

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.

Black Angie Attorney
Last Name First Name Title
Michael Best & Friedrich LLP, P.O. Box 1806
Mailing Address
Madison WI 53701-1806
City State Zip Code
Business Address (if different)
(608) 257-3501, ext. 22264
Contact Phone
(608) 283-2275 ablack@michaelbest.com
Contact FAX Contact E-mail Address
www.michaelbest.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

Badger Coaches, Inc.
Name of Principal
Designated Representative of Principal:
Meier David Chief Financial Officer
Last Name First Name Title
5501 Femrite Drive
Mailing Address
Madison WI 53718
City State Zip Code
Business Address (if different)
(608) 310-4867 david@badgerbus.com
Contact Phone Contact E-mail Address
(608) www.badgerbus.com
Contact FAX Internet Address

Check one of the following and complete only that section:

Business Entity

motorcoach, school bus and tour operators

Describe the business activity in which the entity is engaged

Financial
Chief Executive Officer: Meier David
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: _____

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:

zoning approval for new development

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: zoning / development project

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

It will permit expansion and growth of the principal's current business activities
as described in the preceding page.

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

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

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: June 11, 2009

Name: David H. Meier

Position: CFO/Co-Owner

Signature: David H. Meier

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:

Angela Black
Signature

Attorney
Title

Angela Black
Type or print name as signed above

June 11, 2009
Date

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

On Behalf of Principal:

David H. Meier
Signature

CFO/Co-Owner
Title

David H. Meier
Type or print name as signed above

June 11, 2009
Date

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