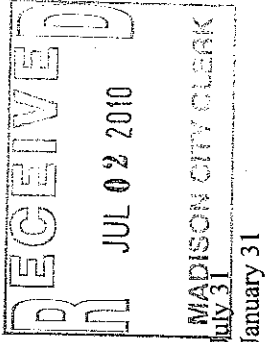


**CITY OF MADISON  
Principal's Expense Statement**

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

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



MICHAEL CARLSON

Name of Principal

226 OAK ST., MADISON, 53704

Address

SAME

Name of Lobbyist

SAME

Lobbyist Phone No.

Name of Lobbyist

Lobbyist Phone No.

608.259.0037  
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.

[Signature]  
Signature

MICHAEL CARLSON  
Type or print name

Title

EXECUTIVE DIRECTOR

Date

6/25/2010