

Attachment 1

Lobbyist Registration Form

Form Confirmation #: LR00015390

Year of Registration: 2009-2010

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: BOLTON ST. JOHNS, LLC
 Business Address 1: 146 STATE STREET
 Address 2:
 City: ALBANY
 State: NY
 Zip Code: 12207
 Business Phone: (518) 462-4620
 Fax Number: (518) 426-1631
 Email Address: WARHEIT@BOLTONSTJOHNS.COM
 Type of Lobbying: NonProcurement
 Level of Government Lobbied: State
 Type of Lobbyist: Retained

Additional Lobbyist Information

Click "Remove" to delete any lobbyist(s) who will not be lobbying for this client for this registration period. To Add additional lobbyists, go to "Manage Profile" in the menu.

First Name	Last Name
JAY	ADOLF
BRENDAN	BAXTER
TOM	CONNOLLY
GIORGIO	DEROSA
ED	DRAVES
MAURICE	GARNER
EMILY	GISKE
MICHAEL	KEOGH
BILL	MCCARTHY
JOHN	MCCARTHY
JOHN	O'DONNELL



Client Information

Client Business Name: ROTATE BLACK
 Business Address 1: 625 HARBOR VIEW LANE
 Address 2:
 City: PETOSKEY

State: MI
Zip Code: 49770
Country: US
Business Phone: (702) 677-0976
Fax Number:
Chief Administrative Officer First Name: JOHN C,
Chief Administrative Officer Last Name: PAULSON
Chief Administrative Officer Title: MANAGING PARTNER

Third party information



Name:
Business Address 1:
Address 2:
City:
State:
Zip Code:
Country:
Business Phone:

Client Business Nature

Select the category that best describes the nature of the Client's business

- Banking & Financial Services
- Environment & Natural Resources
- Labor
- Marketing & Sales
- Racing & Wagering
- Trade Associations
- Communications
- Health & Mental Hygiene
- Law
- Public Utilities
- Real Estate & Construction
- Transportation
- Education
- Insurance
- Manufacturing
- Public, Community Interest
- State & Local Government
- Travel & Tourism

Subject

Subjects on which you expect to lobby:

No details were entered.

Person

Person, State Agency, Municipality, or Legislative Body you expect to lobby:

No details were entered.

Bill

Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter

Number or Subject Matter of Executive Order of Governor/Municipality on which you

expect to lobby:

No details were entered.

Subject Matter

Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Contract/Authorizations

You must either mail in a copy of your signed contract/authorization or upload and attach a scanned copy of the same. ?

Contract / Authorization Start Date (MM/DD/YYYY) : ?
 Contract / Authorization End Date (MM/DD/YYYY) :

Check here if mailing:

Or

[Click here to upload signed contract/authorizations:](#)

Or

Choose previous uploaded and unassigned contract/authorization(s) below:

Original Contract

FileName	Description	Date
L75_26206.pdf	Rotate Black	12/11/2008 2:00:15 PM

Amended Contract

FileName	Description	Date
A34_boltonstjohns-rotateblack-A17114.tif	09 Lap Ltr Rotate Black	5/12/2009 11:58:08 AM
L75_RotateBlack_09_renewal.pdf	Rotate Black Renewal	5/4/2009 6:01:19 PM

If an uploaded contract/authorization does not appear, [click here to see updated list of choices:](#)

Declaration

I declare under penalty of perjury that the information contained in this registration is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Date : 12/11/2008 **Actual submission date:**

First Name: TOM Last Name: CONNOLLY

Comments:

Fees

Please Check one of the following: ?

Amount : 200.00

IMPORTANT : Please choose your payment carefully - Registration fees are non-refundable.

Payment Mode

Credit Card

Credit Card Authorization Code : **23355C**

Prior to final submission please verify reporting year you have selected.

Workflow

Date	User	Queue	Comments
12/31/2008	LB000075	Submitted	Form submitted by the user ...
1/2/2009	ETALBOT	Approved	FATT CATT- OVERLAP K - START DATE TO ORIG
4/16/2010	DSMITH	Terminated	K-ENDS 4/9/10 M/A DUE

Attachment 2

BOLTON-ST. JOHNS, LLC

March 25, 2009

John C. Paulsen
RotateBlack
628 Harbor View Lane
Petoskey, MI 49770

Dear Mr. Paulsen:

Bolton-St. Johns, LLC agrees to provide **RotateBlack** with legislative and regulatory representation in **New York State**, specifically from **April 9, 2009** through **April 9, 2010**. The fee shall be payable in equal monthly installments of **\$10,000**. After the initial ninety-day period, this agreement is cancelable upon thirty days written notice.

If the above meets with your approval, please so indicate by signing and dating and this letter in the space provided below. We will file a copy of the signed letter with the New York State Commission on Public Integrity.

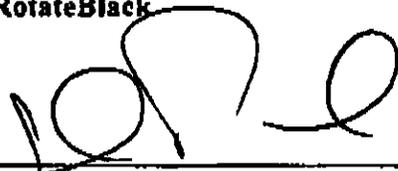
Sincerely,

Bolton-St. Johns, LLC

By: 
Giorgio DeRosa, Partner

Agreed to and Accepted By:

RotateBlack


John C. Paulsen, Managing Partner

Date: 4/30/09

S:\RotateBlack\09 Lobby Agreement.doc

Attachment 3

Lobbyist Bi-Monthly Report

Form Confirmation #: LBR0129834

Year of Registration : 2010

Reporting Period:

Mark One

- January - February
 March - April
 May - June
 July - August
 September - October
 November - December

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: BOLTON ST. JOHNS, LLC
Business Address 1: 146 STATE STREET
Address 2:
City: ALBANY
State: NY
Zip Code: 12207
Business Phone: (518) 462-4620
Fax Number: (518) 426-1631
Email Address: WARHEIT@BOLTONSTJOHNS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: State
Type of Lobbyist: Retained

Additional Lobbyist Information

Delete from the following list any lobbyist(s) who did not lobby this period. To permanently remove lobbyist(s) who will no longer be performing lobbying services you must go to the "Lobbyist Registration Termination Form" in your "Lobbyist Registration Details Menu".

To Add Additional Lobbyists, who lobbied for this client for this bimonthly period, you must go to your "Lobbyist Registration Amendment form" in your "Lobbyist Registration Details Menu".

First Name	Last Name
JAY	ADOLF
BRENDAN	BAXTER
TOM	CONNOLLY
GIORGIO	DEROSA
ED	DRAVES
MAURICE	GARNER
EMILY	GISKE
MICHAEL	KEOGH



BILL	MCCARTHY
JOHN	MCCARTHY
JOHN	O'DONNELL

Client Information

Client Business Name: ROTATE BLACK
Business Address 1: 625 HARBOR VIEW LANE
Address 2:
City: PETOSKEY
State: MI
Zip Code: 49770
Country: US
Business Phone: (702) 677-0976
Fax Number:
Chief Administrative Officer First Name: JOHN C,
Chief Administrative Officer Last Name: PAULSON
Chief Administrative Officer Title: MANAGING PARTNER

Third Party Information

Name:
Business Address 1:
Address 2:
City:
State:
Zip Code:
Country:
Business Phone:

Summary of Compensation and Reimbursed Expenses for this period

Compensation (Current Period Only)	Reimbursed Expenses (Current Period Only)
20000	0

Other Lobbying Expenses (Current Period Only)

- A. Report in the aggregate all expenses less than or equal to \$75 : 138
- B. Report in the aggregate all expenses for salaries of non-lobbying employees : 319
- C. Itemize all expenses exceeding \$75 : ?

I have no itemized expenses to report for this period.

Check box to agree with previous statement or enter expenses below

PaidTo	Date	Purpose	Ad?	SocialEvent?	Amount
LRS	01/01/2010	SUBSCRIPTION	<input type="checkbox"/>	<input type="checkbox"/>	103

[Top](#)

D. Total expenses for current period : \$ 560

Subject

Subjects on which you lobbied:

No details were entered.

Person

Person, State Agency, Municipality or Legislative Body lobbied:

No details were entered.

Bill

Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter

Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter

Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Declaration

I declare under penalty of perjury that the information contained in this Bi-Monthly report is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Check box to agree with previous statement

Date : 3/22/2010 Actual submission date:

First Name: TOM Last Name: CONNOLLY

Comments:

Workflow

Date	User	Queue	Comments
3/22/2010	LB000075	Submitted	Form Submitted by User...
3/25/2010	CIRISH	Approved	** NOT LATE , LOBBYIST REQUESTED AND WAS GIVEN FILING EXTENSION BY C.W. TILL 3/24/2010

Lobbyist Bi-Monthly Report

Form Confirmation #: LBR0133502

Year of Registration : 2010

Reporting Period:

Mark One

- January - February
 March - April
 May - June
 July - August
 September - October
 November - December

Principal Lobbyist Information

(To make changes to any of the Lobbyist Information, go to "Manage Profile" in the Lobbyist menu).

Principal Lobbyist Name: BOLTON ST. JOHNS, LLC
Business Address 1: 146 STATE STREET
Address 2:
City: ALBANY
State: NY
Zip Code: 12207
Business Phone: (518) 462-4620
Fax Number: (518) 426-1631
Email Address: WARHEIT@BOLTONSTJOHNS.COM
Type of Lobbying: NonProcurement
Level of Government Lobbied: State
Type of Lobbyist: Retained

Additional Lobbyist Information

Delete from the following list any lobbyist(s) who did not lobby this period. To permanently remove lobbyist(s) who will no longer be performing lobbying services you must go to the "Lobbyist Registration Termination Form" in your "Lobbyist Registration Details Menu".

To Add Additional Lobbyists, who lobbied for this client for this bimonthly period, you must go to your "Lobbyist Registration Amendment form" in your "Lobbyist Registration Details Menu".

First Name	Last Name
JAY	ADOLF
BRENDAN	BAXTER
TOM	CONNOLLY
GIORGIO	DEROSA
ED	DRAVES
MAURICE	GARNER
EMILY	GISKE
MICHAEL	KEOGH



BILL	MCCARTHY
JOHN	MCCARTHY
JOHN	O'DONNELL

Client Information

Client Business Name: ROTATE BLACK
Business Address 1: 625 HARBOR VIEW LANE
Address 2:
City: PETOSKEY
State: MI
Zip Code: 49770
Country: US
Business Phone: (702) 677-0976
Fax Number:
Chief Administrative Officer First Name: JOHN C,
Chief Administrative Officer Last Name: PAULSON
Chief Administrative Officer Title: MANAGING PARTNER

Third Party Information

Name:
Business Address 1:
Address 2:
City:
State:
Zip Code:
Country:
Business Phone:

Summary of Compensation and Reimbursed Expenses for this period

Compensation (Current Period Only)	Reimbursed Expenses (Current Period Only)
10000	0

Other Lobbying Expenses (Current Period Only)

- A. Report in the aggregate all expenses less than or equal to \$75 : 40
- B. Report in the aggregate all expenses for salaries of non-lobbying employees : 162
- C. Itemize all expenses exceeding \$75 : ?

I have no itemized expenses to report for this period.

Check box to agree with previous statement or enter expenses below

[Top](#)

D. Total expenses for current period : \$ 202

Subject

Subjects on which you lobbied:

No details were entered.

Person

Person, State Agency, Municipality or Legislative Body lobbied:

No details were entered.

Bill

Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

No details were entered.

Title

Title and Identifying # of procurement contracts and documents on which you expect to lobby:

No details were entered.

Number or Subject Matter

Number or Subject Matter of Executive Order of Governor/Municipality on which you expect to lobby:

No details were entered.

Subject Matter

Subject Matter of and Tribes involved in tribal-state compacts, etc on which you expect to lobby:

No details were entered.

Declaration

I declare under penalty of perjury that the information contained in this Bi-Monthly report is true, correct and complete to the best of my knowledge and belief.

(If form is being entered or was entered into the system by NYSJCOPE personnel, a checked box below indicates that the Responsible Persons signature was on the original paper form submitted to NYSJCOPE)

Check box to agree with previous statement

Actual submission date:

Date : 5/19/2010

First Name: TOM

Last Name: CONNOLLY

Comments: TERMINATED
4.9.2010

Workflow

Date	User	Queue	Comments
5/19/2010	LB000075	Submitted	Form Submitted by User...
5/27/2010	CIRISH	Approved	LATE 2 DAYS
5/27/2010	CIRISH	Approved	LATE 2 DAYS
5/27/2010	CIRISH	Approved	LATE 2 DAYS
5/27/2010	CIRISH	Approved	LATE 2 DAYS
5/27/2010	CIRISH	Approved	LATE 2 DAYS

Attachment 4

2010J-J 41
due: 5/14/12ELLEN N. BIBEN *filed:*
EXECUTIVE DIRECTOR

NEW YORK STATE
JOINT COMMISSION ON PUBLIC ETHICS

540 BROADWAY
ALBANY, NEW YORK 12207
www.jCOPE.ny.gov

PHONE: (518) 408-3976
FAX: (518) 408-3975

HON. JANET DIFIORE
CHAIR

RAVI BATRA
PATRICK J. BULGARO
HON. JOSEPH COVELLO
HON. VINCENT A. DEIORIO
MITRA HORMOZI
DANIEL J. HORWITZ
MARVIN E. JACOB
SEYMOUR KNOX, IV
GARY J. LAVINE
HON. MARY LOU RATH
DAVID A. RENZI
GEORGE H. WEISSMAN
ELLEN YAROSHEFSKY
MEMBERS

April 19, 2012

John Paulsen
Rotate Black, Inc.
932 Spring Street, Suite 201
Petoskey, Michigan 49770

Dear Mr. Paulsen:

RE: 2010 January-June Client Semi-Annual Report

NOTICE OF FAILURE TO FILE

Please be advised that records of the Joint Commission on Public Ethics ("Commission") indicate your failure to file the 2010 January-June Client Semi-Annual Report. Pursuant to Section 1-j of Legislative Law Article 1-A ("Lobbying Act"), you were required to file the above-referenced report with the Commission on or before July 15, 2010. Our records further reflect that you have previously been given notice of your failure to file and, to date, have still failed to submit the required filing.

Executive Law §94(13)(a) requires that the Commission notify you of this possible or alleged violation and provide you with a fifteen-day period to submit a written response setting forth information relating to the activities cited as the possible or alleged violation of the Lobbying Act. Your written response should include any relevant information or explanation for your failure to file. In addition to, or in lieu of a written explanation, you may submit the required filing. Please respond on or before May 4, 2012, which is fifteen-days from the date of this letter.

Pursuant to Lobbying Act §1-j, if you submit the required filing after your receipt of this Notice, you may be subject to a late fee of up to \$25.00 per day from the original due date. If after receipt of your written response to this Notice, including any filing, the Commission makes a determination that further inquiry is warranted, you will be so notified pursuant to Executive Law §94(13)(b).

Mr. Paulsen
April 19, 2012
RE: 2010 January-June Client Semi-Annual Report
Page 2

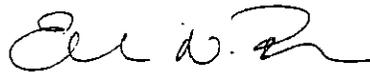
In accordance with Executive Law §§94(14) and (14)(c), if the Commission determines that there is a substantial basis to conclude that a violation has occurred, the Commission shall issue a substantial basis investigation report, which the Commission would be required to make publicly available and to post on its website. Pursuant to Lobbying Act §1-o, if the Commission finds after a hearing that you knowingly and willfully violated the above-referenced provision of the Lobbying Act, you may be subject to a civil penalty of up to \$25,000 or three times the amount you failed to report, whichever is greater, in addition to any late fees that have been assessed.

The pertinent regulations governing the hearing process appear on the Commission's website at <http://www.jCOPE.nv.gov/law/ethc/Part941.pdf>.

If for any reason you believe this Notice has been sent to you in error, please notify the Commission immediately.

If you need assistance filing the above-requested report, please contact Cindy Morrill. Any other questions should be directed to Lori Donadio.

Sincerely,



Ellen N. Biben
Executive Director

Attachment 5

IN THE MATTER OF

Rotate Black, Inc.

NOTICE OF SUBSTANTIAL BASIS INVESTIGATION
Case No. 12-13

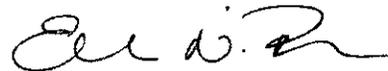
Pursuant to Executive Law §94(13), the New York State Joint Commission on Public Ethics ("Commission") has commenced an investigation to determine whether a substantial basis exists to conclude that you violated Section 1-j of the New York State Legislative Law ("Lobbying Act") in that you knowingly and wilfully failed to file timely your 2010 January/June Client Semi-Annual Report, and that you are subject to a civil penalty pursuant to the Lobbying Act §1-o.

Executive Law §94 authorizes the Commission to enforce the Lobbying Act. Please be advised that, pursuant to the Lobbying Act §1-o, an individual or entity who, following a hearing, is found to have knowingly and wilfully violated the provisions of the Lobbying Act §1-j shall be subject to a civil penalty for each violation in an amount not to exceed the greater of twenty-five thousand dollars (\$25,000) or three times the amount the person failed to report properly, and other possible penalties, including suspension of lobbying activities.

You have a right to submit a written response to the Commission within 30 days of this Notice. If after its investigation, the Commission finds a substantial basis to conclude that you have violated the relevant laws, the Commission shall send to you a substantial basis investigation report containing its findings of fact and conclusions of law, which shall be released publicly within forty-five days of its issuance. Upon receipt of such report, you will have a right to be heard, and the pertinent regulations and rules regarding the conduct of adjudicatory proceedings, appeals and due process procedural mechanisms available to you are set forth in 19 NYCRR Part 941 and are available on the Commission's website at www.jcope.ny.gov.

Date: May 14, 2012

By:



Ellen N. Biben
Executive Director

Attachment 6

NY STATE CLIENT SEMI-ANNUAL REPORT

Marking Instructions: Please type or use blue or black ink pen.
 Completely fill in one circle.
 Print legible numbers and block letters, no script.

COMPLETE ALL SECTIONS
 before submitting or form will be returned.

I Reporting Information

Year: 2010

Fill in circle if amendment

Report Period: January/June July/December

Type of Lobbying: Nonprocurement Procurement Both

Client Filing Fee Check Number: 2155

FOR OFFICE USE ONLY

Cjm 122362
late 728 days IV:
 CK# 2155 VI: CAO
 \$50 RECEIVED JUL 12 2012 CAO
 ORIGINAL FILE

II Client Information

Name: Rotate Black, Inc.

Permanent Business Address: 932 Spring Street, Suite 201

City: Petoskey

State: MI

ZIP code: 49770

Business Phone: 231.347.0777

Fax Number: 231.347.0177

Third Party Beneficiary (see instructions):

III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

A Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name: Bolton St John

Phone Number:

Address: 146 State Street

City: Albany

State: NY

ZIP code: 12207

Compensation for current period: \$30,000 .00

B Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$.00

C Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$.00

Continued on attached pages

D TOTAL COMPENSATION of ALL lobbyists for current period.....(A+B+C+addendum sheets): \$30,000 .00

IV Other Expenses (Current Semi-Annual Period Only)

A Report in the aggregate all expenses less than or equal to \$75: \$.00

B Report in the aggregate all expenses for salaries of non-lobbying employees: \$.00

C Itemize each expense exceeding \$75:

PAID TO: DATE: / / Ad Social Event
PURPOSE: AMOUNT: \$.00 *Addendum attached
 PROCUREMENT NONPROCUREMENT

PAID TO: DATE: / / Ad Social Event
PURPOSE: AMOUNT: \$.00 *Addendum attached
 PROCUREMENT NONPROCUREMENT

Continued on attached pages

* If any expense listed above exceeds \$75 for an individual, you must attach the addendum page listing the expense, dollar amount attributable to the individual and the name, title and employer of the individual.

D Total expenses for current period: \$.00 (if applicable, include all expenses from attached pages in total)

V Subjects lobbied:

Continued on attached pages

VI Person, State Agency, Municipality or Legislative Body lobbied:

Continued on attached pages

VII Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

Continued on attached pages

VIII Title and Identifying Numbers of procurement contracts/documents lobbied:

Continued on attached pages

IX Number or Subject Matter of Executive Order of Governor/Municipality lobbied:

Continued on attached pages

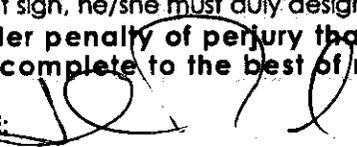
X Subject Matter of and Tribes involved in tribal-state compacts, etc lobbied:

Continued on attached pages

XI Declaration

This Declaration must be signed by the Chief Administrative Officer. (If the Chief Administrative Officer, for any reason, does not sign, he/she must duly designate another person to sign this Declaration.) (See Instructions.)

I declare under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge and belief.

X SIGNATURE: 

DATE: 2/1/2010

PRINT NAME: LAST Paulsen

FIRST John

TITLE:

Mark One: Chief Administrative Officer Designee(Attach Letter)

The following MUST be attached to this report at the time of submission:

- You must attach a \$50 dollar filing fee to each semi-annual report. (No fee is required for amendments to the original)
- If applicable, a designation letter if you have marked designee in section XI.
- If applicable, continuation sheets for sections III,IV,V,VI,VII,VIII,IX and X.

PLEASE NOTE You may be assessed up to \$25 for each day this report is late.

Designated Addendum sheet for sections III and IV.

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name: _____ Phone Number: _____

Address: _____

City: _____ State: _____ ZIP code: _____

Compensation for current period: \$ _____ .00

Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name: _____ Phone Number: _____

Address: _____

City: _____ State: _____ ZIP code: _____

Compensation for current period: \$ _____ .00

Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name: _____ Phone Number: _____

Address: _____

City: _____ State: _____ ZIP code: _____

Compensation for current period: \$ _____ .00

IV Other Expenses (Current Semi-Annual Period Only)

PAID TO: _____ DATE: / / Ad Social Event

PURPOSE: _____ AMOUNT: \$ _____ .00 *Addendum attached

PROCUREMENT NONPROCUREMENT

PAID TO: _____ DATE: / / Ad Social Event

PURPOSE: _____ AMOUNT: \$ _____ .00 *Addendum attached

PROCUREMENT NONPROCUREMENT

PAID TO: _____ DATE: / / Ad Social Event

PURPOSE: _____ AMOUNT: \$ _____ .00 *Addendum attached

PROCUREMENT NONPROCUREMENT

PAID TO: _____ DATE: / / Ad Social Event

PURPOSE: _____ AMOUNT: \$ _____ .00 *Addendum attached

PROCUREMENT NONPROCUREMENT

PAID TO: _____ DATE: / / Ad Social Event

PURPOSE: _____ AMOUNT: \$ _____ .00 *Addendum attached

PROCUREMENT NONPROCUREMENT

Designated Addendum sheet for sections IV, V, VI, VII, VIII, IX and X.

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

IV * Itemized Expenses

Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	
Name of Individual:	Amt Attributable to Individual: \$.00
Title of Individual:	Employer of Individual:	

V Subjects lobbied:

VI Person, State Agency, Municipality or Legislative Body lobbied:

VII Bill, Rule, Regulation, Rule Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

VIII Title and Identifying Numbers of procurement contracts/documents lobbied:

IX Number or Subject Matter of Executive Order of Governor/Municipality lobbied:

X Subject Matter of and Tribes involved in tribal-state compacts, etc lobbied: