CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

REGISTRANT'S NAME (Only one person may register with this form) Cortney Goddard	2. REGISTRANT'S ID NUMBER
3. BUSINESS ADDRESS (All mail will be sent to this address) 208 North Capitol Ave. 3rd Floor Lansing, MI 48933	4. TELEPHONE NUMBER(S) (517)371-1400 ()
A person anticipating expenditures of more lobbying a single public official (See definition of "lobbyist" on reverse)	ate(s)):ihan \$1,000 over the next twelve (12) months for than \$250.00 over the next twelve (12) months for
6. NAME AND ADDRESS OF CLIENT(S) See attached list.	9
7. VERIFICATION	100000
I swear, or affirm, that:	
a) During one (1) year preceding this registration, I have not held the position appointive officer, or any member of a board, commission or other voting body that or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been 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 at Cortney Goddard	t is established by either branch of City government a City appointee or City employee, or an individual
Type or print name of registrant Signature	
Notary Public Wayner County Michigan	NATASHA L. KIMMERLY IOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF INGHAM My Commission Expires January 1, 2027 Acting in the County of WALAM
FOR OFFICIAL USE ONLY:	
DATE OF ANNUAL REGISTRATION THIS REGISTATION IS VALID:	A STATE OF THE STA
5 21 2024 From 5 21 2	OZY Amount of fee paid:
Month Day Year To 5 21 2	Year Date of S/21/29

CITY OF DETROIT

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

4 LORBVIETIE NAMI				2 DEBUIGT	IC ID NI IMPER	
1. LOBBYIST'S NAME Cortney Goddard		2. LOBBYIST'S ID NUMBER 2024-9				
BUSINESS ADDRESS (All mail will be sent to this address)		4. TELEPHONE NUMBER(S)				
208 North Capitol Ave. 3rd Floor Lansing, MI 48933		(54) 371-1400				
IF THIS ADDRESS HA	AS CHANGED, CHECK SOX			☐ IF A NUMB	BER HAS CHANGED, CHECK BOX	
	AL REGISTRATION		6. PERIOD FO	R THIS REPOR	Т	
May	21	2024	☐ 1 st Quai	rter (ending 3 r	nonths after annual registration)	
Month	Day	Year	✓ 2nd Qua	rter (ending 6	months after annual registration)	
,	BY CITY CLERK'S OFFI STRATION FORM)	CE	3rd Quarter (ending 9 months after annual regis 4th Quarter (ending 12 months after annual regi			
7. NAME OF CLIENT DBG Detroit						
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER VERBAL AND WRITTEN COMMUNICATIONS WITH PUBLIC OFFI						
	I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.					
9. EXPENDITURES BY	CATEGORY		THIS REPORTIN	G QUARTER	REGISTRATION DATE THROUGH	
9a. COMPLIMENTARY CO	PIES OF TRADE PUBLICAT. FS, CALENDARS, PERIODIC	IONS, BOOKS,	9a. \$_0		END OF THIS QUARTER	
INFORMATIONAL MA	TERIALS				9b. \$ 0	
96. PAYMENTS TO OTHE	R PERSONS FOR LOBBYIN	G	9b. \$ 0			
9c. ALL OTHER LOBBYIN	L OTHER LOBBYING EXPENDITURES			9c. \$ 0		
9d. TOTAL LOBBYING EX	(PENDITURES (TOTAL OF 9	a, 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.					
Cortney Go	Cortney Goddard					
Type or print name of lobbyist Signature of lobbyist						
Subscribed and swom to me this sworn to before me this day of Word County Of Ingham My Commission Expires January 1, 2027 Acting in the County of My My My Commission Expires January 1, 2027						
FOR OFFICIAL USE	ONLY:	t of fee paid: ¥29	5,00	Date of paymer	12/2/24	

CITY OF DETROIT

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

1. LOBBYIST'S NAME		2. LOBBYIST'S ID NUMBER		
Cortney Goddard		2024-9		
BUSINESS ADDRESS (All mail will be sent to this address)		4. TELEPHONE NUMBER(S)		
208 North Capitol Ave. 3rd Floor Lansing, MI 48933		(51) 371-1400 ()		
IF THIS ADDRESS HAS CHANGED, CHECK SOX			IF A NUMB	ER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION		6. PERIOD FO	R THIS REPOR	Т
May 21	2024	☐ 1st Quar	nonths after annual registration)	
Month Day	Year	✓ 2nd Quar	months after annual registration)	
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		3rd Quarter (ending 9 months after annual reg		
7. NAME OF CLIENT Mannik & Smith Group				
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER VERBAL AND WRITTEN COMMUNICATIONS WITH PUBLIC OFFI				
I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.				
9. EXPENDITURES BY CATEGORY		THIS REPORTING	3 QUARTER	REGISTRATION DATE THROUGH
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATION REPORTS, PAMPHLETS, CALENDARS, PERIODICALS INFORMATIONAL MATERIALS	S, OR OTHER	9a. \$ <u>0</u>		END OF THIS QUARTER 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, 9		_{9d, \$} 0		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. Cortney Goddard				
Type or print name of loboyist Signature of lobbyis				
Subscribed and sworn to me this sworn to before me this day of NVWWW AND COUNTY OF INGHAM My Commission Expires January 1, 2027 Acting in the County of him ha m				
FOR OFFICIAL USE ONLY: Amount of fee paid: \$25.00 Date of payment: 12/2/2/29				

CITY OF DETROIT QUARTERLY REPORT

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

4 LODDVIOTIO NAME			In the human or
1. LOBBYIST'S NAME Cortney Goddard		2. LOBBYIST'S ID NUMBER 2024-9	
3. BUSINESS ADDRESS (All mail will be sent to this address)			NE NUMBER(S)
208 North Capitol Ave. 3rd Floor Lansing, MI 48933		(51) 371-1400 ()	
IF THIS ADDRESS HAS CHANGED, CHECK BOX	4	☐ IF A NUMB	PER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FO	R THIS REPOR	Т
May 21 2024	1st Quar	ter (ending 3 r	nonths after annual registration)
Month Day Year	✓ 2nd Qua	rter (ending 6	months after annual registration)
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		ter (ending 9 months after annual registration) ter (ending 12 months after annual registration)	
7. NAME OF CLIENT Oliver / Hatcher			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER VERBAL AND WRITTEN COMMUNICATIONS WITH PUBLIC OFFI			
I DID NOT ENGAGE IN LOBBYING ACTIV	ITY DURING THIS QUAR	TER.	÷
9. EXPENDITURES BY CATEGORY	THIS REPORTING	3 QUARTER	REGISTRATION DATE THROUGH
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER 9a. \$ 0			end of this quarter
INFORMATIONAL MATERIALS	9b. \$ O		9b. \$ O
o a O			_{9c. \$} 0

9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d. \$ 0	9d.	9d. \$_O
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.			
Cortney Goddard			
Type or print name of lobbyist Signature of lobbyist			
Subscribed and sworn to me this sworn to before me this day of NVMWW AND NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF INGHAM My Commission Expires January 1, 2027 Notary Public, Wayne County, Michigan Acting in the County of Ingham My Commission Expires My Commission My Commission Expires My Commission			
FOR OFFICIAL USE ONLY: Amount of fee peid: \$\frac{\pm}{25}\$.00.	Date of paymen	12/2/24

CITY OF DETROIT

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

1. LOBBYIST'S NAME Cortney Goddard		2. LOBBYIST'S ID NUMBER 2024-9		
BUSINESS ADDRESS (All mail will be sent to this address)		4. TELEPHONE NUMBER(S)		
208 North Capitol Ave. 3rd Floor Lansing, MI 48933		(51) 371-1400 ()		
IF THIS ADDRESS HAS CHANGED, CHECK BOX		☐ IF A NUMB	ER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FOR THIS REPORT		Т	
May 21 2024	1st Quarter (ending 3 months after annual registra 2nd Quarter (ending 6 months after annual registra 3rd Quarter (ending 9 months after annual registra 4th Quarter (ending 12 months after annual registra			
Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)				
7. NAME OF CLIENT Rehmann	7. NAME OF CLIENT			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER VERBAL AND WRITTEN COMMUNICATIONS WITH PUBLIC OFFI L DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER. 1 ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) VERBAL AND WRITTEN COMMUNICATIONS WITH PUBLIC OFFI L DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.				
	T DONING THIS QUART	cn.		
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. \$_0	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	9b. \$ <u>O</u>		9b. \$ 0	
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ O		9c. \$ 0	
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. Cortney Goddard Type or print name of obbyist Signature of lobbyist Subscribed and sworn to me this sworn to before me this day of NATASHA L. KIMMERLY NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF INGHAM My Commission Expires January 1, 2027 Acting in the County of Ingham FOR OFFICIAL USE ONLY:				
FOR OFFICIAL USE ONLY: Amount of fee paid: \$25.00 Date of payment: 12/2/2/24				

CITY OF DETROIT SUPPLEMENT TO LOBBYIST REGISTRATION

TO ADD OR REMOVE CLIENTS

1. LOBBYIST'S NAME	2. LOBBYIST'S ID NUMBER		
Cortney Goddard	2024-09		
BUSINESS ADDRESS (All mail will be sent to this address)	4. TELEPHONE NUMBER(S)		
208 North Capitol Ave. 3rd Floor Lansing, MI 48933	(51) 371-1400 ()		
☐ IF THIS ADDRESS HAS CHANGED, CHECK BOX	IF A NUMBER HAS CHANGED, CHECK BOX		
5. NAME AND ADDRESS OF CLIENT(S)			
Effective,, I do not represent the follows:	wing client(s):		
	,		
Effective. 11/21/2024, I represent the following of	lienl(s):		
Chick-fil-A, Inc.			
5200 Buffington Road Atlanta, GA 30349			
6. VERIFICATION			
I swear, or affirm, that all reasonable diligence was used in preparation of this f best of my knowledge.	orm, and the contents are true and accurate to the		
Cortney Goddard			
Type or print name of lobbyist	NATASHA L. KIMMERLY		
Signature of Johnster	COUNTY OF INGHAM		
Subscribed and sworn to me this sworn to before me	Acting in the County of In / Il A M		
this 349 day of NV lumber 7024			
Mygna L Way			
My Commission Expires Man 01-0 7007			
FOR OFFICIAL USE ONLY: Amount of fee paid: \$ 15.00	Date of payment: 12/2/24		