

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.

Little Last Name Kevin First Name Director of Public Policy Title

PO Box 71 Mailing Address

Madison City WI State 53701-0071 Zip Code

615 E. Washington Ave. Business Address (if different)

(608) 443-1949 Contact Phone

(608) 256-0333 Contact FAX

klittle@greatermadisonchamber.com Contact E-mail Address

www.greatermadisonchamber.com Internet Address

Person to whom correspondence should be sent (if different from above)

Last Name

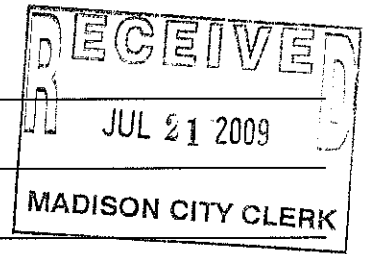
First Name

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

(608) 256-0333 Contact FAX

jaalexander@greatermadisonchamber.com Contact E-mail Address

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 Member 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: 1600

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 impacts 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: Economic Development Plan

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

Our interest in this issue is to support and advocate for implementation of recommendations outlined in the 3-5 year Strategic Economic Development Plan

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

The purpose of the plan is to make it easier to do business in Madison. Therefore, the outcome of the recommendations impact all 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: Vehicle Miles Traveled Ordinance

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

This proposal could have a dramatic impact on jobs and development in the city

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

All businesses looking to locate or expand in the City of Madison

- 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: 7/21/09

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:

Kevin Little
Signature

Director of Public Policy
Title

Kevin Little
Type or print name as signed above

07-21-09
Date

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

On Behalf of Principal:

Jennifer Alexander
Signature

President
Title

Jennifer Alexander
Type or print name as signed above

Date

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