

**REGISTRATION OF PRINCIPAL  
EMPLOYING A LOBBYIST**

For Use In 2001-2002

Return to Office of the City Clerk, 210 Martin Luther King, Jr. Blvd., Room 103, Madison, WI 53709-0001

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**Section 1 -- Identification of Principal**  
**"Principal" means any person who employs a lobbyist.**

Fisher Development

Name of Principal

Name of in-house person the City Clerk's Office may contact regarding lobbying issues:

Fisher	Cliff	Owner
_____ Last Name	_____ First Name	_____ Title

350 West Washing Avenue

Mailing Address

Madison	WI	53703
_____ City	_____ State	_____ Zip Code

Same

Business Address (if different)

516-8157

Contact Phone

Contact FAX

Contact E-mail Address

Principal's Internet Address

Person to whom correspondence should be sent (if different from above)

Same

_____ Last Name	_____ First Name
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Firm or Organization Name

Mailing Address

_____ City	_____ State	_____ Zip Code
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_____ Phone	_____ FAX	_____ E-mail Address
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### Section III -- Areas of Lobbying

Provide a reasonably specific narrative summary of areas of legislative and administrative action the principal may attempt to influence:

List the City agencies in which the principal seek to influence administration action:

All       None       Agencies listed below

Planning and Development, Comptroller, Community Development Authority, Board of Estimates and Common Council

Identify the proposed legislative or administrative action in connection with which the principal has made or intends to make a lobbying communication before December 31.

1. Item: Financial Assistance for Metropolitan Place

a. How will this item affect the principal's business or other activity?

Facilitate development

b. Which industry, trade, profession or segment or portion thereof would be principally affected?

N/A

c. If the item is an appropriation, please identify the City program or person for which the appropriation is proposed and the approximate amount, if you know the amount.

General Capital Budget

For additional items, attach additional sheets.

2. If lobbying communication relates to the capital or operating budget, identify topic or topics.

**CAPITAL BUDGET**

**OPERATING BUDGET**

**Tax Increment Financing**

topic
topic
topic
topic
topic
topic

topic
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topic



**Section VI -- 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 an authorized designee. I understand that I am subject to a forfeiture if I know or believe any of the above information not to be true.



Clifford Fisher Owner  
Signature Title  
Cliff Fisher July 27, 2001  
Type or print name as signed above Date  
Same  
Address & Telephone (if different from first page of this form)

Individuals permitted to sign documents -- Name and position or relationship to the principal of any designee authorized to sign documents submitted to the City Clerk by the organization principal.

Subscribed before me this 27<sup>th</sup> day of July, 2001.  
Angela Holt  
Notary  
Commission expires: 2/27/05