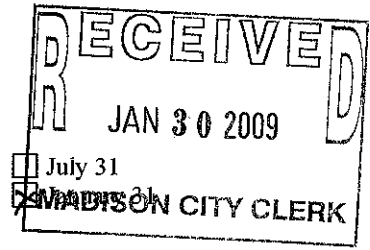


**CITY OF MADISON
Principal's Expense Statement**



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

Filing Deadline, Indicate Half-Year:

July 31
 MADISON CITY CLERK

Greater Madison Chamber of Commerce
Name of Principal

608-256-8348
Phone No.

615 E. Washington Ave, madison, WI 53703
Address

Delora Newton
Name of Lobbyist

608-443-1947
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
<i>SEE ATTACHED</i>				

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.

Delora Newton executive vice president
Signature Title
Delora Newton
Type or print name
1/30/09
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

Greater Madison Chamber of Commerce
Name of Principal

608-256-8348
Phone No.

615 E Washington Ave Madison WI 53703
Address

Delora Newton
Name of Lobbyist

608-443-1947
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 executive vice president
Signature Title
Delora Newton
Type or print name
7-25-2008
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.

NEWTON Last Name DELORA First Name EXECUTIVE VICE PRESIDENT Title
PO BOX 71 Mailing Address
MADISON City WI State 53701-0071 Zip Code
615 E. WASHINGTON AVE. Business Address (if different)
(608) 443-1947 Contact Phone
(608) 395-3966 Contact FAX dnewton@greatermadisonchamber.com Contact E-mail Address
WWW.GREATERMADISONCHAMBER.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

GREATER MADISON CHAMBER OF COMMERCE
Name of Principal

Designated Representative of Principal:

Alexander Last Name Jennifer First Name President Title
PO BOX 71 Mailing Address
MADISON City WI State 53701-0071 Zip Code
615 E. WASHINGTON AVE. Business Address (if different)
(608) 443-1946 Contact Phone jalexander@greatermadisonchamber.com Contact E-mail Address
(608) 395-3965 Contact FAX WWW.GREATERMADISONCHAMBER.COM 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

Business membership Association
Describe the industry trade or profession including any segment thereof which the association exclusively or primarily represents

Chief Executive Officer: Alexander Jennifer President
Last First Title

Approximate number of members: 1800

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:

Any issue that affects the business climate or quality of life.

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: see attachment

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

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

OPERATING BUDGET

topic
topic
topic
topic
topic
topic

topic
topic
topic
topic
topic
topic

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: Tax Incremental Financing (TIF)

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

Our interest in this issue is to advocate on behalf of businesses that are affected by the Tax Incremental Financing (TIF) opportunities available in the City of Madison.

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

Tax Incremental Financing (TIF) will affect Madison area businesses.

- 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.

2. Item: Inclusionary Zoning

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

Our interest in this issue is to advocate on behalf of businesses that may be adversely affected by ineffective inclusionary zoning provisions within the greater Madison area.

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

Ineffective legislation dictating inclusionary zoning provisions will affect Madison businesses.

- 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.

3. Item: Department of Planning and Development Reorganization

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

Our interest in this issue is to advocate on behalf of businesses that may be affected by the reorganization of this department.

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

All Madison businesses seeking city approval for their business will be affected by the reorganization of this department.

- 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.

4. Item: Billboard Ordinance Requirements

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

Our interest in this issue is to advocate on behalf of businesses that may be affected by changes to the City's billboard requirements.

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

All Madison businesses that use advertising street graphics.

- 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.

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: Jennifer Alexander

Position: President

Signature: *Jennifer Alexander*

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] executive vice president
Signature Title

Delora Newton 1/29/2008
Type or print name as signed above Date

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

On Behalf of Principal:

Jennifer Alexander President
Signature Title

Jennifer Alexander 1/30/08
Type or print name as signed above Date

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