

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) Sam Boumis	2. REGISTRANT'S ID NUMBER 2017-29										
3. BUSINESS ADDRESS (All mail will be sent to this address) Scopes & Associates Consulting, Inc 535 N Capitol Ave Lansing MI 48933	4. TELEPHONE NUMBER(S) (517) 485-5536										
5. TYPE OF LOBBYIST (Check all applicable boxes.) <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/></td> <td>Registered lobbyist under Federal Law</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Registered lobbyist under Michigan Law</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Registered lobbyist in other states (name state(s)):</td> </tr> <tr> <td><input type="checkbox"/></td> <td>A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>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)</td> </tr> </table>		<input type="checkbox"/>	Registered lobbyist under Federal Law	<input checked="" type="checkbox"/>	Registered lobbyist under Michigan Law	<input type="checkbox"/>	Registered lobbyist in other states (name state(s)):	<input type="checkbox"/>	A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials	<input checked="" 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) Genesys Telecommunications Laboratories 2001 Junipero Serra Blvd Daly City CA 94014											
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. Sotirios (Sam) Boumis Type or print name of registrant Signature Subscribed and sworn to me this sworn to before me this 4 day of Dec 2017 Notary Public, Wayne County, Michigan My Commission Expires 06-12-2022											
<div style="border: 1px solid black; padding: 5px; text-align: center;"> NICOLE L ROGERS NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF INGHAM My Commission Expires June 12, 2022 Acting in the County of Eaton </div>											
FOR OFFICIAL USE ONLY: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;"> DATE OF ANNUAL REGISTRATION Month: _____ Day: _____ Year: _____ </td> <td style="width: 33%; padding: 5px;"> THIS REGISTRATION IS VALID: From: _____ Month Day Year To: _____ Month Day Year </td> <td style="width: 33%; padding: 5px;"> Amount of fee paid: _____ Date of payment: _____ </td> </tr> </table>		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: _____							
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**CITY OF DETROIT
QUARTERLY REPORT**

OFFICE OF THE
DETROIT CITY CLERK

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


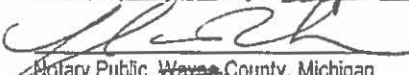
2018 AUG 28 P 12:53

1. LOBBYIST'S NAME <u>Sam Boumis</u>		2. LOBBYIST'S ID NUMBER <u>2017 - 29</u>	
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>Scopes & Associates Consulting, Inc.</u> <u>535 N. Capitol Avenue</u> <u>Wansing, MI 48933</u>		4. TELEPHONE NUMBER(S) <u>517-485-5536</u>	
<input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION <u>December 4, 2017</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 <u>Genesys Telecommunications Laboratories</u>			
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		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>0.00</u>	9a. \$ <u>0.00</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING		9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>0.00</u>	9d. \$ <u>0.00</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. <u>Sam Boumis</u> Type or print name of lobbyist <u>Sam Boumis</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>8</u> day of <u>August</u> <u>2018</u> <u>Angela S Rich</u> Notary Public, <u>Eaton</u> County, Michigan My Commission Expires: <u>2/15/2021</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$ 25.00</u> Date of payment: <u>08/28/2018</u>			

ANGELA S RICH
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF EATON
My Commission Expires Feb. 15, 2021
Acting in the County of Sagamore

OFFICE OF THE
CITY OF DETROIT DETROIT CITY CLERK
QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR MICHIGAN P 2: 30
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

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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. Sam Boumis Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 14 day of September, 2018  Notary Public, Wayne County, Michigan My Commission Expires: 2/15/2021																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 5px;"> FOR OFFICIAL USE ONLY: Amount of fee paid: \$ 25.00 </td> <td style="width:50%; padding: 5px;"> Date of payment: 9/20/2018 </td> </tr> </table>		FOR OFFICIAL USE ONLY: Amount of fee paid: \$ 25.00	Date of payment: 9/20/2018													
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ANGELA S RICH
 NOTARY PUBLIC - STATE OF MICHIGAN
 COUNTY OF EATON
 My Commission Expires Feb. 15, 2021
 Acting in the County of Wayne

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

**OFFICE OF THE
DETROIT CITY CLERK**

2019 JAN 30 A 9 18

1. REGISTRANT'S NAME (Only one person may register with this form) Sam Boumris	2. REGISTRANT'S ID NUMBER 2017-29
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3. BUSINESS ADDRESS (All mail will be sent to this address) Scopes & Associates Consulting, Inc. 535 N. Capitol Avenue Lansing, MI 48933	4. TELEPHONE NUMBER(S) 517 485 5536 () () ()
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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)) _____

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(See definition of "lobbyist" on reverse)

6. NAME AND ADDRESS OF CLIENT(S)

**Genesys Telecommunication Laboratories
2001 Junipero Sara Blvd.
Daly City, CA 94014**

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.

Sam Boumris
Type or print name of registrant

Sam Boumris
Signature

Subscribed and sworn to me this 10 day of January 2019

Angela S Rich
Notary Public, Wayne County, Michigan
My Commission Expires: 2/15/2021

ANGELA S RICH
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF EATON
My Commission Expires Feb. 15, 2021
Acting in the County of Eaton

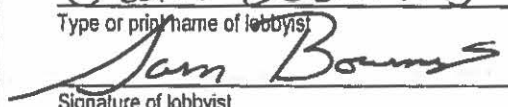

FOR OFFICIAL USE ONLY:

DATE OF ANNUAL REGISTRATION <u>12</u> - <u>4</u> - <u>2017</u> Month Day Year	THIS REGISTRATION IS VALID: From _____ Month Day Year To _____ Month Day Year	Amount of fee paid: <u>\$ 125.00</u> Date of payment: <u>01/30/19</u>
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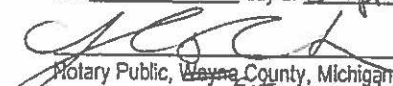
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CITY OF DETROIT QUARTERLY REPORT

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2019 APR 10 P 3:13
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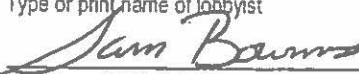
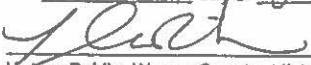
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DETROIT CITY CLERK**

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

MAY 17 10:07

1. LOBBYIST'S NAME <u>Sam Boumris</u>	2. LOBBYIST'S ID NUMBER <u>2017-29</u>															
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>Scopes & Associates Consulting Inc.</u> <u>535 N. Capitol Avenue</u> <u>Lansing, MI 48933</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) <u>() () () () () ()</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
5. DATE OF ANNUAL REGISTRATION <u>Jan. 30 2019</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 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 <u>Genesis Telecommunications Laboratories</u>																
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <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: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. \$ <u>0.00</u></td> <td style="padding: 2px;">9a. \$ <u>0.00</u></td> </tr> <tr> <td style="padding: 2px;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING</td> <td style="padding: 2px;">9b. \$ <u>0.00</u></td> <td style="padding: 2px;">9b. \$ <u>0.00</u></td> </tr> <tr> <td style="padding: 2px;">9c. ALL OTHER LOBBYING EXPENDITURES</td> <td style="padding: 2px;">9c. \$ <u>0.00</u></td> <td style="padding: 2px;">9c. \$ <u>0.00</u></td> </tr> <tr> <td style="padding: 2px;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)</td> <td style="padding: 2px;">9d. \$ <u>0.00</u></td> <td style="padding: 2px;">9d. \$ <u>0.00</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>0.00</u>	9a. \$ <u>0.00</u>	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>	9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d. \$ <u>0.00</u>	9d. \$ <u>0.00</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. <u>Sam Boumris</u> <small>Type or print name of lobbyist</small>  <small>Signature of lobbyist</small> Subscribed and sworn to me this sworn to before me this <u>10</u> day of <u>May</u> , <u>2019</u>  <small>Notary Public, Wayne County, Michigan</small> My Commission Expires <u>2/15/2021</u>																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 5px;"> FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$ 25.00</u> </td> <td style="width:50%; padding: 5px;"> Date of payment: <u>05/17/19</u> </td> </tr> </table>		FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$ 25.00</u>	Date of payment: <u>05/17/19</u>													
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ANGELA S RICH
 NOTARY PUBLIC - STATE OF MICHIGAN
 COUNTY OF EATON
 My Commission Expires Feb. 15, 2021
 Acting in the County of Eaton

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)

2019 SEP 6 P 1:58

1. LOBBYIST'S NAME <u>Sam Boumis</u>	2. LOBBYIST'S ID NUMBER <u>2017-29</u>
---	---

3. BUSINESS ADDRESS (All mail will be sent to this address) <u>Scopes & Associates Consulting Inc</u> <u>535 N. Capitol Avenue</u> <u>Lansing, MI 48933</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) <u>517-485-5536</u> <u>() () ()</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
---	--

5. DATE OF ANNUAL REGISTRATION <u>Jan 30 2019</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 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 Genesis Telecommunications Laboratories

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>0.00</u>	9a. \$ <u>0.00</u>
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9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0.00</u>	9d. \$ <u>0.00</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.

Sam Boumis
 Type or print name of lobbyist

Sam Boumis
 Signature of lobbyist

Subscribed and sworn to me this sworn to before me
 this 23rd day of August 2019

M Shannon Fohlbrook
 Notary Public, Wayne County, Michigan
 My Commission Expires: 8-24-2019

M SHANNON FOHLBROOK
 NOTARY PUBLIC - STATE OF MICHIGAN
 COUNTY OF EATON
 My Commission Expires August 19, 2024
 Acting in the County of Ingham

FOR OFFICIAL USE ONLY:

Amount of fee paid: \$ 25.00 Date of payment: 9/6/2019

**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
2019 DEC -3 A 10:23

1. LOBBYIST'S NAME <u>Sam Boumis</u>	2. LOBBYIST'S ID NUMBER <u>2017-29</u>															
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>Scopes & Associates Consulting Inc.</u> <u>535 N. Capitol Ave.</u> <u>Warrens, MI 48093</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) <u>() 517-485-5534 ()</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
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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. <u>Sam Boumis</u> <small>Type or print name of lobbyist</small> <u>Sam Boumis</u> <small>Signature of lobbyist</small> Subscribed and sworn to me this sworn to before me this <u>18</u> day of <u>November</u> , <u>2019</u> <u>[Signature]</u> <small>Notary Public, Wayne County, Michigan</small> My Commission Expires: <u>11/09/2021</u> <div style="text-align: right;"> MALCOLM THURMOND NOTARY PUBLIC - MICHIGAN GRATIOT COUNTY MY COMMISSION EXPIRES 11/09/2021 ACTING IN <u>Eaton</u> </div>																
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$ 25⁰⁰</u> Date of payment: <u>12/03/2019</u>																

**CITY OF DETROIT
LOBBYIST REGISTRATION**

OFFICE OF THE
DETROIT CITY CLERK

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM) 2020 JAN -2 P 1:27

1. REGISTRANT'S NAME (Only one person may register with this form) Sam Boumis	2. REGISTRANT'S ID NUMBER 2017-29
3. BUSINESS ADDRESS (All mail will be sent to this address) Scofes & Associates, Inc. 535 N. Capitol Avenue Lansing, MI 48933	4. TELEPHONE NUMBER(S) (517) 485-5536

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)
Genesys Telecommunications Laboratories
 2001 Junipero Serra Blvd.
 Daly City, CA 94014

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.

Sam Boumis
 Type or print name of registrant

Sam Boumis
 Signature

Subscribed and sworn to me this sworn to before me
 this 20 day of December, 2019

C-E A
 Notary Public, Wayne County, Michigan
 My Commission Expires 6/2/2024

CARRIE EARNEST
 NOTARY PUBLIC - STATE OF MICHIGAN
 COUNTY OF EATON
 My Commission Expires June 02, 2024
 Acting in the County of Ingham

FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION <u>01 - 30 - 2017</u> Month Day Year	THIS REGISTRATION IS VALID: From <u>01 - 30 - 2020</u> Month Day Year to <u>01 - 30 - 2021</u> Month Day Year	Amount of fee paid: <u>\$ 125.00</u> Date of payment: <u>01-02-2020</u>

CITY OF DETROIT QUARTERLY REPORT

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

<p>1. LOBBYIST'S NAME <u>Sam Boumris</u></p>	<p>2. LOBBYIST'S ID NUMBER <u>2017-29</u></p>										
<p>3. BUSINESS ADDRESS (All mail will be sent to this address) <u>Scopes & Associates Consulting, Inc.</u> <u>535 N. Capitol Avenue</u> <u>Lansing, MI 48933</u></p> <p><input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX</p>	<p>4. TELEPHONE NUMBER(S) <u>517, 485 5534</u></p> <p><input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX</p>										
<p>5. DATE OF ANNUAL REGISTRATION <u>01 30 2017</u> Month Day Year <small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small></p>	<p>6. PERIOD FOR THIS REPORT</p> <p><input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)</p>										
<p>7. NAME OF CLIENT</p>											
<p>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</p> <p><input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small></p> <p><input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.</p>											
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<p>10. VERIFICATION</p> <p>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.</p> <p><u>Sam Boumris</u> Type or print name of lobbyist</p> <p><u>Sam Boumris</u> Signature of lobbyist</p> <p>Subscribed and sworn to me this sworn to before me this <u>12</u> day of <u>June</u>, 20<u>20</u></p> <p><u>Keith Wagner</u> Notary Public, Wayne County, Michigan <u>Eaton County</u> My Commission Expires: <u>October 15, 2025</u></p>											
<p>FOR OFFICIAL USE ONLY:</p> <p style="text-align: right;">Amount of fee paid: <u>\$ 25.00</u> Date of payment: <u>07.15.20</u></p>											

OFFICE OF THE
DETROIT CITY CLERK
2020 JUN 15 PM 4:05:11

S

**CITY OF DETROIT
LOBBYIST REGISTRATION**

**OFFICE OF THE
DETROIT CITY CLERK**

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

2021 JAN -6 P 3: 271

1. REGISTRANT'S NAME (Only one person may register with this form) Sam (Sotirios) Boumis	2. REGISTRANT'S ID NUMBER 2017-29
---	--

3. BUSINESS ADDRESS (All mail will be sent to this address) Scofes & Associates Consulting, Inc 535 N. Capitol Avenue Lansing, MI 48933	4. TELEPHONE NUMBER(S) (517) 485-5536
---	---

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)
 Genesys Telecommunication Laboratories
 2001 Junipero Sara Blvd.
 Daly City, CA 94014

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.

Sam Boumis / Sotirios Boumis
 Type or print name of registrant

Sam Boumis / Sotirios Boumis
 Signature

Subscribed and sworn to me this sworn to before me
 this 28 day of December, 2020
Stacey Sawdy
 Notary Public, Wayne County, Michigan
 My Commission Expires: September 21, 2024
Eaton County SS

Stacey Sawdy
 Notary Public - Michigan
 Clinton County
 Acting in the County of Eaton
 My Commission Expires September 21, 2023

2024SS

FOR OFFICIAL USE ONLY:

DATE OF ANNUAL REGISTRATION <u>01 / 30 / 20</u> Month Day Year	THIS REGISTRATION IS VALID From <u>01 - 30 - 21</u> Month Day Year To <u>01 - 30 - 22</u> Month Day Year	Amount of fee paid: <u>125.00</u> Date of payment: <u>01-06-2021</u>
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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)

OFFICE OF THE
DETROIT CITY CLERK

2021 MAR 12 P 1:37

1. LOBBYIST'S NAME Sam (Sotirios) Boumis	2. LOBBYIST'S ID NUMBER 2017-29
--	---

3. BUSINESS ADDRESS (All mail will be sent to this address) Scofes & Associates Consulting, Inc 535 N. Capital Avenue Lansing, MI 48933 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) (517) 4855536 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
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5. DATE OF ANNUAL REGISTRATION _____ Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input 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)
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7. NAME OF CLIENT
Genesys Telecommunications Laboratories

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
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0.00	9d. \$ 0.00

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.

SOTIRIOS Boumis
Type or print name of lobbyist

Sotirios Boumis
Signature of lobbyist

Subscribed and sworn to me this sworn to before me
this 5th day of March, 2021

Sara DeLeon
Notary Public, Wayne County, Michigan Eaton County MI
My Commission Expires: 02/28/23

SARA DE LEON
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF EATON
My Commission Expires 02/28/23
Acting in the County of Eaton

FOR OFFICIAL USE ONLY

Amount of fee paid \$ 25.00

Date of payment 03/12/2021

**CITY OF DETROIT
SUPPLEMENT TO LOBBYIST REGISTRATION
TO ADD OR REMOVE CLIENTS**

1. LOBBYIST'S NAME <u>Sam Boumis / Sotirios Boumis</u>	2. LOBBYIST'S ID NUMBER <u>2017-29</u>
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>Scopes & Associates Consulting, Inc</u> <u>535 N Capital Avenue</u> <u>Lansing, Michigan 48933</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) <u>(517) 485-5536 ()</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX

5. NAME AND ADDRESS OF CLIENT(S)

Effective April 30, 2021, I do not represent the following client(s):
Genesys Telecommunications Laboratories, Inc.
2001 Junipero Sera Blvd
Daly City CA 94014

Effective _____, I represent the following client(s):

6. 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.

Sam Boumis / SOTIRIOS BOUMIS
 Type or print name of lobbyist

[Signature]
 Signature of lobbyist

Subscribed and sworn to me this sworn to before me

this 24 day of May, 2021

[Signature]
 Notary Public, Wayne County, Michigan
 My Commission Expires: 9/20/2027

FOR OFFICIAL USE ONLY:

Amount of fee paid: _____ Date of payment: _____

Susan Lynn Droscha
 Notary Public - Michigan
 Ingham County

OFFICE OF THE
 DETROIT CITY CLERK
 2021 JUN - 1 P 481

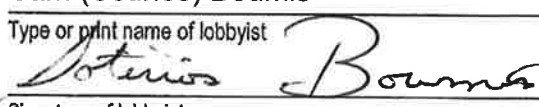
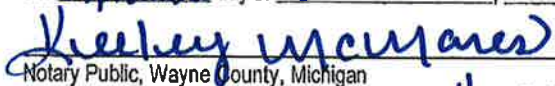
Acting in the County of Eaton, MI
 My commission expires September 20, 2027

**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

2021 SEP -9 A 11: 48

1. LOBBYIST'S NAME Sam (Sotirios) Boumis		2. LOBBYIST'S ID NUMBER 2017-29	
3. BUSINESS ADDRESS (All mail will be sent to this address) Scoles + Associates Consulting, Inc. 535 N. Capitol Ave. Lansing, MI 48933 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (517) 485-5536 <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION _____ 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 Carahsoft Technology Corporation			
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		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. \$ 0.00	9a. \$ 0.00
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0.00	9b. \$ 0.00
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0.00	9c. \$ 0.00
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0.00	9d. \$ 0.00
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. Sam (Sotirios) Boumis Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>September</u> day of <u>01</u> , <u>2021</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>October 4, 2027</u>			
FOR OFFICIAL USE ONLY:			
Amount of fee paid: <u>\$25.00</u>		Date of payment: <u>9/9/2021</u>	

**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)

2021 DEC - 6 P 12: 52

1. LOBBYIST'S NAME Sam (Sotirios) Boumis	2. LOBBYIST'S ID NUMBER 2017-29
--	---

3. BUSINESS ADDRESS (All mail will be sent to this address) <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) (51) 485-5536 <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
--	---

5. DATE OF ANNUAL REGISTRATION Month _____ Day _____ Year _____ <small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small>	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 type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
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7. NAME OF CLIENT
Carahsoft Technology Corporation

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.)

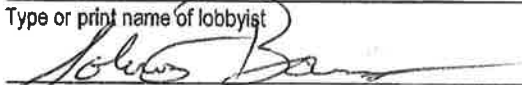
I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

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>0.00</u>	9a. \$ <u>0.00</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0.00</u>	9d. \$ <u>0.00</u>

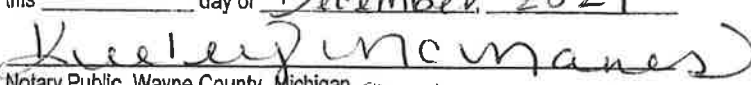
10. VERIFICATION

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.

Sam (Sotirios) Boumis
Type or print name of lobbyist


Signature of lobbyist

Subscribed and sworn to me this sworn to before me
this 1st day of December, 2021

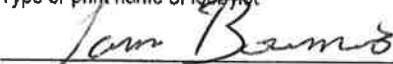



Notary Public, Wayne County, Michigan
My Commission Expires: October 4, 2027

FOR OFFICIAL USE ONLY:

Amount of fee paid: \$ 25.00 Date of payment: 12/6/2021

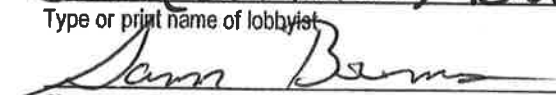
CITY OF DETROIT QUARTERLY REPORT

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

1. LOBBYIST'S NAME Sam (Sotirios) Boumis		2. LOBBYIST'S ID NUMBER 2017-29	
3. BUSINESS ADDRESS (All mail will be sent to this address) Scores + Associates Consulting 535 N. Capital Ave Lansing, MI 48933 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () 517-485-5536 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION _____ 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 Carahsoft Technology Corporation			
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		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. \$ 0.00	9a. \$ 0.00
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0.00	9b. \$ 0.00
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0.00	9c. \$ 0.00
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0.00	9d. \$ 0.00
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. Sam (Sotirois) Boumis Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>2nd</u> day of <u>June</u> <u>2022</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>10-04-2027</u>			
FOR OFFICIAL USE ONLY:			
Amount of fee paid: <u>\$25.00</u>		Date of payment: <u>June 4, 2022</u> 	

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 <u>Sam (Sotirios) Boumis</u>		2. LOBBYIST'S ID NUMBER <u>2017-29</u>	
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>Scofes & Associates Consulting, Inc.</u> <u>535 N. Capitol Ave.</u> <u>Lansing, MI 48933</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) <u>(517) 485-5536</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION _____ 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 <u>Carahsoft Technology Corporation</u>			
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.			
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9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ <u>0.00</u>	9a. \$ <u>0.00</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>0.00</u>	9d. \$ <u>0.00</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. <u>Sam (Sotirios) Boumis</u> Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>8th</u> day of <u>September, 2022</u> <u>Hueley Incunanes</u> Notary Public, Wayne County, Michigan My Commission Expires: <u>10-04-2027</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: _____ Date of payment: _____			

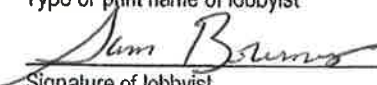
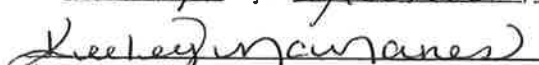
CITY CLERK 2022 SEP 19 14:15:22

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

2022 DEC -9 P 12:01

1. LOBBYIST'S NAME <u>Sam (Sotirios) Boumis</u>	2. LOBBYIST'S ID NUMBER <u>2017-29</u>															
3. BUSINESS ADDRESS (All mail will be sent to this address) <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) <u>(517) 485-5534</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
5. DATE OF ANNUAL REGISTRATION _____ 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 type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)															
7. NAME OF CLIENT <u>Caransoft Technology Corporation</u>																
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: right; padding: 2px;">9a. \$ <u>0.00</u></td> <td style="text-align: right; padding: 2px;">9a. \$ <u>0.00</u></td> </tr> <tr> <td style="padding: 2px;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....</td> <td style="text-align: right; padding: 2px;">9b. \$ <u>0.00</u></td> <td style="text-align: right; padding: 2px;">9b. \$ <u>0.00</u></td> </tr> <tr> <td style="padding: 2px;">9c. ALL OTHER LOBBYING EXPENDITURES</td> <td style="text-align: right; padding: 2px;">9c. \$ <u>0.00</u></td> <td style="text-align: right; padding: 2px;">9c. \$ <u>0.00</u></td> </tr> <tr> <td style="padding: 2px;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....</td> <td style="text-align: right; padding: 2px;">9d. \$ <u>0.00</u></td> <td style="text-align: right; padding: 2px;">9d. \$ <u>0.00</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>0.00</u>	9a. \$ <u>0.00</u>	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>	9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0.00</u>	9d. \$ <u>0.00</u>
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9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ <u>0.00</u>	9a. \$ <u>0.00</u>														
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0.00</u>	9d. \$ <u>0.00</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. <u>Sam (Sotirios) Boumis</u> Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>11th</u> day of <u>December</u> , <u>2022</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>October 4, 2027</u>																
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$ 25.00</u> Date of payment: <u>12/9/22</u>																

CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK

1. REGISTRANT'S NAME (Only one person may register with this form) Sam (Sotirios) Boumis	2. REGISTRANT'S ID NUMBER 2017-29
--	---

3. BUSINESS ADDRESS (All mail will be sent to this address) Scofes B Associates Consulting, Inc. 535 N. Capitol Ave. Lansing, MI 48933	4. TELEPHONE NUMBER(S) () () () 517-485-5536
--	--

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)
 Caransoft Technology Corporation
 11497 Sunset Hills Rd., Ste. 100
 Reston, VA 20190

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.

Sam (Sotirios) Boumis

Type or print name of registrant

Sam Boumis

Signature

Subscribed and sworn to me this sworn to before me

this 27th day of December, 2022

Jueley McManes

Notary Public, Wayne County, Michigan
 My Commission Expires: October 4, 2027

FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION 1 / 4 / 2023 <small>Month Day Year</small>	THIS REGISTRATION IS VALID: From 1 / 4 / 2023 <small>Month Day Year</small> To 1 / 4 / 2023 <small>Month Day Year</small>	Amount of fee paid: <u>\$125.00</u> Date of payment: <u>1/4/2023</u>

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

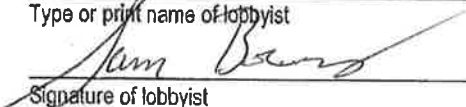
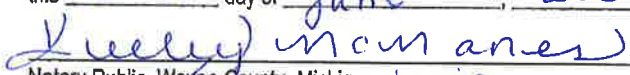
2023 MAR - 6 A 11:36

1. LOBBYIST'S NAME Sam (Sotirios) Boumis	2. LOBBYIST'S ID NUMBER 2017-29															
3. BUSINESS ADDRESS (All mail will be sent to this address) <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) (517) 485-5534 <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
5. DATE OF ANNUAL REGISTRATION Jan. 04, 2023 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input 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 Carahsoft Technology Corporation																
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <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="font-size: 0.8em;">9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS</td> <td style="text-align: center;">9a. \$ 0.00</td> <td style="text-align: center;">9a. \$ 0.00</td> </tr> <tr> <td style="font-size: 0.8em;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....</td> <td style="text-align: center;">9b. \$ 0.00</td> <td style="text-align: center;">9b. \$ 0.00</td> </tr> <tr> <td style="font-size: 0.8em;">9c. ALL OTHER LOBBYING EXPENDITURES</td> <td style="text-align: center;">9c. \$ 0.00</td> <td style="text-align: center;">9c. \$ 0.00</td> </tr> <tr> <td style="font-size: 0.8em;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....</td> <td style="text-align: center;">9d. \$ 0.00</td> <td style="text-align: center;">9d. \$ 0.00</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. \$ 0.00	9a. \$ 0.00	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 0.00	9b. \$ 0.00	9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0.00	9c. \$ 0.00	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0.00	9d. \$ 0.00
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0.00	9d. \$ 0.00														
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. Sam (Sotirios) Boumis <small>Type or print name of lobbyist</small> Sam Boumis <small>Signature of lobbyist</small> Subscribed and sworn to me this sworn to before me this 28th day of February , 2023 Keeley McManes <small>Notary Public, Wayne County, Michigan</small> My Commission Expires: October 4, 2027																
FOR OFFICIAL USE ONLY: Amount of fee paid: \$25.00 Date of payment: 3/6/23 K																

CITY OF DETROIT QUARTERLY REPORT

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

CITY CLERK 2023 JUN 15 09:15 AM

1. LOBBYIST'S NAME Sam (Sotirios) Boumis		2. LOBBYIST'S ID NUMBER 2017-29	
3. BUSINESS ADDRESS (All mail will be sent to this address) <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (577) 485-5536 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION 01 04 2023 <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 Carahsoft Technology Corporation			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <input checked="" type="checkbox"/> 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. \$ 0.00	9a. \$ 0.00
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0.00	9b. \$ 0.00
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0.00	9c. \$ 0.00
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0.00	9d. \$ 0.00
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. Sam (Sotirios) Boumis Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 8 th day of June, 2023  Notary Public, Wayne County, Michigan Ionia My Commission Expires: October 4, 2027			
FOR OFFICIAL USE ONLY:			
Amount of fee paid: \$25.00		Date of payment: 6/16/23	

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 Sam (Sotirios) Boumis		2. LOBBYIST'S ID NUMBER 2017-29	
3. BUSINESS ADDRESS (All mail will be sent to this address) <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) 517-485-5536 <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION <div style="display: flex; justify-content: space-around; align-items: center;"> 01 04 2023 </div> <div style="display: flex; justify-content: space-around; font-size: 0.8em; margin-top: 5px;"> Month Day Year </div> <p style="font-size: 0.8em;">(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</p>		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 Caransoft Technology Corporation			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div style="width: 60%;"> <input 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: 35%; text-align: center;"> <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER. </div> </div>			
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. \$ 0.00	9a. \$ 0.00
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING		9b. \$ 0.00	9b. \$ 0.00
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0.00	9c. \$ 0.00
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		9d. \$ 0.00	9d. \$ 0.00
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. Sam (Sotirios) Boumis <small>Type or print name of lobbyist</small> Sam Boumis <small>Signature of lobbyist</small> Subscribed and sworn to me this sworn to before me this 7th day of September, 2023 Heeley McNamara <small>Notary Public, Wayne County, Michigan</small> <small>My Commission Expires: _____</small>			
FOR OFFICIAL USE ONLY: <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 10px;"> Amount of fee paid: \$25.00 Date of payment: 9/8/23 </div> <div style="text-align: center; margin-top: 5px;"> K6 </div>			

CITY OF DETROIT QUARTERLY REPORT

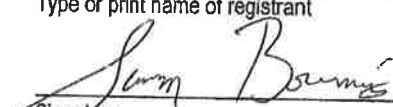
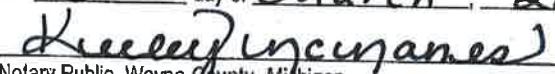
RECEIVED DEC 08 2023

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

1. LOBBYIST'S NAME Sam (Sotirios) Boumis		2. LOBBYIST'S ID NUMBER 2017-29	
3. BUSINESS ADDRESS (All mail will be sent to this address) 535 Norh Capital Avenue; Lansing, MI 48933		4. TELEPHONE NUMBER(S) () 485-5536 () _____	
<input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION 01042023 Month Day Year <small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small>		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 type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT Carahsoft Technology corporation			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <input checked="" type="checkbox"/> 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>0.00</u>	9a. \$ <u>0.00</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>0.00</u>	9d. \$ <u>0.00</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. <u>Sam Sotirios Boumis</u> SAM Boumis Type or print name of lobbyist <u>Sam Sotirios Boumis</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>4th</u> day of <u>December, 2023</u> <u>Keelley Mancanes</u> Notary Public, Wayne County, Michigan My Commission Expires: <u>October 4, 2027</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$25.00</u> Date of payment: <u>12/8/23</u> KW			

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

RECEIVED MAR 10 2024
RECEIVED MAR 10 2024

1. REGISTRANT'S NAME (Only one person may register with this form) Sam (Sotirios) Boumis	2. REGISTRANT'S ID NUMBER 2017-29
3. BUSINESS ADDRESS (All mail will be sent to this address) Scofes & Associates Consulting, Inc. 535 N. Capitol Ave. Lansing, MI 48933	4. TELEPHONE NUMBER(S) () _____ () _____ 517-485-5534
5. TYPE OF LOBBYIST (Check all applicable boxes.) <ul style="list-style-type: none"> <input type="checkbox"/> Registered lobbyist under Federal Law <input checked="" type="checkbox"/> Registered lobbyist under Michigan Law <input type="checkbox"/> Registered lobbyist in other states (name state(s)): _____ <input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials <input checked="" 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) 	
6. NAME AND ADDRESS OF CLIENT(S) Carahsoft Technology Corporation 11493 Sunset Hills Rd.m Ste 100 Reston, VA 20190	
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. <p align="center">Sam (Sotiroios) Boumis</p> _____ Type or print name of registrant  _____ Signature Subscribed and sworn to me this sworn to before me this <u>5th</u> day of <u>March</u> , <u>2024</u>  _____ Notary Public, Wayne County, Michigan My Commission Expires: <u>10-04-2027</u>	

FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION 3 8 2024 Month Day Year	THIS REGISTRATION IS VALID: From 3 8 2024 Month Day Year To 3 8 2025 Month Day Year	Amount of fee paid: 4125.00 Date of payment: 3/8/24

CITY OF DETROIT QUARTERLY REPORT

RECEIVED SEP 19 2024

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

1. LOBBYIST'S NAME Sam (Sotirios) Boumis		2. LOBBYIST'S ID NUMBER 2017-29							
3. BUSINESS ADDRESS (All mail will be sent to this address) 535 N. Capital Ave. Lansing, MI 48933 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (517) 485-5536 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX							
5. DATE OF ANNUAL REGISTRATION <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; width: 25%;">03</td> <td style="border-bottom: 1px solid black; width: 25%;">05</td> <td style="border-bottom: 1px solid black; width: 25%;">2024</td> </tr> <tr> <td style="font-size: small;">Month</td> <td style="font-size: small;">Day</td> <td style="font-size: small;">Year</td> </tr> </table> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		03	05	2024	Month	Day	Year	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
03	05	2024							
Month	Day	Year							
7. NAME OF CLIENT Carasoft Technology Corporation									
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		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. \$ 0.00	9a. \$ 0.00						
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0.00	9b. \$ 0.00						
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0.00	9c. \$ 0.00						
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0.00	9d. \$ 0.00						
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. <u>Sam Boumis</u> Type or print name of lobbyist <u>[Signature]</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>13th</u> day of <u>September, 2024</u> <u>[Signature]</u> Notary Public, Wayne County, Michigan My Commission Expires: <u>October 4, 2027</u>									
FOR OFFICIAL USE ONLY:									
Amount of fee paid <u>\$ 25.00</u>		Date of payment <u>9/19/24</u>							

K

RECEIVED DEC 17 2017

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) Sam (Sotirios) Boumis	2. REGISTRANT'S ID NUMBER 2017-29
--	---

3. BUSINESS ADDRESS (All mail will be sent to this address) Scofes & Associates Consulting, Inc. 535 N. Capitol Ave. Lansing, MI 48933	4. TELEPHONE NUMBER(S) <u>() () () () () ()</u> 517-485-5536
--	---

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)
Carahsoft Technology Corporation
11493 Sunset Hills Rd., Ste 100
Reston, VA 20190

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.

Sam (Sotiroios) Boumis
Type or print name of registrant

Signature

Subscribed and sworn to me this sworn to before me

this 7th day of January, 2025

Wesley L. McManes
Notary Public, Wayne County, Michigan
My Commission Expires: Oct 4, 2027

FOR OFFICIAL USE ONLY:

DATE OF ANNUAL REGISTRATION <u>1</u> / <u>17</u> / <u>2025</u> Month Day Year	THIS REGISTRATION IS VALID: From <u>1</u> / <u>17</u> / <u>2025</u> Month Day Year To <u>1</u> / <u>17</u> / <u>2026</u> Month Day Year	Amount of fee paid: <u>\$125.00</u> Date of payment: <u>1/17/25</u>
--	--	--