

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>
--	--

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>
---	--

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:**


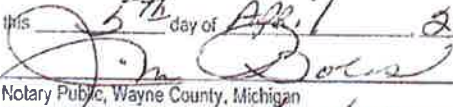
DATE OF ANNUAL REGISTRATION <b>1 6 2023</b> Month Day Year	THIS REGISTRATION IS VALID: From <b>1 6 2023</b> Month Day Year To <b>1 6 2024</b> Month Day Year	Amount of fee paid: <b>\$125.00</b> Date of payment: <b>1/6/2023</b>
--	---	---

KN

# 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

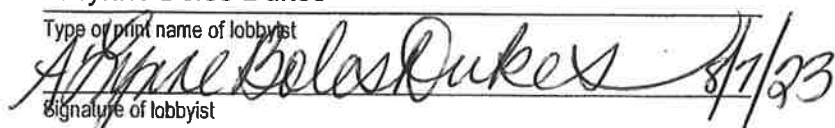
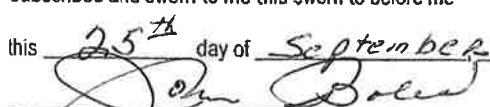
<b>1. LOBBYIST'S NAME</b> <b>A'Lynne Boles Dukas</b>		<b>2. LOBBYIST'S ID NUMBER</b> <b>2023-1</b>	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) <b>26555 Evergreen Rd. Ste. 530 Southfield, MI 48076</b>		<b>4. TELEPHONE NUMBER(S)</b> <b>(51) 899-3447 ( ) _____</b>	
<input checked="" 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> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 30%;"> <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: 65%;"> <p style="text-align: center; font-weight: bold;">I scheduled and attended introductory meetings with Council Membe</p> </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div style="width: 30%;"> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.                 </div> </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. \$ <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. \$ _____
<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>			
FOR OFFICIAL USE ONLY:			
Amount of fee paid: <b>\$25.00</b>		Date of payment: <b>4/10/23</b>	

K

#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 (241) 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.)  <p style="text-align: center;">I provided educational information to Councilmembers regarding a F</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>
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>  <p style="text-align: center; color: red;">KW</p>			