



**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**

Rental Housing Providers and Rental Housing Residents  
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: 750 **Other Not for Profit** Governmental     Labor Union     Charitable/Religious/Civic, etc.     Other

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

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:

Rental Housing, Development, Property Rights, Health & Welfare  
Community Policing,

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: Inclusionary Zoning & Landlord Registration
- a. How will this item affect the principal's business or other activity?  
affects members rental properties & development of rental properties
- b. Which industry, trade, profession or segment or portion thereof would be principally affected?  
rental housing providers
- 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**

|       |
|-------|
| topic |
| topic |
| topic |
| topic |
| topic |
| topic |

**OPERATING BUDGET**

|  |
|--|
| <i>inclusionary zoning</i><br>topic            |
| <i>land lord</i> <i>rep/retention</i><br>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.


- Lobbyist's Name: Nancy Jensen  
Mailing Address: 702 North High Street, Madison WI 53717  
Address City State Zip Code  
Phone No.: (608) 826-6226  
Indicate if:  Contract Lobbyists or  Employee
- Lobbyist's Name: Jay Koritzinskas  
Mailing Address: 414 D'Onofrio Drive, Suite 300, Madison, WI 53719  
Address City State Zip Code  
Phone No.: (608) 833-7799  
Indicate if:  Contract Lobbyists or  Employee
- Lobbyist's Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Address City State Zip Code  
Phone No.: \_\_\_\_\_  
Indicate if:  Contract Lobbyists or  Employee
- Lobbyist's Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Address City State Zip Code  
Phone No.: \_\_\_\_\_  
Indicate if:  Contract Lobbyists or  Employee

**Section V - Authorized Signer**

- Name: Nancy Jensen  
Position or Relationship to Principal: Executive Director
- Name: \_\_\_\_\_  
Position or Relationship to Principal: \_\_\_\_\_
- Name: \_\_\_\_\_  
Position or Relationship to Principal: \_\_\_\_\_
- 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.

  
Signature \_\_\_\_\_ Title Executive Director  
Nancy C. Jensen  
Type or print name as signed above \_\_\_\_\_ Date Dec 26'2003

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 26<sup>th</sup> day of December, 2003

Melanie A. Toudot  
Notary \_\_\_\_\_

Commission expires: 9/24/06