

REGISTRATION OF PRINCIPAL  
EMPLOYING A LOBBYIST  
For Use In 2005

RECEIVED-CITY OF MADISON  
CLERKS OFFICE

05 APR 20 PM 2:42

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 employes a lobbyist.

MADISON DEVELOPMENT CORPORATION

Name of Principal

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

STANISZEWSKI

Last Name

FRANK

First Name

PRESIDENT, MDC

Title

550 W. WASHINGTON AVE.

Mailing Address

MADISON

City

WI

State

53703

Zip Code

Business Address (if different)

608-256-2799 ext. 12

Contact Phone

256-1560

Contact FAX

fstan@mdecorp.org

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

**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

**BUSINESS ASSISTANCE FOR JOB CREATION, AND PROVIDE AFFORDABLE HOUSING**  
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: 40

**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: MDC RECEIVES FINANCIAL ASSISTANCE FROM CDBG, HOME AND TIF. MDC INTENDS TO DEVELOP HOUSING WHICH MAY REQUIRE ZONING, PLANNING AND OTHER SUPERVISION

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

All       None       Agencies listed below

CDBG COMMISSION  
PLAN COMMISSION  
URBAN DESIGN COMMISSION  
CDA  
COUNCIL

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: PLAN COMMISSION REZONING REQUEST, CDBG FUNDING REQUEST

- a. How will this item affect the principal's business or other activity?  
ABILITY TO DEVELOP AFFORDABLE HOUSING
- 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**

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.

- Lobbyist's Name: FRANK STANISZEWSKI  
Mailing Address: 550 W. WASHINGTON AVE MADISON WI 53703  
Address City State Zip Code  
Phone No.: 256-2799 ext. 12  
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
- Lobbyist's Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Address City State Zip Code  
Phone No.: \_\_\_\_\_  
Indicate if:  Contract Lobbyists or  Employee

### Section V - Authorized Signer

- Name: FRANK STANISZEWSKI  
Position or Relationship to Principal: PRESIDENT, MDC
- 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.

*Frank Staniszewski*  
Signature

PRESIDENT, MDC  
Title

FRANK STANISZEWSKI  
Type or print name as signed above

April 20, 2005  
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 20 day of April, 2005.

*David J. Scholtens*  
Notary

Commission expires: 4/2/06

