

### 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.**

Last Name Dwyer      First Name Julianne      Title Compliance Director  
 Mailing Address 815 Forward Dr.  
 City Madison      State WI      Zip Code 53711  
 Business Address (if different) \_\_\_\_\_  
 Contact Phone 608/274-7900  
 Contact FAX 608/274-9181      Contact E-mail Address jdwyer@independentliving.com  
 Internet Address www.independentliving.com

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**

Name of Principal Independent Living, Inc.  
 Designated Representative of Principal:  
 Last Name Giovannoni      First Name Rita      Title CEO  
 Mailing Address 815 Forward Dr.  
 City Madison      State WI      Zip Code 53711  
 Business Address (if different) \_\_\_\_\_  
 Contact Phone 608/274-7900      Contact E-mail Address jdwyer@independentliving.com  
 Contact FAX 608/274-9181      Internet Address www.independentliving.com

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**

Labor Union       Charitable/Religious/Civic, etc.       Other

To provide services and housing to older and disabled adults  
Briefly describe the organization's purpose and any other group with a common interest which the organization primarily represents

N/A  
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: N/A

**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:

Funding of services and housing for older and disabled adults

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

- All
- None
- Agencies listed below

Planning and Community and Economic Development, CDBG,  
Community Services

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: N/A

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	<u>CDBG funding for service programs</u>
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: 1/23/09

Name: Rita Giovannoni

Position: CEO

Signature: *Rita Giovannoni*

**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:

*JR* Signature Compliance Director Title

Julianne Dwyer Type or print name as signed above 1/22/09 Date

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

On Behalf of Principal:

*Rita Giovannoni* Signature CEO Title

Rita Giovannoni Type or print name as signed above 1/23/09 Date

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