

**CITY OF MADISON
Principal's Expense Statement**

Reporting Period: January 1 through June 30
July 1 through December 31

Filing Deadline, Indicate Half-Year: July 31
 January 31

2285
TOLD Development Company
Name of Principal

(262) 797-4101
Phone No.

20800 Swenson Drive, Suite 400, Waukesha, WI 53186
Address

Timothy Anderson
Name of Lobbyist

(608) 255-0800
Lobbyist Phone No.

Name of Lobbyist

Lobbyist Phone No.

- Total lobbying expenditures and obligations did not exceed \$1,000. (If so, proceed directly to Certification.)
- Total lobbying expenditures and obligations incurred exceeded \$1,000. \$ _____

Is this amount an estimate under Sec. 2.40 (10) (b) MGO? Yes No

Disclosure of Lobbying Communications

Date	City Official	Number of Contacts	Subject of Each Contact	Lobbyist
9/25/2008	Brad Murphy, Larry Nelson, Alder Mark Clear	1	Charmany Farms Plan	Timothy Anderson

See Page 2 to List Additional Disclosures

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 authorized designee. I understand that if I know or believe any of the above information not to be true, I am subject to a forfeiture of \$1,000 or more.


Signature **Principal**
Title

Timothy L. Anderson
Type or print name

January 13, 2009
Date

**CITY OF MADISON
Principal's Expense Statement**

Reporting Period: January 1 through June 30
July 1 through December 31

Filing Deadline, Indicate Half-Year:

July 31
 January 31

2307
Livesey
Name of Principal

(608) 833-2929
Phone No.

2275 Deming Way, Suite 300, Middleton, WI 53562
Address

Timothy Anderson
Name of Lobbyist

(608) 255-0800
Lobbyist Phone No.

Name of Lobbyist

Lobbyist Phone No.

Total lobbying expenditures and obligations did not exceed \$1,000. (If so, proceed directly to Certification.)

Total lobbying expenditures and obligations incurred exceeded \$1,000. \$ _____

Is this amount an estimate under Sec. 2.40 (10) (b) MGO? Yes No

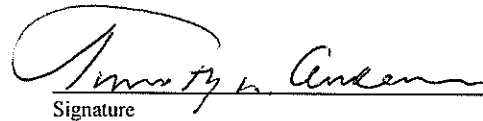
Disclosure of Lobbying Communications

Date	City Official	Number of Contacts	Subject of Each Contact	Lobbyist
9/3/2008	UDC Meeting	1	Maple Grove/PD Development	Timothy Anderson

See Page 2 to List Additional Disclosures

Certification

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Signature

Principal
Title

Timothy L. Anderson
Type or print name

January 13, 2009
Date

**CITY OF MADISON
Principal's Expense Statement**

Reporting Period: January 1 through June 30
July 1 through December 31

Filing Deadline, Indicate Half-Year:

July 31
 January 31

2346
Bunky's Café
Name of Principal

(608) 204-7004
Phone No.

2827 Atwood Avenue, Madison, WI 53704
Address

Timothy Anderson
Name of Lobbyist

(608) 255-0800
Lobbyist Phone No.

Name of Lobbyist

Lobbyist Phone No.

Total lobbying expenditures and obligations did not exceed \$1,000. (If so, proceed directly to Certification.)

Total lobbying expenditures and obligations incurred exceeded \$1,000. \$ _____

Is this amount an estimate under Sec. 2.40 (10) (b) MGO? Yes No


Disclosure of Lobbying Communications

Date	City Official	Number of Contacts	Subject of Each Contact	Lobbyist
12/15/2008	Plan Commission Mtg.	1	Rezoning from R4 to C2	Timothy Anderson

See Page 2 to List Additional Disclosures

Certification

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Signature **Principal**
Title

Timothy L. Anderson
Type or print name

January 13, 2009
Date

REGISTRATION OF LOBBYIST

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

Section 1 -- Identification of Lobbyist

"Lobbyist" means any person paid to influence administrative or legislative action.

Anderson

Last Name

Timothy

First Name

Principal

Title

717 John Nolen Drive

Mailing Address

Madison

City

WI

State

53713

Zip Code

Same

Business Address (if different)

(608) 255-0800

Contact Phone

(608) 255-7750

Contact FAX

tanderson@saa-madison.com

Contact E-mail Address

www.saa-madison.com

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

Cherokee Park, Inc.

Name of Principal

Designated Representative of Principal:

Tiziani

Last Name

Dennis

First Name

Title

5000 Sherman Avenue

Mailing Address

Madison

City

WI

State

53704

Zip Code

Business Address (if different)

608-249-9940

Contact Phone

dtiziani@cherokeecountryclub.net

Contact E-mail Address

n/a

Contact FAX

n/a

Internet Address

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

_____ Last First Title

Approximate number of members: _____

Other Not for Profit

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:

Approval of Cherokee Park, Inc. land division and rezoning application for the 5th Addition, the Hornung property, and Country Club parcel.

Section IV - Authorization of Lobbyists

As a designated representative of the Principal, the Lobbyist named above is hereby authorized to lobby on behalf of the Principal.

- The lobbyist is an employee of the Principal.
- The lobbyist is also authorized to file expense reports or other filings on behalf of the Principal.

Dated: _____

Name: _____

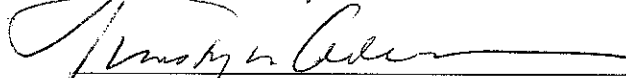
Position: _____

Signature: _____

Section V -- 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.

On Behalf of Lobbyist:


Signature

Principal
Title

Timothy L. Anderson
Type or print name as signed above

1/28/2008
Date

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

On Behalf of Principal:

Signature

Title

Type or print name as signed above

Date

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

REGISTRATION OF LOBBYIST

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

Section 1 -- Identification of Lobbyist

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Anderson

Last Name

Timothy

First Name

Principal

Title

717 John Nolen Drive

Mailing Address

Madison

City

WI

State

53713

Zip Code

Same

Business Address (if different)

(608) 255-0800

Contact Phone

(608) 255-7750

Contact FAX

tanderson@saa-madison.com

Contact E-mail Address

www.saa-madison.com

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

Marcus Theatres Corporation

Name of Principal

Designated Representative of Principal:

Falvey

Last Name

Katie

First Name

Title

100 E. Wisconsin Avenue, Suite 2000

Mailing Address

Milwaukee

City

WI

State

53202-4122

Zip Code

Business Address (if different)

(414) 905-1140

Contact Phone

katiefalvey@marcuscorp.com

Contact E-mail Address

(414) 905-2419

Contact FAX

n/a

Internet Address

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

_____ Last First Title

Approximate number of members: _____

Other Not for Profit

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:

Rezoning application and development approval process for the Marcus site located at Nelson Road and USH 151.

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

- All
- None
- Agencies listed below

Urban Design Commission, Plan Commission, City 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: **Approval of rezoning application by city agencies.**

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

Client Contract.

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

Construction, planning, architecture.

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. **N/A**

CAPITAL BUDGET

OPERATING BUDGET

topic
topic
topic
topic
topic
topic

topic
topic
topic
topic
topic
topic

Section IV - Authorization of Lobbyists

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- The lobbyist is also authorized to file expense reports or other filings on behalf of the Principal.

Dated: _____

Name: _____

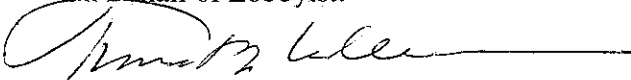
Position: _____

Signature: _____

Section V -- 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

On Behalf of Lobbyist:


Signature

Principal
Title

Timothy L. Anderson
Type or print name as signed above

May 7, 2008
Date

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

On Behalf of Principal:

Signature

Title

Type or print name as signed above

Date

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

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First Name

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Title

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Madison

City

WI

State

53713

Zip Code

Same

Business Address (if different)

(608) 255-0800

Contact Phone

(608) 255-7750

Contact FAX

tanderson@saa-madison.com

Contact E-mail Address

www.saa-madison.com

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

Livesey Company

Name of Principal

Designated Representative of Principal:

Livesey

Last Name

John

First Name

Title

2275 Deming Way, Suite 300

Mailing Address

Middleton

City

WI

State

53562

Zip Code

Business Address (if different)

608-833-2929

Contact Phone

jklivesey@liveseyco.com

Contact E-mail Address

608-824-9020

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

Last

First

Title

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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:

Rezoning application and development approval process of the Livesey property at CTH "PD" and Maple Grove Road.

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

- All None Agencies listed below

Urban Design Commission, Plan Commission, City 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: Approval of rezoning application by city agencies.

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

Client contract.

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

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CAPITAL BUDGET

OPERATING BUDGET

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

topic

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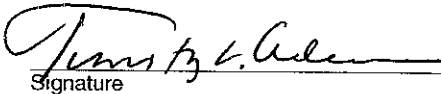
Position: _____

Signature: _____

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On Behalf of Lobbyist:


Signature

Principal
Title

Timothy L. Anderson
Type or print name as signed above

5/7/2008
Date

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

On Behalf of Principal:

Signature

Title

Type or print name as signed above

Date

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