

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.

McDonell Last Name Meggin First Name Program Director Title

1202 Williamson St. Suite A
Mailing Address

Madison City WI State 53703 Zip Code

Same
Business Address (if different)

608-257-0143
Contact Phone

608-286-0804 Contact FAX mmcdonell@tenantresourcecenter.org Contact E-mail Address

http://tenantresourcecenter.org/
Internet Address

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

SAME 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

Tenant Resource Center (TRC)
Name of Principal

Designated Representative of Principal:

McDonell Last Name Meggin First Name Prog. Dir. Title

SAME AS ABOVE
Mailing Address

City State Zip Code

Business Address (if different)

Contact Phone Contact E-mail Address

Contact FAX 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

Chief Executive Officer: _____
Last First Title

Approximate number of members: _____

Other Not for Profit

Labor Union Charitable/Religious/Civic, etc. Other

Nonprofit membership org that provides info/referral and housing services on rental housing related matters.

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: 30

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:

- City Budget, specifically CDBG and OCS funding for TRE - primarily every two years
- common council annual budget deliberations

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

- All
- None
- Agencies listed below

Community Development Block Grant Commission (CDBG)
Community Services Commission (OCS)

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: CDBG and OCS summer process, city budget

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

Funding for TRC services determines the agency's annual budget and program activities

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

Not applicable

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.

TRC funding as described above.

For additional items, attach additional sheets.

2. If lobbying communication relates to the capital or operating budget, identify topic or topics.

CAPITAL BUDGET

N/A
topic

topic

topic

topic

topic

topic

OPERATING BUDGET

TRC funding
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: January 12, 2010

Name: Meggin McDonell

Position: Program Director

Signature: [Handwritten 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:

[Handwritten Signature] Program Director
Signature Title

Meggin H. McDonell 1/12/10
Type or print name as signed above Date

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

On Behalf of Principal:

[Handwritten Signature] Program Director
Signature Title

Meggin H McDonell 1/12/10
Type or print name as signed above Date

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