

**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

2307
Livesey
Name of Principal

(608) 833-2929
Phone No.

2275 Deming Way, Suite 300, Middleton, WI 53562
Address

Kate Stalker
Name of Lobbyist

(608) 255-0800
Lobbyist Phone No.

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. \$1,281.25

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
7/8/2008	Brad Murphy/Tim Parks	1	Plan Review	Kate Stalker
8/4/2008	Brad Murphy/Tim Parks	1	Plan Review	Kate Stalker
8/7/2008	Zach Brandon	1	Plan Review	Kate Stalker

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.


Signature **Project Manager**
Title

Kate Stalker
Type or print name

January 13, 2009
Date

REGISTRATION OF LOBBYIST

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.

Stalker

Last Name

Kate

First Name

Project Manager

Title

717 John Nolen Drive

Mailing Address

Madison

City

WI

State

53713

Zip Code

Same

Business Address (if different)

(608) 255-0800

Contact Phone

(608) 255-7750

Contact FAX

kstalker@saa-madison.com

Contact E-mail Address

www.saa-madison.com

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

Livesey Company

Name of Principal

Designated Representative of Principal:

Livesey

Last Name

John

First Name

Title

2275 Deming Way, Suite 300

Mailing Address

Middleton

City

WI

State

53562

Zip Code

Business Address (if different)

608-833-2929

Contact Phone

jklivesey@liveseyco.com

Contact E-mail Address

608-824-9020

Contact FAX

Internet Address

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

_____ Last First Title

Approximate number of members: _____

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:

Development process of the Livesey property at CTH "PD" and Maple Grove Road.

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:

Stalker **Project Manager**
 Signature Title

Kate Stalker **1/28/2008**
 Type or print name as signed above Date

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

On Behalf of Principal:

 Signature Title

 Type or print name as signed above Date

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

CESSATION OF PRINCIPAL'S LOBBYING ACTIVITIES

Name of Principal (as currently registered with the City Clerk's Office):

File this form if all lobbying activity by or on behalf of the principal identified above has ceased for the remainder of the calendar year and the principal will not, prior to January 1, be preparing to influence City legislative or administrative action. An individual authorized to sign documents for submission to the City Clerk's Office must sign the statement appearing below and the principal must enclose its Statement of Lobbying Activities and Expenditures for the current reporting period as well as any Statements not previously submitted for prior periods during which the principal was registered.

Upon receipt of this form and the Principal's Expense Statement, the City Clerk will terminate the principal's registration as a lobbying principal and all authorizations of individuals to lobby on the principal's behalf and will remove the organization's name from the City Clerk's registry of principal.

I certify that all lobbying activities by or on behalf of the principal identified above have ceased and that the principal will neither attempt to influence City legislative or administrative action during the remainder of the calendar year. I further certify that I am authorized by the principal to submit this document to the City Clerk.

Signature

Date

Phone

Print name

Title

CESSATION OF LOBBYIST'S LOBBYING ACTIVITIES

Name of Lobbyist (as currently registered with the City Clerk's Office):

Name of Principal(s) to whom this applies:

File this form if all lobbying activity by the lobbyist for the principal identified above has ceased for the remainder of the calendar year and the lobbyist will not, prior to January 1, be preparing to influence City legislative or administrative action. An individual authorized to sign documents for submission to the City Clerk's Office must sign the statement appearing below and the principal must enclose its Expense Statement for the current reporting period as well as any Statements not previously submitted for prior periods during which the principal was registered.

Upon receipt of this form and the Principal's Expense Statement, the City Clerk will terminate the lobbyist's registration

I certify that all lobbying activities by the lobbyist identified above have ceased and that the lobbyist will neither attempt to influence City legislative or administrative action during the remainder of the calendar year. I further certify that I am authorized to submit this document to the City Clerk.

Signature

Date

Phone

Print name

Title