

**REGISTRATION OF PRINCIPAL
EMPLOYING A LOBBYIST**

For Use In 2005

Return to Office of the City Clerk, 210 Martin Luther King, Jr. Blvd., Room 103, Madison, WI 53703-3342

Section 1 -- Identification of Principal

"Principal" means any person who employs a lobbyist.

Laree Allen, Laree Allen Kitchen: Bath Center
Name of Principal

Name of in-house person the City Clerk's Office may contact regarding lobbying issues:

Allen Last Name Gary First Name Owner Title

2507 W Bellvue Hwy
Mailing Address

Madison City WI State 53713 Zip Code

Business Address (if different)

608-663-6610
Contact Phone

608-774-9604
Contact FAX

galen@allenkitchen.com
Contact E-mail Address

Lallen@allenkitchen.com
Principal's Internet Address

Person to whom correspondence should be sent (if different from above)

Last Name

First Name

Firm or Organization Name

Mailing Address

City

State

Zip Code

Phone

FAX

E-mail Address

Section II -- Nature and Interest of Principal

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Check one of the following and complete only that section:

Business Entity

Kitchen + Bath design & remodeling
Describe the business activity in which the entity is engaged

Chief Executive Officer: _____
Last First Title

If partnership or limited liability company, check here and attach list of partners/members.

Industry, Trade or Professional Association

Describe the industry, trade or profession including any segment thereof which the association exclusively or primarily represents

Chief Executive Officer: _____
Last First Title

Approximate number of members: _____

Other Not for Profit

Governmental Labor Union Charitable/Religious/Civic, etc. Other

Briefly describe the organization's purpose and any other group with a common interest which the organization primarily represents

Describe any industry, trade, profession, or group with a common interest which the organization primarily represents or from which the organization's membership or financial support is primarily derived

Approximate number of members: _____

Individual

Name and address of the individual's employer, if any, or of the individual's primary place of business, if self-employed

Describe the business activity in which the individual or the individual's employer is engaged

Section III -- Areas of Lobbying

Provide a reasonably specific narrative summary of areas of legislative and administrative action the principal may attempt to influence:

None

List the City agencies in which the principal seek to influence administration action:

- All None Agencies listed below

Identify the proposed legislative or administrative action in connection with which the principal has made or intends to make a lobbying communication before December 31.

1. Item: None

- a. How will this item affect the principal's business or other activity?

- b. Which industry, trade, profession or segment or portion thereof would be principally affected?

- c. If the item is an appropriation, please identify the City program or person for which the appropriation is proposed and the approximate amount, if you know the amount.

For additional items, attach additional sheets.

2. If lobbying communication relates to the capital or operating budget, identify topic or topics.

CAPITAL BUDGET

OPERATING BUDGET

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

Section IV - Authorization of Lobbyists

The following lobbyists are authorized to represent the principal in proposed legislative or administrative action.

- 1. Lobbyist's Name: Gary Allen
Mailing Address: 2507 W Beltline Hwy Madison WI 53713
Address City State Zip Code
Phone No.: 608-663-6610
Indicate if: Contract Lobbyists or Employee

- 2. Lobbyist's Name: _____
Mailing Address: _____
Address City State Zip Code
Phone No.: _____
Indicate if: Contract Lobbyists or Employee

- 3. Lobbyist's Name: _____
Mailing Address: _____
Address City State Zip Code
Phone No.: _____
Indicate if: Contract Lobbyists or Employee

- 4. Lobbyist's Name: _____
Mailing Address: _____
Address City State Zip Code
Phone No.: _____
Indicate if: Contract Lobbyists or Employee

Section V - Authorized Signer

- 1. Name: _____
Position or Relationship to Principal: _____

- 2. Name: _____
Position or Relationship to Principal: _____

- 3. Name: _____
Position or Relationship to Principal: _____

- 4. Name: _____
Position or Relationship to Principal: _____

Section VI -- Certification

I certify that the above is true and correct to the best of my knowledge, information and belief, and that I am the registrant or an authorized designee. I understand that I am subject to a forfeiture if I know or believe any of the above information not to be true.



Laree Allen VP
Signature Title

LAREE ALLEN June 14, 2005
Type or print name as signed above Date

Address & Telephone (if different from first page of this form)

Individuals permitted to sign documents -- Name and position or relationship to the principal of any designee authorized to sign documents submitted to the City Clerk by the organization principal.

Subscribed before me this 7th day of July, 2005.

Melissa Owens
Notary

Commission expires: June 18th, 2006