

# 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      jaalexander@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: 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

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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?

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

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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

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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**

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topic

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topic

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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?

*Businesses seeking TIF assistance for projects 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.

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 impacts 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.

4. Item: Edgewater Hotel Redevelopment

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

*Redevelopment of the Edgewater Hotel will significantly impact the downtown and regional economy*

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

*There will be public and private benefits from redevelopment, including the creation of hundreds of new jobs, promote area revitalization, support downtown academic institutions and provide greater public access to the lake*

- 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.

5. Item: Zoning Code Rewrite

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

*Revisions to the city's zoning code and project approval process will impact the ability to grow and retain jobs in Madison*

- 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**

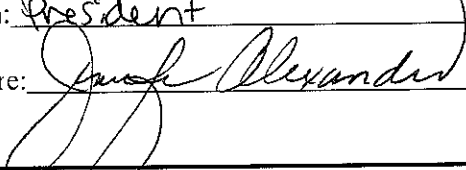
As a designated representative of the Principal, the Lobbyist named above is hereby authorized to lobby on behalf of the Principal.

- 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: 1-7-09

Name: Jennifer Alexander

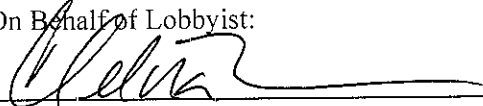
Position: President

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:

 Executive Vice President  
Signature Title

Delora Newton 1-6-2010  
Type or print name as signed above Date

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

On Behalf of Principal:

 President  
Signature Title

Jennifer Alexander 1-7-09  
Type or print name as signed above Date

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