

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) Nathaniel Hennigar	2. REGISTRANT'S ID NUMBER 2016-1
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3. BUSINESS ADDRESS (All mail will be sent to this address) 197 Clarendon Street, Boston MA 02116	4. TELEPHONE NUMBER(S) (617) 375-1624
--	--

5. TYPE OF LOBBYIST (Check all applicable boxes.)	<input type="checkbox"/> Registered lobbyist under Federal Law <input type="checkbox"/> Registered lobbyist under Michigan Law <input checked="" type="checkbox"/> Registered lobbyist in other states (name state(s)): Kentucky <input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials <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)
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6. NAME AND ADDRESS OF CLIENT(S)
General Retirement System of the City of Detroit
One Detroit Center
500 Woodward Ave., Suite 3000, Detroit, MI 48226

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.

Nathaniel Hennigar

Type or print name of registrant

Signature



Subscribed and sworn to me this sworn to before me

this 7th day of August, 2017

Blaine O'Neil
 Notary Public, Wayne County, Michigan - Suffolk County, Commonwealth of
 My Commission Expires: Apr 13, 2023 Massachusetts



FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION Month: _____ Day: _____ Year: _____	THIS REGISTRATION IS VALID From: _____ Month: _____ Day: _____ Year: _____ To: _____ Month: _____ Day: _____ Year: _____	Amount of fee paid: _____ Date of payment: _____

VI252893

62-20
311

DATE 2017 08 02
YYYY MM DD

In the amount of **One hundred twenty five and 00/100 Dollars

not valid after 180 days

Pay to the order of CITY OF DETROIT
200- 2 WOODWARD AVE, COLEMAN
A YOUNG MNCPL CTR , LOBBYIST
REGISTRATION & REPORTING,
OFC OF DETROIT CITY CLERK
DETROIT MI 48226

\$ *****125.00

US Funds

Citibank N A

Donald A. Shin
Authorized Official

⑈ 204 239 ⑈ ⑆ 03 1 100 209 ⑆

3869638 ⑈

OFFICIAL RECEIPT
Form C of D 24-OR (1209)

City of Detroit

D- 583579

ISSUING OFFICE

DEPARTMENT CITY CLERK	DIVISION/SECTION ADMIN.	REMITTANCE NO.
---------------------------------	-----------------------------------	----------------

ACCOUNT CREDITED

COST CENTER 01010	OBJECT 1694
-----------------------------	-----------------------

DATE **8/9/17**

RECEIVED OF **NATHANIEL HENNIGAR**

ADDRESS **197 CLARENDON ST. BOSTON, MA 02116**

One-hundred twenty-five and 00/100 DOLLARS, \$ **125.00**

FOR **Lobbyist Registration #2016-1**

Payment Made By (check two)

- Cash
- Check
- Mail
- In Person

USE BALL POINT PEN

Signed *[Signature]*
Title **Info Tech**

COPY 1 - TO CUSTOMER

CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

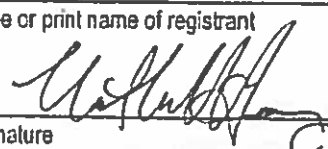
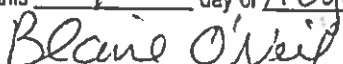
OFFICE OF THE
 DETROIT CITY CLERK
 617 AUG-9 A 11:33

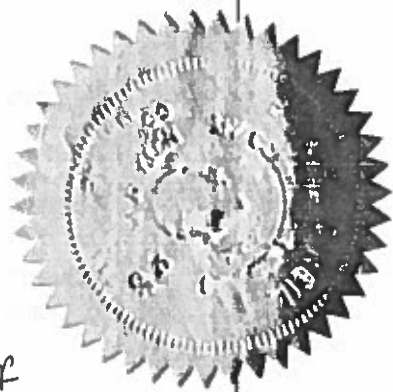
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3. BUSINESS ADDRESS (All mail will be sent to this address) 197 Clarendon Street, Boston MA 02116	4. TELEPHONE NUMBER (617) 375-1624
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5. TYPE OF LOBBYIST (Check all applicable boxes.)	<input type="checkbox"/> Registered lobbyist under Federal Law <input type="checkbox"/> Registered lobbyist under Michigan Law <input checked="" type="checkbox"/> Registered lobbyist in other states (name state(s)): Kentucky <input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials <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)
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6. NAME AND ADDRESS OF CLIENT(S) General Retirement System of the City of Detroit One Detroit Center 500 Woodward Ave., Suite 3000, Detroit, MI 48226
--

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.
Nathaniel Hennigar _____ Type or print name of registrant  _____ Signature
Subscribed and sworn to me this _____ day of _____, 2017 this <u>7th</u> day of <u>August</u> , 2017  _____ Notary Public, Wayne County, Michigan My Commission Expires: <u>Apr 13, 2023</u>



FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION _____ Month Day Year	THIS REGISTRATION IS VALID: From _____ Month Day Year To _____ Month Day Year	Amount of fee paid: _____ Date of payment: _____

CITY OF DETROIT QUARTERLY REPORT

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

OFFICE OF THE
 DETROIT CITY CLERK
 2017 AUG -9 A 11:3

1. LOBBYIST'S NAME Nathaniel Hennigar	2. LOBBYIST'S ID NUMBER 2016-1
3. BUSINESS ADDRESS (All mail will be sent to this address) 197 Clarendon Street, Boston MA 02116 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) 617) 375-1624 () <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX

5. DATE OF ANNUAL REGISTRATION <u>September 12 2016</u> <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
--	--

7. NAME OF CLIENT General Retirement System of the City of Detroit

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 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. \$ <u>0</u>	9a. \$ <u>0</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0</u>	9b. \$ <u>0</u>
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0</u>	9c. \$ <u>0</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0</u>	9d. \$ <u>0</u>

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.

Nathaniel Hennigar
 Type or print name of lobbyist

Nathaniel Hennigar
 Signature of lobbyist

Subscribed and sworn to me this sworn to before me

this 7th day of August, 2017

Beane chief
 Notary Public, Wayne County, Michigan Suffolk County, Commonwealth of Massachusetts
 My Commission Expires: APR 15, 2023



FOR OFFICIAL USE ONLY:

Amount of fee paid: _____ Date of payment: _____

V1252893

62-20-311

DATE 2017 08 02
YYYY MM DD

not valid after 180 days

In the amount of ****Twenty five and 00/100 Dollars**

Pay to the order of **CITY OF DETROIT
200- 2 WOODWARD AVE, COLEMAN
A YOUNG MNCPL CTR , LOBBYIST
REGISTRATION & REPORTING,
OFC OF DETROIT CITY CLERK
DETROIT MI 48226**

\$ *****25.00

US Funds

Citibank N.A.

Donald A. Ghis
Authorized Official

⑈ 204 240 ⑈ ⑆ 03 1 100 209 ⑆ 3869638 1 ⑈

OFFICIAL RECEIPT
Form C of D 24-OR (1209)

City of Detroit

D- 583580

ISSUING OFFICE

DEPARTMENT CITY CLERK	DIVISION/SECTION ADMIN.	REMITTANCE NO.
---------------------------------	-----------------------------------	----------------

ACCOUNT CREDITED

COST CENTER 00110	OBJECT 1644
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DATE **8/9/17**

RECEIVED OF **NATHANIEL HENNIGAR**

ADDRESS **197 CLARENDON ST, BOSTON, MA 02116**

TWENTY-FIVE & NO/100 DOLLARS, \$ **25.00**

FOR **LOBBYIST QUARTERLY REPORT 2016-1**

Payment Made By (check two)


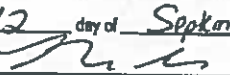

- Cash
- Check
- Mail
- In Person

Signed *[Signature]*
Title **Info Tech**

USE BALL POINT PEN

COPY 1 - TO CUSTOMER

**CITY OF DETROIT
LOBBYIST REGISTRATION**
(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

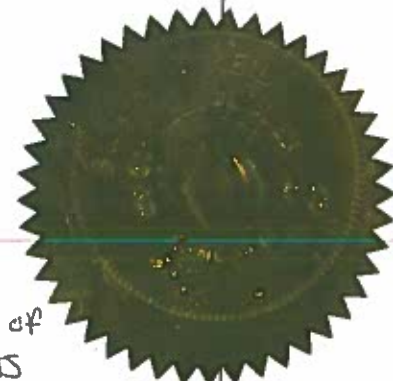
1. REGISTRANT'S NAME (Only one person may register with this form) Nathaniel Hennigar		2. REGISTRANT'S ID NUMBER 2016-1	
3. BUSINESS ADDRESS (All mail will be sent to this address) 197 Clarendon Street, Boston MA, 02116		4. TELEPHONE NUMBER(S) (617) 375-1624	
5. TYPE OF LOBBYIST (Check all applicable boxes.)			
<input type="checkbox"/> Registered lobbyist under Federal Law <input type="checkbox"/> Registered lobbyist under Michigan Law <input checked="" type="checkbox"/> Registered lobbyist in other states (name state(s)): Kentucky <input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials <input type="checkbox"/> A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official <small>(See definition of "lobbyist" on reverse)</small>			
6. NAME AND ADDRESS OF CLIENT(S) General Retirement System of the City of Detroit One Detroit Center 500 Woodward Ave., Suite 3000, Detroit, MI 48226			
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.			
Nathaniel Hennigar			
Type or print name of registrant			
			
Signature			
Subscribed and sworn to me this sworn to before me			
this <u>12</u> day of <u>September</u> , 20 <u>16</u>			
			
Notary Public, Wayne County, Michigan			
My Commission Expires: <u>9/9/2022</u>			
			
FOR OFFICIAL USE ONLY			
DATE OF ANNUAL REGISTRATION September 15, 2016		THIS REGISTRATION IS VALID: From September 15, 2016 To September 15, 2017	
Amount of Fee Paid: \$125.00		Date of Payment: Sept 12, 2016	

**CITY OF DETROIT
QUARTERLY REPORT**

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT **2017 APR 10 P 3 25**
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

1. LOBBYIST'S NAME Nathaniel Hennigar	2. LOBBYIST'S ID NUMBER 2016-1															
3. BUSINESS ADDRESS (All mail will be sent to this address) 197 Clarendon Street, Boston MA 02116 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) (617) 375-1624 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
5. DATE OF ANNUAL REGISTRATION September 12 2016 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)															
7. NAME OF CLIENT General Retirement System of the City of Detroit																
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <i>A conference call with a member of the investment staff to discuss a new potential investment strategy.</i> <input type="checkbox"/> 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:33%;"></th> <th style="width:33%;">THIS REPORTING QUARTER</th> <th style="width:33%;">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. \$ 0</td> <td style="padding: 2px;">9a. \$ 0</td> </tr> <tr> <td style="padding: 2px;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING</td> <td style="padding: 2px;">9b. \$ 0</td> <td style="padding: 2px;">9b. \$ 0</td> </tr> <tr> <td style="padding: 2px;">9c. ALL OTHER LOBBYING EXPENDITURES</td> <td style="padding: 2px;">9c. \$ 0</td> <td style="padding: 2px;">9c. \$ 0</td> </tr> <tr> <td style="padding: 2px;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....</td> <td style="padding: 2px;">9d. \$ 0</td> <td style="padding: 2px;">9d. \$ 0</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. \$ 0	9a. \$ 0	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	9b. \$ 0	9b. \$ 0	9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0	9c. \$ 0	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0	9d. \$ 0
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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. Nathaniel Hennigar _____ Type or print name of lobbyist _____ Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>4th</u> day of <u>April</u> , 2017 _____ Notary Public, Wayne County, Michigan Suffolk County, Commonwealth of Massachusetts My Commission Expires: <u>Apr 13, 2023</u>																
FOR OFFICIAL USE ONLY Amount of fee paid _____ Date of payment _____																

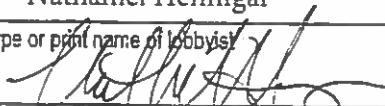
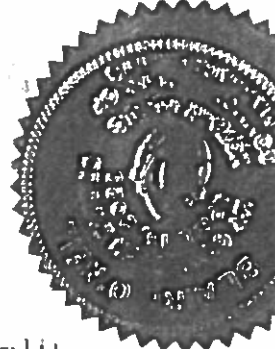


CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

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

JUL 18 A 10:00

1. LOBBYIST'S NAME Nathaniel Hennigar	2. LOBBYIST'S ID NUMBER 2016-1															
3. BUSINESS ADDRESS (All mail will be sent to this address) 197 Clarendon Street, Boston MA 02116 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) (617) 375-1624 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
5. DATE OF ANNUAL REGISTRATION <u>January 1</u> <u>2018</u> Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)															
7. NAME OF CLIENT General Retirement System of the City of Detroit																
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> 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%;"></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="text-align: center; padding: 2px;">9a. \$ <u>0</u></td> <td style="text-align: center; padding: 2px;">9a. \$ <u>0</u></td> </tr> <tr> <td style="padding: 2px;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....</td> <td style="text-align: center; padding: 2px;">9b. \$ <u>0</u></td> <td style="text-align: center; padding: 2px;">9b. \$ <u>0</u></td> </tr> <tr> <td style="padding: 2px;">9c. ALL OTHER LOBBYING EXPENDITURES</td> <td style="text-align: center; padding: 2px;">9c. \$ <u>0</u></td> <td style="text-align: center; padding: 2px;">9c. \$ <u>0</u></td> </tr> <tr> <td style="padding: 2px;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....</td> <td style="text-align: center; padding: 2px;">9d. \$ <u>0</u></td> <td style="text-align: center; padding: 2px;">9d. \$ <u>0</u></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. \$ <u>0</u>	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0</u>	9b. \$ <u>0</u>	9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0</u>	9c. \$ <u>0</u>	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0</u>	9d. \$ <u>0</u>
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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. Nathaniel Hennigar Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>5th</u> day of <u>June</u> <u>2018</u>  Notary Public, Wayne County, Michigan <u>Suffolk County - Commonwealth of Massachusetts</u> My Commission Expires: <u>Apr 13, 2023</u>																
FOR OFFICIAL USE ONLY: Amount of fee paid: _____ Date of payment: _____																

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

OFFICE OF THE
CITY CLERK

2018 SEP 28 P 1:57

1. LOBBYIST'S NAME Nathaniel Hennigar	2. LOBBYIST'S ID NUMBER 2016-1
3. BUSINESS ADDRESS (All mail will be sent to this address) 197 Clarendon Street, Boston, MA 02116 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) (617) 3751624 () <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX

5. DATE OF ANNUAL REGISTRATION January 1 2018 _____ Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
--	--

7. NAME OF CLIENT
 General Retirement System of the City of Detroit

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 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
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0	9d. \$ 0

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.

Nathaniel Hennigar
 Type or print name of lobbyist

Nathaniel Hennigar
 Signature of lobbyist

Subscribed and sworn to me this sworn to before me
 this 27th day of September, 2018

Blaine O'Neil
 Notary Public, ~~Wayne County, Michigan~~ 52nd St, Oakland County, Commonwealth of Massachusetts
 My Commission Expires: April 13, 2023



FOR OFFICIAL USE ONLY

Amount of fee paid: _____ Date of payment: \$25.00
09/28/18