

**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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MADISON, WI
MAY 12 2002

Section 1 -- Identification of Principal

"Principal" means any person who employees a lobbyist.

Interfaith Hospitality Network of the Madison Area

Name of Principal

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

Krinsky

Rachel

Executive Director

Last Name

First Name

Title

1127 University Ave

Mailing Address

Madison

WI

53715

City

State

Zip Code

Same

Business Address (if different)

294-7998

Contact Phone

294-8007

Contact FAX

none

interfaith@tds.net

Contact E-mail Address

Principal's Internet Address

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

Last Name

First Name

Firm or Organization Name

Mailing Address

City

State

Zip Code

Phone

FAX

E-mail Address

01 MAY 12 PM 4:15
CITY CLERK'S OFFICE
MADISON, WI

Section II -- Nature and Interest of Principal

Check one of the following and complete only that section:

Business Entity

Describe the business activity in which the entity is engaged

Chief Executive Officer:

Last

First

Title

If partnership or limited liability company, check here and attach list of partners/members.

Industry, Trade or Professional Association

Describe the industry, trade or profession including any segment thereof which the association exclusively or primarily represents

Chief Executive Officer:

Last

First

Title

Approximate number of members: _____

Other Not for Profit

Governmental

Labor Union

Charitable/Religious/Civic, etc.

Other

Shelter for Homeless Families

Briefly describe the organization's purpose and any other group with a common interest which the organization primarily represents

none

Describe any industry, trade, profession, or group with a common interest which the organization primarily represents or from which the organization's membership or financial support is primarily derived

Approximate number of members: _____

Individual

Name and address of the individual's employer, if any, or of the individual's primary place of business, if self-employed

Describe the business activity in which the individual or the individual's employer is engaged

Section III -- Areas of Lobbying

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

Staff will speak on behalf of Agency and Homeless constituents RE needs and resources for homeless and low income people

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

- All None Agencies listed below

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: We don't have specific plans. Spoke to CDBG commission on 3/1

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

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

- 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.

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

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

Section IV - Authorization of Lobbyists

The following lobbyists are authorized to represent the principal in proposed legislative or administrative action.

1. Lobbyist's Name: Rachel Krinsky
Mailing Address: same as above
Address _____ City _____ State _____ Zip Code _____
Phone No.: _____
Indicate if: Contract Lobbyists or Employee
2. Lobbyist's Name: Carolyn Clow
Mailing Address: same as above
Address _____ City _____ State _____ Zip Code _____
Phone No.: _____
Indicate if: Contract Lobbyists or Employee
3. Lobbyist's Name: _____
Mailing Address: _____
Address _____ City _____ State _____ Zip Code _____
Phone No.: _____
Indicate if: Contract Lobbyists or Employee
4. Lobbyist's Name: _____
Mailing Address: _____
Address _____ City _____ State _____ Zip Code _____
Phone No.: _____
Indicate if: Contract Lobbyists or Employee

Section V - Authorized Signer

1. Name: Rachel Krinsky
Position or Relationship to Principal: Executive Director
2. Name: _____
Position or Relationship to Principal: _____
3. Name: _____
Position or Relationship to Principal: _____
4. Name: _____
Position or Relationship to Principal: _____

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.



Rachel Krinsky Executive Director
Signature Title
Rachel Krinsky March 2, 2001
Type or print name as signed above Date

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 12 day of March, 2001.

Judith E. Littack
Notary

Commission expires: 11-28-04