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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check One: New Registrant New Client for Existing Registrant Amendment

1. Effective Date of Registration 02/1

2. House Identification

Senate Identification

REGISTRANT Organization Individual

3. Registrant Organization Phase Line Strategies

Address 9135 Ridgeline Blvd. Address2 Suite 150
City Highlands Ranch State CO Zip 80130 - Cour

4. Principal place of business (if different than line 3)

City _____ State _____ Zip _____ - Cour

5. Contact name and telephone number

International Number

Contact Ms. Katie Behnke Telephone (303) 297-8170 E-mail katie@phaseline.com

6. General description of registrant's business or activities

Consulting

CLIENT

A Lobbying Firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should labeled "Self" and proceed to line 10. Self

7. Client name SAVIT Associates, LLC

Address PO Box 610
City Jackson State WY Zip 83001 - Coun

8. Principal place of business (if different than line 7)

City _____ State _____ Zip _____ - Coun

9. General description of client's business or activities

Land Development & Management

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of becoming a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name			Covered Official Position (if applicable)
First	Last	Suffix	
Sean	Tonner		
Jennifer	Mayfield		

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LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, p. 1. GOV

12. Specific lobbying issues (current and anticipated)

Donation and sale of private land to the Federal Government

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

No --> Go to line 14.

Yes --> Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address			Principal Place of Business
	Street	State/Province	Zip Code	Country
	City			
				City
				State Country
				City
				State Country
				City
				State Country

FOREIGN ENTITIES

14. Is there any foreign entity

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; or
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; or
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

No --> Sign and date the registration.

Yes --> Complete the rest of this section for each entity matching the criteria above, then sign the registration.

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities
	Street	State/Province	Country		
	City				
				City	
				State Country	
				City	
				State Country	

Signature Katie Behnke

Date 2/11

Printed Name and Title Katie Behnke Associate

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