

**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

Anding Properties
Name of Principal
5900 Monona Drive Suite 401 Madison WI 53716-0124

(608) 221-3854
Phone No.

Address

Aaron E. Anding
Name of Lobbyist

(608) 221-3854
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

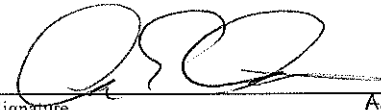
Disclosure of Lobbying Communications

Date	City Official	Number of Contacts	Subject of Each Contact	Lobbyist

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
Alfred E. Anding
Type or print name
1/12/2009
Date

Aaron Anding
Managing Member
President
Title
Power of Attorney for Alfred Anding

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

Reporting Period: January 1 through June 30
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Filing Deadline, Indicate Half-Year:

July 31
 January 31

A. E. Anding Marital Trust
Name of Principal

(608) 221-3854
Phone No.

5900 Monona Drive, Suite 401, Monona, WI 53716
Address

Aaron Anding
Name of Lobbyist

(608) 221-3854
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

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Alfred E. Anding Trustee
Signature Title
Alfred E. Anding
Type or print name
7/29/08
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.

Anding Last Name Aaron First Name _____ Title _____

5900 Monona Drive, Suite 401 Mailing Address

Monona City WI State 53716 Zip Code

Business Address (if different)

(608) 221-3854 Contact Phone

(608) 221-4230 Contact FAX

aaron.anding@andingrealty.com Contact E-mail Address

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

A. E. Anding Marital Trust Name of Principal

Designated Representative of Principal:

Anding Last Name Alfred First Name _____ Title Trustee

5900 Monona Drive, Suite 401 Mailing Address

Monona City WI State 53716 Zip Code

Business Address (if different)

(608) 221-3854 Contact Phone

(608) 221-4230 Contact FAX

a.e.anding@andingrealty.com Contact E-mail Address

Internet Address

Check one of the following and complete only that section:

Business Entity

Real Estate Development & Property Management
Describe the business activity in which the entity is engaged

Chief Executive Officer: Anding, Alfred E.
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

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:

All matters relating to approval and development of property
in the City of Madison

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

- All
- None
- Agencies listed below

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: Items related to Lake Edge Shopping Center

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

The Principal owns Lake Edge Shopping Center in the City of Madison

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

The real estate & construction industry

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

OPERATING BUDGET

topic
topic
topic
topic
topic
topic

topic
topic
topic
topic
topic
topic

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: 1/30/08

Name: Alfred E. Anding

Position: Trustee

Signature: Aaron E. Anding - Aaron E. Anding as Trustee's power of attorney for Alfred E. Anding

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:

Aaron E. Anding
Signature Title Broker & Property Manager

Aaron E. Anding
Type or print name as signed above Date 1/30/08

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

On Behalf of Principal:

Aaron E. Anding as power of Attorney
Signature Title

Alfred E. Anding
Type or print name as signed above Date 1/30/08

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