

REGISTRATION OF PRINCIPAL  
EMPLOYING A LOBBYIST

For Use In 2005

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 employees a lobbyist.

MSI GENERAL DICK DEBBINIL - OWNER / PRES.  
Name of Principal

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

KNEPPATH TIMOTHY PROJECT DIRECTOR  
Last Name First Name Title

MSI GENERAL PO BOX 7  
Mailing Address

OCONOMOC WI 53066  
City State Zip Code

Business Address (if different)

(262) 367-3661  
Contact Phone

(262) 367-7390 timk@msigeneral.com  
Contact FAX Contact E-mail Address

www.msigeneral.com  
Principal's Internet Address

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

SAME  
Last Name First Name

Firm or Organization Name

Mailing Address

City State Zip Code

Phone FAX E-mail Address

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CLERKS OFFICE  
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**Section II -- Nature and Interest of Principal**

Check one of the following and complete only that section:



**Business Entity**

DESIGN AND CONSTRUCTION OF COMMERCIAL BUILDINGS  
Describe the business activity in which the entity is engaged

Chief Executive Officer: DEBRIL D DIRIL PRESIDENT/OWNER  
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:

TO SPEAK WITH AND OBTAIN APPROVAL FROM  
THE URBAN DESIGN COMMISSION

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

All       None       Agencies listed below

UDC

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 From UDL

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

INCREASE CONSTRUCTION BUSINESS

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

CONSTRUCTION

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.

N/A

For additional items, attach additional sheets.



### Section IV - Authorization of Lobbyists

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

1. Lobbyist's Name: TIM KNEDDRATH  
Mailing Address: MSI GENERAL PO BOX 7 OLANHOMOWOC WI 53066  
Address City State Zip Code  
Phone No.: (262) 367-3661  
Indicate if:  Contract Lobbyists or  Employee
  
2. Lobbyist's Name: DON FROST  
Mailing Address: MSI GENERAL PO BOX 7 OLANHOMOWOC WI 53066  
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: TIM KNEDDRATH  
Position or Relationship to Principal: PROJECT DIRECTOR
  
2. Name: DON FROST  
Position or Relationship to Principal: ARCHITECT
  
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.



Tim Kneppratia 12/15/05 PROJECT DIRECTOR  
Signature Title

TIM KNEPPRATIA June 9, 2005  
Type or print name as signed above Date

N/A  
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 14<sup>th</sup> day of December, 2005.

Virginia Hicks  
Notary

Commission expires: 11/15/09