

**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

Madison Turners, Inc. _____
Name of Principal _____
3001 S. Stoughton Road, Madison, WI 53716 _____
Address _____

Phone No. _____
(608) 222-4922

Kristina Somers _____
Name of Lobbyist _____
(414) 298-8249 _____
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. \$ 24,081

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
4/27/09	Alder Skidmore	1	Property tax exemption	Kristina Somers
5/7/09	Alder Skidmore	1	Property tax exemption	Kristina Somers
6/1/09	Common Council	2	Property tax exemption	Kristina Somers
6/2/09	Common Council	Multiple	Property tax exemption	Kristina Somers

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 Kristina Somers *Kristina Somers*
Type or print name Kristina Somers
Date July 29, 2009
Representative At Madison Turners