

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

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

Filing Deadline, Indicate Half-Year:

July 31
 January 31

St. Mary's Hospital Medical Center
Name of Principal

608-258-6730
Phone No.

707 S. Mills St., Madison, WI 53715
Address

608-229-2210
Lobbyist Phone No.

Harvey L. Temkin
Name of Lobbyist

Lobbyist Phone No.

Name of Lobbyist

- 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. \$ 13.7 hrs @ \$350/hr = \$4,795.00

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

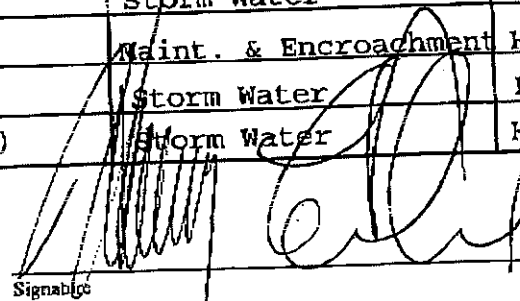
Disclosure of Lobbying Communications

Date	City Official	Number of Contacts	Subject of Each Contact	Lobbyist
7/03/07	Common Council Mtg.	1 (.5 hrs)	Storm Water	Harvey L. Temkin
7/12/07	G. Fries/J. Lichtenfeld	2 (.2 hrs)	Maint. & Encroachment	Harvey L. Temkin
7/13/07	G. Fries	1 (.5 hrs)	Storm Water	Harvey L. Temkin
7/16/07	L. Nelson/K. Grohskopf	2 (.5 hrs)	Storm Water	Harvey L. Temkin

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.


Signatory

Supervisor
Title

Harvey L. Temkin
Type or print name

JAN, 30, 2008
Date

JAN-30-2008 16:28
REINHART BOERNER
608 229 2100 P. 02/03

