REGISTRATION OF LOBBYIST

For Use In 2006

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

Section 1 -- Identification of Lobbyist
"Lobbyist" means any person paid to influence administrative or legislative action.

Duhy
Last Name

Michael
First Name

Engineer
Title

625 Williamson Street
Mailing Address

Madison
City

WI
State

53703
Zip Code

Business Address (if different)

JJR

Contact Phone

Contact FAX

Contact E-mail Address

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

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Section II -- Nature and Interest of Principal

Executive Management, Inc.
Name of Principal

Designated Representative of Principal:

Smith — Last Name
Adam — First Name
Associate — Title

PO Box 8685 Madison WI, 53703
Mailing Address

City
State
Zip Code

Business Address (if different)

442 5052
Contact Phone

242 1299
Contact FAX

Contact E-mail Address

adam@emi-mgmt.com
Internet Address

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Check one of the following and complete only that section:

☐ **Business Entity**

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:

Post-it™ Fax Note 7671	Date	# of pages ▶
To Sharon	From	
Co./Dept.	Co.	
Phone # 2	Phone #	
Fax # 266-9666	Fax #	

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☐ **Other Not for Profit**

☐ 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:

Will appear before committees, meet with staff and elected officials and provide requested information.

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: University Square Redevelopment

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

   Significant time and resources have been invested in the project.

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

Development

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
Tif.	
topic	topic
topic	topic
topic	topic
topic	topic
topic	topic
topic	topic

Section IV - Authorization of Lobbyists

As a designated representative of the Principal, the Lobbyist named above is hereby authorized to lobby on behalf of the Principal.

☐ The lobbyist is an employee of the Principal.

☐ The lobbyist is also authorized to file expense reports or other filings on behalf of the Principal.

Dated:_____

Name:_____

Position:_____

Signature:_____

Section V -- 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.

On Behalf of Lobbyist:

Adam Smith — Signature

Associate — Title

Adam Smith — Type or print name as signed above

1/24/06 — Date

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

On Behalf of Principal:

Adam Smith — Signature

Associate — Title

Adam Smith — Type or print name as signed above

1/24/06 — Date

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