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

OFFICE OF THE DETROIT CITY CLERK

REGISTRANT'S NAME (Only one person may register with this form)	2. REGISTRANT'SUNMER UP 3: 1
Elizabeth Kutter	2017-16
3. BUSINESS ADDRESS (All mail will be sent to this address)	4. TELEPHONE NUMBER(S)
Henry Ford Health Sustem	(33) 574-1375
Detroit, m1 48202	
	(313) 876-8484
(Check all applicable boxes.)  Registered lobbyist under Michigan Law Registered lobbyist in other states (name sta	te(s)):
Type or print name of registrant	-
Subscribed and swom to me this swom to before me	- TOTAL TO AL AMETINATIO
Notary Public, Wayne County, Michigan My Commission Expires: 03/25/2021	ESTHER M. MARTINEZ  NOTARY PUBLIC, STATE OF MI  COUNTY OF WAYNE  MY COMMISSION EXPIRES MAY 25, 2021  ACTING IN COUNTY OF WAYNE
FOR OFFICIAL USE ONLY:	
DATE OF ANNUAL REGISTRATION . THIS REGISTATION IS VALID:	Amount of fee paid
Month Cay Year 13 To	ear Date pt payrent
are country that are a 1955年 (1955年 1956年 19	<ul> <li>1 中 1 中 1 中 2 中 2 年 2 年 2 年 2 年 2 年 2 年 2 年 2 年 2</li></ul>

# OFFICE OF THECITY OF DETROIT DETROIT CITY QUARTERLY REPORT ZOIS JUSTEM READ HOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

1. LOBBYIST'S NAME	2. LOBE	BYIST'S ID NUMBER
Elizabeth Kutter		2017-16
3. BUSINESS ADDRESS (All mail will be sent to this address)	4. TELE	PHONE NUMBER(S)
I Fond Place 4AB	(313)	574 375 1
Octrot MI 48202	` _	
IF THIS ADDRESS HAS CHANGED, CHECK BOX	□ IF A	NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FOR THIS RE	PORT
8 14 17	1st Quarter (endir	ng 3 months after annual registration)
Month Day Year	2nd Quarter (endi	ng 6 months after annual registration)
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	4th Quarter (endir	ng 9 months after annual registration) ng 12 months after annual registration)
	<u> </u>	
Henry ford H	ealth Syste	M
8. DESCRIPTION I ENGAGED IN LÖBBYING ACTIVITY DUR OF LOBBYING (Provide a brief description and, if necessar	ING THIS QUARTER. ry, attach additional sheets.)	
ACTIVITY DURING THIS QUARTER	- ·	
I DID NOT ENGAGE IN LOBBYING ACTIVI	TY DURING THIS QUARTER.	
9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTE	R REGISTRATION DATE THROUGH
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS,		END OF THIS QUARTER
REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a.\$	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.	9b. \$ ()	9b.\$
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ C	9c.\$ &
	~1	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d. \$	9d. \$
10. VERIFICATION		
I swear, or affirm, that all reasonable diligence was used in p	reparation of this form, and the	contents are true and accurate to the
dest of my knowledge,		
Elizabeth Kutter		,0N
Type or print name of lobbyist		
hian Roll		
Styriature of lobbyist		
Subscribed and swom to me this swom to before me		
this 28 day of June, 20	3/8	ESTHER M. MARTINEZ
( the land yet) to		NOTARY PUBLIC, STATE OF MI COUNTY OF WAYNE
Notary Public, Wayne County, Michigan	MY ACTH	COMMISSION EXPIRES Mar 25, 2021 NG IN COUNTY OF WOUND
My Commission Expires: <u>83-25-2621</u>		Wugh
HOROTEGATOREON SANTA TO THE SANTA SA	e de la company de la comp	
anound leading 22. D		mar routly b & Taniu

OFFICE OF THE DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT OCT 18 A 9: 46 (PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM).

4 1 2 2 2 2 2 2		
1. LOBBYIST'S NAME		2. LOBBYIST'S ID NUMBER
Elizabeth Kutter	<u></u>	2017-16
3. BUSINESS ADDRESS (All mail will be sent to this address)		4. TELEPHONE NUMBER(S)
1 FORD PLACE 4 A/B		BB1574 1375
Octrot, MI 48202.		, , , , , , , , , , , , , , , , , , , ,
IF THIS ADDRESS HAS CHANGED, CHECK BOX		IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FO	R THIS REPORT
Month Day Year	1st Quar	ter (ending 3 months after annual registration) ter (ending 6 months after annual registration)
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	3rd Quan	ter (ending 9 months after annual registration) ter (ending 12 months after annual registration)
7. NAME OF CLIENT Henry Ford HEA	lth Syst	-cm
8. DESCRIPTION OF LOBBYING OF LOBBYING ACTIVITY DURING THIS QUARTER  1 ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) THIS QUARTER		
☐ 1 DID NOT ENGAGE IN LOBBYING ACTIVE	TY DURING THIS QUART	ER.
9. EXPENDITURES BY CATEGORY	THIS REPORTING	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a.\$	END OF THIS QUARTER
9b. PAYMENTS TO OTHER PERSONS FOR LOSBYING	9b. \$	9h.\$
9c. ALL OTHER LOBBYING EXPENDITURES	9c.\$	_
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 92, 9b, & 9c)	9d. \$	9d. \$
10. VERIFICATION		
I swear, or affirm, that all reasonable diligence was used in probest of my knowledge.  Type or print name of lobbyist  Signature of lobbyist  Subscribed and swom to me this swom to before me this day of Accepted Notary Public, Wayne County, Michigan My Commission Expires: 2325	reparation of this form	ESTHER M. MARTINEZ NOTARY PUBLIC, STATE OF M. COUNTY OF WAYNE MY COMMISSION EXPIRED 12: 25, 2021 TING IN COUNTY OF WAYNE
ADIRO ARISEONIA		

## OFFICE OF THE DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT (PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FOR 2015 FEB -8 A 10: 45 I

1. LOBBYIST'S NAME	2.LC	DBBYIST'S ID NUMBER
Elizabeth Kutter		2017-16
3. BUSINESS ADDRESS (All mail will be sent to this address)		LEPHONE NUMBER(S)
1 Ford Place 4 A/B		1574 1375
Detroit, MI 48202		
IF THIS ADDRESS HAS CHANGED, CHECK BOX		F A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FOR THIS	REPORT
		nding 3 months after annual registration)
		nding 6 months after annual registration) nding 9 months after annual registration)
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		nding 12 months after annual registration)
7. NAME OF CLIENT HEWRY FORD HE	71/-d Sa.	STEM
8. DESCRIPTION   I ENGAGED IN LOBBYING ACTIVITY DUR		<i>51_C1-1</i>
OF LOBBYING (Provide a brief description and, if necessar ACTIVITY DURING	y, attach additional sheets.)	
THIS QUARTER		
I DID NOT ENGAGE IN LOBBYING ACTIVE	TY IN IRING THIS OLIARIER	
9. EXFENDITURES BY CATEGORY	THIS REPORTING QUAI	RTER REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER	9a.\$	9a.5
INFORMATIONAL MATERIALS	6	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	9b.\$	9b.\$
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$	9c.\$
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 5b, & 9c)	9d. \$	9d. \$
10. VERIFICATION		
I swear, or affirm, that all reasonable diligence was used in p best of my knowledge.	preparation of this form, and	i the contents are true and accurate to the
<u>Elizabeth</u> Kutter		
Type or print name of lobbyist		
Max Realth	<u> </u>	
Signature of lobbyist		
Subscribed and swom to me this swom to before me		
this Day of February, 26	319	ESTHER M. MARTINEZ NOTARY PUBLIC, STATE OF MI
Cotto you what his	M <sup>*</sup>	COUNTY OF WAYNE 75, 2021
Notary Public, Wayne County, Michigan		ING IN COUNTY OF L) aunc
My Commission Expires: 03-25 202/	· 	-
FOR OFFICIAL DISCONEY TO THE TOTAL THE TANK THE THE TANK THE TANK		
Amount of leg page	A Company of the Comp	Daymen C.2 6 70 B.07 (

# CITY OF DETROIT FICE OF THE QUARTERLY REPORTS CITY CLERK TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT OF THE PORT OF THE FORM OF THE THE FORM OF THE THE FORM OF THE PORT OF THE THE FORM OF THE PORT OF THE PORT OF T

1. LOBBYIST'S NAME	2. LOBBYIST'S ID NUMBER	_
Elizabeth Kulter	2017 - 16	
3. BUSINESS ADDRESS (All mail will be sent to this address)	4. TELEPHONE NUMBER(S)	
1 Ford Place 4 A/B	( )( }	
_ Detroit, MI 48002	313 - 574 - 1375	~
F THIS ADDRESS HAS CHANGED, CHECK BOX	F A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FOR THIS REPORT	
8 14 17	1ª Quarter (ending 3 months after annual registration)	
Month Day Year	2 <sup>nd</sup> Quarter (ending 6 months after annual registration)	
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	3rd Quarter (ending 9 months after annual registration) 4th Quarter (ending 12 months after annual registration)	)
7. NAME OF CLIENT HEARY FURN HEA	Ith System	
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER  I ENGAGED IN LOBBYING ACTIVITY DUR (Provide a brief description and, if necessar	ING THIS QUARTER. y, attach additional sheets.)	
I DID NOT ENGAGE IN LOSELYING ACTIVE	TY DURING THIS QUARTER.	
9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER REGISTRATION DATE THROUG	iH
91. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	Sa. \$	-
96. PAYMENTS TO OTHER PERSONS FOR LOSBYING	96.\$	-
9c. ALL OTHER LOBBYING EXPENDITURES	9c.\$ 0 9c.\$ 0	_
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF St., St., & Sc)	9d.\$	-
10. VERIFICATION		_
I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.  I 12a be the Kutter  Type or print name of lobbytet  Signature of lobbytet		
Subscribed and swom to me this swom to before me		
this 21 to day of JUNE 20	19	
Marca B. Mar		
Notary Public, Wayne County Michigan My Commission Expires: 03-20-2041	VERONICA B. MANEA  NOTARY PUBLIC, STATE OF MI  COUNTY OF OAKLAND	
		W.

# CITY OF DETROIT OFFICE OF THE QUARTERLY REPORT DETROIT CITY CLERK TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT (PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING 2019 1000 - 7 A 10: 29:

1. LOBBYIST'S NAME		2. LOBBYIST	'S ID NUMBER
Elizabeth Kutter		2017-16	
3. BUSINESS ADDRESS (All mail will be sent to this address)		4. TELEPHON	NE NUMBER(S)
1 Ford Place 4 A/B Detroit,MI 48202		(33) <u>574</u>	- 1375 ( )
IF THIS ADDRESS HAS CHANGED, CHECK BOX	<b>[+</b> ]	☐ IF A NUMB	ER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FO	R THIS REPOR	T
8 14 2017	П 450	tos londino 2 s	mantha affire an avail an sintention.
Month Day Year			months after annual registration) months after annual registration)
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	✓ 3 <sup>rd</sup> Quai	ter (ending 9 i	months after annual registration) months after annual registration)
7. NAME OF CLIENT Henry Ford Health System			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER  I ENGAGED IN LOBBYING ACTIVITY DUR (Provide a brief description and, if necessar		5.}	
I DID NOT ENGAGE IN LOSSYING ACTIVI	TY DURING THIS QUAR	TER.	
9. EXPENDITURES BY CATEGORY	THIS REPORTING	GUARTER	REGISTRATION DATE THROUGH
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ <u>0</u>		end of this quarter  9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	9b. \$ O		9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0		9c. \$ O
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d. \$ O		9d. <b>\$</b> O
10. VERIFICATION			
I sweer, 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.  Elizabeth Kutter  Type or print name of lobbyist  Subscribed and swom to me this swom to before me  this 30TH  day of DFOGSR, 2019  VERONICA B. MANEA NOTARY PUBLIC, STATE OF MI COUNTY OF OAKLAND  Notary Public, Wayne County, Michigan  My Commission Expires:			
FOR OFFICIAL USE ONLY Amount of fee paid: 4 25 2 2 Date of payment 1.1 . 0 7 . 19			

# 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) NOV - 7 A 10: 29

1. LOBBYIST'S NAME Elizabeth Kutter		/IST'S ID NUMBER	
	2017-	<del> </del>	
3. EUSINESS ADDRESS (All mail will be sent to this address)	1	HONE NUMBER(S)	
1 Ford Place 4 A/B Detroit,MI 48202	(313 <u>) 5</u>	74-1375	
IF THIS ADDRESS HAS CHANGED, CHECK 50X		UMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FOR THIS REI	PORT	
8 14 2017	1st Ouarter Jending	3 months after annual registration)	
Month Day Year		g 6 months after annual registration)	
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		g 9 months after annual registration) g 12 months after annual registration)	
7. NAME OF CLIENT Henry Ford Health System			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER  I ENGAGED IN LOBBYING ACTIVITY DURI (Provide a brief description and, if necessary)			
I DID NOT ENGAGE IN LOBBYING ACTIVIT	TY DURING THIS QUARTER.	,	
9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER		
93. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER	_	END OF THIS QUARTER	
REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ 0	_ 9a. \$ <u>0</u>	
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	
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.			
Elizabeth Kutter			
Type or print name of lobbyist			
Signature of lobbyist			
Subscribed and swom to me this swom to before me			
this 30TH day of OCTOBER 2019 VERONICA B. MANEA			
	COU	PUBLIC, STATE OF MI NTY OF OAKLAND	
Notary Public, Wayne County, Michigan			
My Commission Expires:			
FOR OFFICIAL USE ONLY:			
Amount of fee palor 4 25 Date of payment: 11.07.19			

CITY OF DETROIT OFFICE OF THE DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT (PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS VOKAD -5 A II: 38

1. LOBBYIST'S NAME		2. LOBBYIST'S ID NUMBER	
Elizabeth Kutter		2017-16	
BUSINESS ADDRESS (All mall will be sent to this address)		4. TELEPHONE NUMBER(S)	
I Ford Place 4 AlB		(313,5741375	
Detroit, MI 48202			
IF THIS ADDRESS HAS CHANGED, CHECK BOX		IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FOI	R THIS REPORT 2020	
2011	✓ 1st Quart	ter (ending 3 months after annual registration)	
July 160	2nd Quar	rter (ending 6 months after annual registration)	
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	4th Quart	ter (ending 9 months after annual registration) ter (ending 12 months after annual registration)	
7. NAME OF CLIENT HENRY FORd HER	Alth Sus	ten	
8. DESCRIPTION I ENGAGED IN LOBBYING ACTIVITY DUR	ING THIS QUARTER.		
OF LOBBYING	ry, attach additional sheets.	3.)	
THIS QUARTER			
I DID NOT ENGAGE IN LOBBYING ACTIVE	TY DURING THIS QUARTI	FR.	
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	9a. \$ O	9a. \$ O	
INFORMATIONAL MATERIALS	9b. \$ O	9h, \$ O	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	a	^	
9c. ALL OTHER LOBBYING EXPENDITURES	9c, \$ O	9c. \$	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d, \$ <u>O</u>	9d. \$	
10. VERIFICATION			
I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.			
Elizabeth kutter			
Type or print name of lobbyist			
Mass litt			
Signature of lobbyist			
Subscribed and swom to me this sworn to before me	Γ.	OLGA J. KIOUSIS	
this 30 th day of January, 20	100	NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF WAYNE	
Mar & Himmer	Act	My Commission Expires 08/20/2024 ting in the County of LUNVIVE	
Notary Public, Wayne County, Michigan			
My Commission Expires: AUG 20, 2024			
FOR OFFICIAL USE ONLY:	a judenje je	An appear of the second of the	
Amount of fee paid 425	Da	ate of payment: 02 - 05 - 2020	

### CITY OF DETROIT LOBBYIST REGISTRATION (PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM) 2020 FEB -5 A II: 38

OFFICE OF THE DETROIT CITY CLERK

REGISTRANT'S NAME (Only one person may register with this form)	2. REGISTRANT'S ID NUMBER
Elizabeth Kutter	2017-16
BUSINESS ADDRESS (All mail will be sent to this address)	4. TELEPHONE NUMBER(S)
I Ford Place 4 A/B	(313) 5741375
Detroit, MI 48202	
5. TYPE OF LOBBYIST (Check all applicable boxes.)  Registered lobbyist under Michigan Law Registered lobbyist in other states (name state A person anticipating expenditures of more that lobbying all public officials A person anticipating expenditures of more that lobbying a single public official (See definition of "lobbyist" on reverse)	an \$1,000 over the next twelve (12) months for
6. NAME AND ADDRESS OF CLIENT(S)	10.00
Henry Fond Health System 1 Ford Place 4 A/B	
Detroit, MI 48202	
7. VERIFICATION	
I swear, or affirm, that:	
a) During one (1) year preceding this registration, I have not held the position of appointive officer, or any member of a board, commission or other voting body that is or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a C who provided services to the City pursuant to a personal services contract; and	established by either branch of City government city appointee or City employee, or an individual
b) All reasonable diligence was used in preparation of this form, and the contents are ${\sf tr}$	ue and accurate to the best of my knowledge.
Elizabeth Kutter	
Type or print name of registrant	
signature Reel	
Subscribed and swom to me this swom to before me	
this 30 th day of January 2020 Olga & Kionsis	OLGA J. KIOUSIS  NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF WAYNE My Commission Expires 08/20/2024 ling in the County of
FOR OFFICIAL USE ONLY:	THE STANDARD CONTRACTOR OF THE STANDARD CONTRACT
DATE OF ANNUAL REGISTRATION THIS REGISTATION IS VALID:	
8-14 2019 From 8-14 - 20	Amount of fee paid: 1 135 Date of payment: 0 2+0 5 30 30
Month Day Year	Date of 07 to 6 -2020
To Par Year	

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
Elizabeth Kutter	2017-16
3. BUSINESS ADDRESS (All mail will be sent to this address)	4. TELEPHONE NUMBER(S)
1 Ford Place 4 AlB	(395741375) - 0
Detroit, MI 48202	
IF THIS ADDRESS HAS CHANGED, CHECK BOX	☐ IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION	6. PERIOD FOR THIS REPORT 2020
8 14 2017	1st Quarter (ending 3 months after annual registeration)
Month Day Year	2nd Quarter (ending 6 months after annual registration)
(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	3rd Quarter (ending 9 months after annual registration) 4th Quarter (ending 12 months after annual registration)
7. NAME OF CLIENT Henry Ford Hea	Hh System
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER  I ENGAGED IN LOBBYING ACTIVITY DURI. (Provide a brief description and, if necessary)	NG THIS QUARTER. r, attach additional sheets.)
I DID NOT ENGAGE IN LOBBYING ACTIVIT	Y DURING THIS QUARTER.
9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER REGISTRATION DATE THROUGH
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ O 9a. \$ O Pan S
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	9b. \$ O
9c. ALL OTHER LOBBYING EXPENDITURES	9c.\$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d. \$ 0
10. VERIFICATION	
Type or print name of lobbyist  Signature of lobbyist  Subscribed and sworn to me this sworn to before me	eparation of this form, and the contents are true and accurate to the
Notary Public, Wayne County, Michigan My Commission Expires: Aug. 20, 2024	My Commission Expires 08/20/2024 Acting in the County of Last Yale
FOR OFFICIAL USE ONLY: Amount of fee paid: 4 2	5 Date of payment: 07. 13 2020