	
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. A'Lynne Boles Dukes Type or print name of lobbyist <i>A'Lynne Boles Dukes</i> Signature of lobbyist Subscribed and sworn to me this sworn to before me this 11th day of sept. 2024 <i>John D. ...</i> Notary Public, Wayne County, Michigan My Commission Expires: 11/27/20			
FOR OFFICIAL USE ONLY: Amount of fee paid: \$25.00 Date of payment: 9/17/24			

**CITY OF DETROIT
QUARTERLY REPORT**

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

RECEIVED SEP 17 2024

1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen, Southfield, MI 48034 ☐ IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (513) 899-3447 ☐ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION Jul 12 2024 Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☐ ☒ ☐ ☐ 1st Quarter (ending 3 months after annual registration) 2nd Quarter (ending 6 months after annual registration) 3rd Quarter (ending 9 months after annual registration) 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT American Heart Association			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) Meeting with Councilmembers. Attend District and community Meet ☐ 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		9a. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 3,000	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 3,000	
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. A'Lynne Boles Dukes Type or print name of lobbyist <i>A'Lynne Boles Dukes</i> Signature of lobbyist Subscribed and sworn to me this sworn to before me this 11th day of September, 2024 <i>John A. Boles</i> Notary Public, Wayne County, Michigan EAT. J Co. My Commission Expires: 11/27/29			
FOR OFFICIAL USE ONLY:			
Amount of fee paid: \$ 25.00		Date of payment: 9/17/24	

KW

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)

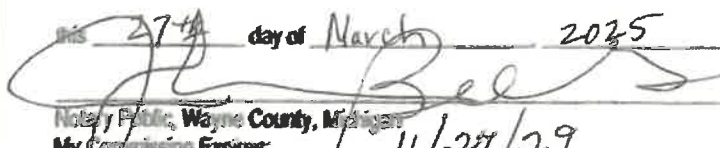
1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen, Southfield, Mi 48034 ☐ IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (513) 899-3447 () _____ ☐ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION Sept 11 2024 Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☐ 1 st Quarter (ending 3 months after annual registration) ☐ 2 nd Quarter (ending 6 months after annual registration) ☒ 3 rd Quarter (ending 9 months after annual registration) ☐ 4 th Quarter (ending 12 months after annual registration)	
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9. EXPENDITURES BY CATEGORY		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. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ _____	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ _____	
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. A'Lynne Boles Dukes Type or print name of lobbyist <i>A'Lynne Boles Dukes</i> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>11th</u> day of <u>September</u> <u>2024</u> <i>[Signature]</i> Notary Public, Wayne County, Michigan My Commission Expires: <u>11/27/29</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$25.00</u> Date of payment: <u>9/17/24</u>			

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)

1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen #507, Southfield, MI 48076		4. TELEPHONE NUMBER(S) (517) 899-3447	
☒ IF THIS ADDRESS HAS CHANGED, CHECK BOX		☐ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION 01 Month 12 Day 2025 Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☒ ☐ ☐ ☐ 1st Quarter (ending 3 months after annual registration) 2nd Quarter (ending 6 months after annual registration) 3rd Quarter (ending 9 months after annual registration) 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT American Heart Association			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) Meetings with Councilmembers regarding Complete Streets and Par ☐ 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		9a. \$ 100	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING		9b. \$ 0	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		9d. \$ 100	
9e. REGISTRATION DATE THROUGH END OF THIS QUARTER		9e. \$ 100	
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. A'Lynne Boles Dukes Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me on this <u>27th</u> day of <u>March</u>, 2025  Notary Public, Wayne County, Michigan My Commission Expires: <u>11/27/29</u> JOHN BOLES NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF EATON My Commission Expires November 27, 2029 Acting In the County of <u>Eaton</u>			

CITY OF DETROIT QUARTERLY REPORT

RECEIVED JUN 16 2025

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

1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1													
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen, suite #570 Southfield, MI 48076 IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) 51 • 899-3447) _____ IF A NUMBER HAS CHANGED, CHECK BOX													
5. DATE OF ANNUAL REGISTRATION January 12 2025 Month Day Year Month (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☐ ☒ ☐ ☐ 1st Quarter (ending 3 months after annual registration) 2nd Quarter (ending 6 months after annual registration) 3rd Quarter (ending 9 months after annual registration) 4th Quarter (ending 12 months after annual registration)													
7. NAME OF CLIENT American Heart Association															
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%; vertical-align: top;"> 8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER </td> <td style="width: 35%; vertical-align: top;"> 8. I ENGAGED IN LOBBYING ACTIVITY DURING (Provide a brief description and, if necessary, </td> <td style="width: 35%; vertical-align: top;"> THIS QUARTER. attach additional sheets,) </td> </tr> <tr> <td style="text-align: center; vertical-align: top;"> Meetings with Councilmembers </td> <td style="text-align: center; vertical-align: top;"> and Council staff regarding AHA pol </td> <td></td> </tr> <tr> <td></td> <td style="text-align: center; vertical-align: top;"> DURING THIS QUARTER. </td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center; vertical-align: top;"> I DID NOT ENGAGE IN LOBBYING ACTIVITY </td> </tr> </table>				8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER	8. I ENGAGED IN LOBBYING ACTIVITY DURING (Provide a brief description and, if necessary,	THIS QUARTER. attach additional sheets,)	Meetings with Councilmembers	and Council staff regarding AHA pol			DURING THIS QUARTER.		I DID NOT ENGAGE IN LOBBYING ACTIVITY		
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9. EXPENDITURES BY CATEGORY 9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		THIS REPORTING QUARTER 9a. \$ _____ 9b. \$ 500 _____ 9c. \$ 0 _____ 500													
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.		REGISTRATION DATE THROUGH END OF THIS QUARTER \$600 _____ 9c. \$ 0 _____ 9b \$500													
9c. ALL OTHER LOBBYING EXPENDITURES		\$1,000 _____ \$1,100 _____													
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)....															

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.

Type or print name of lobbyist

Signature of lobbyist

Subscribed and sworn to me this _____ day of _____, 20____

this _____ day of _____, 20____

Notary Public, Wayne County, Michigan

My Commission Expires: _____

JOHN BOLES

**NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF EATON**

My Commission Expires November 27, 2029
Acting in the County of Eaton

A'Lynne Boles Dukes

FOR OFFICIAL USE ONLY

Amount of fee paid: \$25.00

Date of payment: 6/16/25

**CITY OF DETROIT
QUARTERLY REPORT**

Each person completing this form should become familiar with the following provisions of the 1984 Detroit City Code:

Sec. 2-6-35. Lobbying registration and reporting.

(b) Each lobbyist shall file a report of his or her lobbying activity with the Office of the City Clerk on a quarterly basis, which shall be calculated from the date of registration. Any document that is filed by a lobbyist is deemed to be a public record and shall be published electronically on the World Wide Web, or other format, as to provide remote or online access to the reports.

Sec. 2-6-71. Prohibition on gifts and gratuities; exceptions.

(a) A public servant shall not accept gifts, gratuities, honoraria, or other things of value from any person or entity doing business or seeking to do business with the City, is seeking official action from the City, has interests that could be substantially affected by the performance of the public servant's official duties, or is registered as a lobbyist under applicable law and Section 2-6-35 of this Code.

(b) The prohibition in Subsection (a) of this section shall not apply:

- (1) To an award publicly presented to a public servant by an individual, governmental body or non-governmental entity or organization in recognition of public service;
- (2) To complimentary copies of trade publications, books, reports, pamphlets, calendars, periodicals or other informational materials;
- (3) To a gift received from a public servant's immediate family member or relative, provided, that the immediate family member or relative is

CITY OF DETROIT QUARTERLY REPORT

RECEIVED OCT 06 2025

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

1. LOBBYIST'S NAME A'Lynne Boles Dukes		2. LOBBYIST'S ID NUMBER 2023-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 26555 Evergreen, Southfield, MI 48076		4. TELEPHONE NUMBER(S) (513) 899-3447	
☒ IF THIS ADDRESS HAS CHANGED, CHECK BOX		☐ IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION <u>January</u> Month <u>10</u> Day <u>2025</u> Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT ☐ 1st Quarter (ending 3 months after annual registration) ☐ 2nd Quarter (ending 6 months after annual registration) ☒ 3rd Quarter (ending 9 months after annual registration) ☐ 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT American Heart Association			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER ☒ I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) Meetings with CCM on: Complete Streets, Coffee and Crumpets and ☐ I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		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. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING		9b. \$ 150.00	9b. \$ 1,100.00
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 100.00	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		9d. \$ 250.00	9d. \$ 1,350.00
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. 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>30th</u> day of <u>September</u> , <u>2025</u> Notary Public, Wayne County, Michigan My Commission Expires: <u>Nov 27, 2029</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: \$ 25.00 Date of payment: 10/6/25			

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