

**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

Name of Principal: Alyssa Kenney Lenvy Heights Community Center Phone No. 608-244-0767

Address: 199 Lenvy Heights Madison, WI 53704

Name of Lobbyist: Alyssa Lenvy 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. \$ \_\_\_\_\_

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

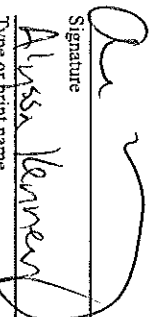
**Disclosure of Lobbying Communications**

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:  Title: Executive Director  
Type or print name: Alyssa Lenvy  
Date: 1/5/11