

**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

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CLERKS OFFICE

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**Section 1 -- Identification of Principal**

**"Principal" means any person who employees a lobbyist.**

South Central Federation of Labor, AFL-CIO

Name of Principal

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

Cavanaugh	Jim	President
Last Name	First Name	Title
1602 S. Park St. #228		
Mailing Address		
Madison	WI	53715
City	State	Zip Code

Business Address (if different)

256-5111

Contact Phone

256-6661

Contact FAX

www.scfl.org

jim@scfl.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

Umbrella organization for labor unions. Political, legislative, comty. service, P R., Solidarity.

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

75 local labor unions in the area.

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: 75 unions

**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:

Passage of and enforcement of employment laws. Economic development issues.

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

All       None       Agencies listed below

Board of Estimates, EEOC

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: Living wage ordinance, minimum wage ordinance, other employment law
  - a. How will this item affect the principal's business or other activity?  
Won't.
  - b. Which industry, trade, profession or segment or portion thereof would be principally affected?  
None.
  - 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.



**Section IV - Authorization of Lobbyists**

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

- 1. Lobbyist's Name: Jim Cavanaugh  
Mailing Address: 1602 S. Park St. #228 Madison WI 53715  
Address City State Zip Code  
Phone No.: 256-5111  
Indicate if:  Contract Lobbyists or  Employee
  
- 2. Lobbyist's Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
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: Jim Cavanaugh  
Position or Relationship to Principal: Employee/officer
  
- 2 Name: \_\_\_\_\_  
Position or Relationship to Principal: \_\_\_\_\_
  
- 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.



<u>James A. Cavanaugh</u> Signature	President
James A. Cavanaugh	July 13, 2005
Type or print name as signed above	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 13<sup>th</sup> day of July, 2005.

Marilyn McWilliams  
Notary

Commission expires: 04/23/06