

# Lobbyist Registration Form

|                                 |                    |                       |                            |
|---------------------------------|--------------------|-----------------------|----------------------------|
| Full Name of Lobbyist           | First <b>LINDA</b> | Middle                | Last <b>SIEGLE</b>         |
| Permanent Business Address      | <b>POB 8602</b>    | Business Phone Number | <b>471 3563</b>            |
| City                            | <b>Santa Fe</b>    | State                 | <b>NM</b> Zip <b>87504</b> |
| Business Address While Lobbying | <b>Same</b>        |                       |                            |
| City                            |                    | State                 | Zip                        |

Pursuant to the Lobbyist Registration Act of the City of Albuquerque, the undersigned hereby registers as a Lobbyist and states as follows:

I have filed this registration before commencing any lobbying activities on behalf of the below named employer(s):

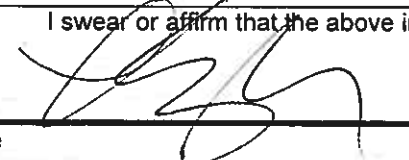
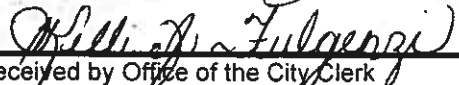
|                  |                                |        |                            |
|------------------|--------------------------------|--------|----------------------------|
| Name of Employer | <b>American Cancer Society</b> |        |                            |
| Address          | <b>10501 Montgomery</b>        | Number | <b>2602105</b>             |
| City             | <b>Alb</b>                     | State  | <b>NM</b> Zip <b>87111</b> |

|                  |                             |              |                            |
|------------------|-----------------------------|--------------|----------------------------|
| Name of Employer | <b>American Heart Assoc</b> |              |                            |
| Address          | <b>2201 San Pedro NE</b>    | Phone Number | <b>953-5800</b>            |
| City             | <b>Alb</b>                  | State        | <b>NM</b> Zip <b>87110</b> |

|                  |  |        |     |
|------------------|--|--------|-----|
| Name of Employer |  |        |     |
| Address          |  | Number |     |
| City             |  | State  | Zip |

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

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 Registration Act. In the event any change occurs in the above information, including but not limited to, new employers or termination of lobbying services with employers, I am required to notify the City Clerk of changes within one month of such occurrences. This form expires one year from date accepted by City Clerk.

|   |                        |
|---|------------------------|
| I swear or affirm that the above information is true and correct to the best of my knowledge                                |                        |
| Signature<br>                            | Date<br><b>5/19/08</b> |
| Received by Office of the City Clerk<br> | Date<br><b>5/28/08</b> |

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5/19/08