

REGISTRATION OF PRINCIPAL  
EMPLOYING A LOBBYIST  
For Use In 2005

RECEIVED-CITY OF MADISON  
CLERKS OFFICE

Return to Office of the City Clerk, 210 Martin Luther King, Jr. Blvd., Room 103, Madison, WI 53703-5812

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Section 1 -- Identification of Principal  
"Principal" means any person who employs a lobbyist.

Terminix International Company (Service Master - Parent Corp.)  
Name of Principal

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

Beauchamp Last Name      Mike First Name      Senior Real Estate Analyst Title  
PO Box 260888 Mailing Address  
Plano City      Tx State      75026-0888 Zip Code

Business Address (if different)

972-475-5555  
Contact Phone

Contact FAX

Mike.beauchamp@reshtox.com  
Contact E-mail Address

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

Check one of the following and complete only that section:



### Business Entity

Property Tax Management  
Describe the business activity in which the entity is engaged

Chief Executive Officer: Rash Robert President  
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:

Objections to property Assessments

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

All       None       Agencies listed below

Assessor, Board of Review.

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: \_\_\_\_\_

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: Mike Beauchamp  
Mailing Address: PO Box 260888 Plano TX 75026-0888  
Address City State Zip Code  
Phone No.: 972 463 5545  
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: \_\_\_\_\_ (See attached)  
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.

  
Signature

Senior Real Property Analyst  
Title

Mike Beauchamp  
Type or print name as signed above

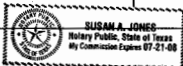
4/27/05  
Date

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 28<sup>th</sup> day of April, 2005

Notary



Susan A. Jones

Commission expires:

# ServiceMASTER.

The ServiceMaster Company  
3250 Lacey Road, Suite 600  
Downers Grove, IL 60515-7926  
Phone: 630/663-2000  
Fax: 630/663-2001

April 1, 2005

## TO WHOM IT MAY CONCERN:

This letter is to authorize Rash & Associates, L.P. and its employees to act on behalf of, and as agents, in matters pertaining to the taxation of both real and personal property owned by us or our subsidiaries or under our control.

This authorization will remain in effect until such time as otherwise notified in writing. Your cooperation is requested in assuring that all notices, correspondence and tax statements will be forwarded directly to:

Rash & Associates, L.P.  
P.O. Box 260888  
Plano, TX 75026-0888

Signed: *Robert A. Connolly*

Title: A.V.P.

STATE OF ILLINOIS

COUNTY OF DE PAGE

Before me, LATRESSA G. STAHLBERG, a notary public, on this personally appeared BARBARA A. CONNOLLY, known to me to be the person whose name is subscribed to the foregoing statement and acknowledged to me that he/she executed with same for the purposes and consideration therein expressed.

GIVEN under my hand and seal of office this 1<sup>st</sup> day of April, 2005.



Notary: *Latressa G. Stahlberg*

My commission expires: 6/2/08