

LOBBYIST REGISTRATION STATEMENT

Check applicable box: New Registration Amendment Annual Renewal Cancel Registration

Permanent business address

Lobbyist or Lobbyist Organization Full Name: Cadigan Consulting LLC
Permanent Telephone Number: 5058904967 Email address: cadigan tj@gmail
Permanent Business Address: 2705 Bosguedelsoi Lane NW
City: Albuquerque State: NM Zip Code: 87120

Business address while lobbying or conducting lobbyist campaigning

Business Address: same
City: _____ State: _____ Zip Code: _____

Lobbyist Organization Chairperson

Chairperson Full Name: N/A
Telephone Number: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Lobbyist Organization Treasurer

Treasurer Full Name: N/A
Telephone Number: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Lobbyist Organization's Bank and Checking Account Information

Name of Bank: N/A
Address: _____
City: _____ State: _____ Zip Code: _____
Checking Account Number: _____

All parties with Signature Authority for Lobbyist Organization's Checking Account

Full Name: N/A
Telephone Number: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Full Name: _____
Telephone Number: _____
Address: _____
City: _____ State: _____ Zip Code: _____

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LOBBYIST'S EMPLOYERS

Lobbyist's Employers Information

Employer: Cadigan Consulting LLC

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

For additional employers, use a second form and attach to original.

OFFICIAL ACTION FORM

Lobbyist's Permanent business address

Lobbyist or Lobbyist Organization Full Name: Cadigan Consulting LLC
Permanent Telephone Number: 5058904900
Permanent Business Address: 2705 Prologue del Sol Lane NW
City: Albuquerque State: NM Zip Code: 87120

Official action the lobbyist or lobbyist organization supports or opposes

TBD

Lobbyist Official Action Bank and Checking Account Information

Name of Bank: N/A
Address: _____
City: _____ State: _____ Zip Code: _____
Checking Account Number: _____

All parties with Signature Authority for Lobbyist's Official Action Checking Account

Full Name: N/A
Address: _____
City: _____ State: _____ Zip Code: _____
Full Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____

I understand that I must file an Annual Registration Renewal every twelve months after the date of this registration, as long as I continue to perform lobbyist activities, as defined in the Lobbyist and Lobbyist Organization Registration and Disclosure Ordinance. In the event any change occurs in the above information, including but not limited to, new official actions supported or opposed, I am required to notify the City Clerk of changes within one month of such occurrence.

I swear or affirm that the above information is true and correct to the best of my knowledge

[Signature]
Signature

1/6/2015
Date