

**CITY OF MADISON  
Principal's Expense Statement**

**Reporting Period:** January 1 through June 30  
July 1 through December 31

**Filing Deadline, Indicate Half-Year:**

July 31  
 January 31

Independent Living, Inc.  
Name of Principal

608/274-7900  
Phone No.

815 Forward Dr. Madison, WI 53711  
Address

Rita Giovannoni, Joyce Behrend, Julianne Dwyer  
Name of Lobbyist

608/274-7900  
Lobbyist Phone No.

Patricia Eldred, Marilyn Lawler, Jim Robinson  
Name of Lobbyist

Lobbyist Phone No.

Total lobbying expenditures and obligations did not exceed \$1,000. (If so, proceed directly to Certification.)

Total lobbying expenditures and obligations incurred exceeded \$1,000. \$ \_\_\_\_\_

Is this amount an estimate under Sec. 2.40 (10) (b) MGO? Yes  No

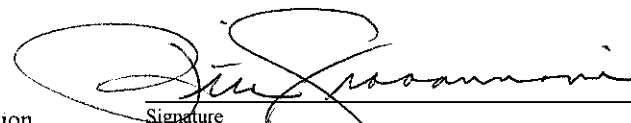
**Disclosure of Lobbying Communications**

Date	City Official	Number of Contacts	Subject of Each Contact	Lobbyist

See Page 2 to List Additional Disclosures

**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 authorized designee. I understand that if I know or believe any of the above information not to be true, I am subject to a forfeiture of \$1,000 or more.

 CEO  
Signature Title  
Rita Giovannoni  
Type or print name  
1/23/08  
Date