

**REGISTRATION OF PRINCIPAL
EMPLOYING A LOBBYIST**

For Use In 2005

RECEIVED-CITY OF MADISON
CLERKS OFFICE

05 AUG -3 PM 12:14

Return to Office of the City Clerk, 210 Martin Luther King, Jr Blvd, Room 103, Madison, WI 53703-3342

Section 1 -- Identification of Principal

"Principal" means any person who employs a lobbyist.

JH Findorff & Son Inc.

Name of Principal

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

Viola	Scott	Project Manager
Last Name	First Name	Title
300 S. Bedford St		
Mailing Address		
Madison	WI	53703
City	State	Zip Code

Business Address (if different)

441-1682

Contact Phone

257-5306

Contact FAX

www.findorff.com

Principal's Internet Address

sviola@findorff.com

Contact E-mail 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

Section II -- Nature and Interest of Principal

Check one of the following and complete only that section:



Business Entity

General contractor

Describe the business activity in which the entity is engaged

Chief Executive Officer: Lynch Rich President
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

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:

Answering questions relating to setbacks, zoning, surveying (CSM's), etc. associated with construction projects.

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

All None Agencies listed below

Dane County Planning & Development

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: Approval of CSM for WEA Insurance Trust

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

Will be able to comply with necessary setbacks for new building that principal is building for WEA Insurance Trust.

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

NA

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.

NA

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

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: Frank Thousand
Mailing Address: 1111 Deming Way Suite 200 Madison WI 53717
Address City State Zip Code
Phone No.: 821-8530
Indicate if: Contract Lobbyists or Employee
2. Lobbyist's Name: Scott Viola
Mailing Address: 300 S Bedford St Madison WI
Address City State Zip Code
Phone No.: 441-1682
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: Scott Viola
Position or Relationship to Principal: Employee
2. Name: Frank Thousand
Position or Relationship to Principal: Consultant
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.



Scott Viola

Project Manager

Signature

Title

Scott Viola

August 1, 2005

Type or print name as signed above

Date

Address & Telephone (if different from first page of this form)

See section V

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 1st day of August, 2005.

Jane

Notary

Commission expires: Sept 7, 2008