



**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/Civil, 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**

**Jong Yeon Lee d/b/a Church Key, 626 University Ave., Madison, WI**

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

Sale of alcohol

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:

liquor license

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

- All       None       Agencies listed below

Alcohol License Review Committee and City Council

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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: See above

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

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

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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.

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For additional items, attach additional sheets.

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

**CAPITAL BUDGET**

Not applicable

topic

topic

topic

topic

topic

topic

**OPERATING BUDGET**

Not applicable

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.

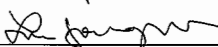
- Lobbyist's Name: Michael R. Christopher  
Mailing Address: 2 East Mifflin Street #600 Madison WI 53703  
Address City State Zip Code  
Phone No.: 608/252-9365  
Indicate if:  Contract Lobbyists or  Employee
- Lobbyist's Name: Melissa Destree  
Mailing Address: 222 W. Washington Ave. #310 Madison WI 53703  
Address City State Zip Code  
Phone No.: 608/268-1499  
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: Michael R. Christopher  
Position or Relationship to Principal: Attorney
- 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 forfeiture if I know or believe any of the above information not to be true.

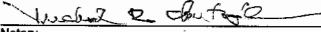
  
Signature \_\_\_\_\_ Title \_\_\_\_\_

Jong Yeon Lee d/b/a Church Key 4-4-05  
Type or print name as signed above Date

626 University Avenue, Madison, WI \_\_\_\_\_  
Address & Telephone (if different from first page of this form) Phone:

Michael R. Christopher, Attorney  
Individuals permitted to sign documents - Name and position of relationship to the principal of any designee authorized to sign documents submitted to the City Clerk by the organization principal.

Subscribed before me this 4 day of April, 2005.

  
Notary

Commission expires: in per manum