

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: Independent Living, Inc.
Phone No. 608/274-7900

Address: 815 Forward Dr. Madison, WI 53711

Name of Lobbyist: Rita Giovannoni, Joyce Behrend, Julianne Dwyer
Lobbyist Phone No. - Same as above -

Name of Lobbyist: Patricia Eldred, Marilyn Lawler, William Sterud
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: Rita Giovannoni Title: CEO
Type or print name: Rita Giovannoni
Date: 7/30/09