

CITY OF MADISON Principal's Expense Statement

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

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Filing Deadline, Indicate Half-Year:

July 31
 January 31

Meriter Health services
Name of Principal

608/417-5656
Phone No.

202 S. Park St, Madison, WI 53715
Address

Melissa Huggins
Name of Lobbyist

608/417-5606
Lobbyist Phone No.

Name of Lobbyist

Lobbyist Phone No.

I. Total lobbying expenditures and obligations incurred \$ 1,483.00

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
5/31	Bowden	1x 60 min	Raymond Red	Melissa Huggins
6/8	Kest	1x 120 min	Park campus	"
6/15	Kest	1x 60 min	"	"
7/6	Bowden	1x 10	Raymond Red	"

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.

Melissa Huggins Service Assoc.
Signature Title

Melissa E. Huggins
Type or print name

7/31/07
Date

