# **REGISTRATION OF LOBBYIST**

Return to Office of the City Clerk, 210 Martin Luther King, Jr. Blvd., Room 103, Madison, WI 53703-3342

llstrup	Jason		Presid	dent
Last Name	First Name		Title	
122 West Washington Avenue,	Suite 250			
Mailing Address				
Madison		WI		53703
City		State		Zip Code
Business Address (if different)				
(608) 512-1330				
Contact Phone				
		jil:	strup@downtownmadis	son.org
Contact Fax			ontact E-mail Address	-
www.downtownmadison.org				
Internet Address				
Person to whom correspon	dence should be sent	(if differen	t from above)	
·		•		
Ilstrup Last Name			ason rst Name	
Downtown Madison Inc.				
Firm or Organization				
122 West Washington Ave. Su	ite 250			
Mailing Address				
Madison		WI		53703
City		State		Zip Code
(608) 512-1330			jilstrup@downtow E-mail Address	nmadison.org
Phone	FAX		E-mail Address	
Section II - Nature and Inte	rest of Principal			
Jason N Ilstrup				
Name of Principal				
Designated Representative of I	Principal:			
Ilstrup	Jason			
Last Name	First Name		Title	
122 West Washington Ave. Su	ite 250			
Mailing Address				
Madison		WI		53703
City		State		Zip Code
Business Address (if different)				
(608) 512-1330		i	ilstrup@downtownmac	lison.org
Contact Phone			Contact E-mail Address	
Contact Fax			nternet Address	

Check one of the following and complete only that section:

## **Business Entity**

Describe the business activity in which the entity is engaged:

□ Is a partnership or limited liability company. See list of partners/members at end of form.

## Industry, Trade or Professional Association

Describe the industry, trade or profession including any segment thereof which the association exclusively or primarily represents:

## ✓ Other Not for Profit

#### Describe the organization's purpose:

Downtown Madison, Inc. is committed to sustaining, planning for, and growing downtown Madison as a vibrant regional econc engine that offers a best in class quality of life for businesses, downtown workers, residents, and visitors.

Describe any other group with a common purpose the organization represents:

Describe any other group with a common interest the organization represents:

Describe any other group with a common interest providing membership to the organization:

Describe any other group with a common interest providing funding to the organization:

Individual

Name and address of the individual's employer, if any, or of the individual's primary place of business, if self-employ

Describe the business activity in which the individual or the individual's employer is engaged:

If Industry, Trade, or Professional Association, or Not for Profit, approximate number of members: Chief Executive Officer of Business Entity or Industry, Trade, or Professional Association:

Last Name

First Name

Section III - Areas of Lobbying								
Provide a reasonably specific narrative summary of areas of legislative and administrative action the principal may attempt to influence: Development, housing, transportation and quality of life.								
List the City agencies in which the principal seek to influence administration action:								
🗹 All	All I None Listed Below		Listed Below					
			or administrative action ng communication befo	in connection with which the principal has re December 31.				
	a. How will this item affect the principal's business or other activity?							
	b. Whic	h 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.							
2.	For additional items, see attachments. . If lobbying communication relates to the capital or operating budget, identify topic or topics.							
		CAPITA	L BUDGET	OPERATING BUDGET				

## 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:\_01/02/2018

Name:\_\_\_\_\_
Position:\_\_\_\_\_\_
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:

	President	
Signature	Title	
Jason Ilstrup	01/02/2018	
Type or print name as signed above	Date	
Address & Telephone (if different from first page of this form)		
On Behalf of Principal:		
Signature	Title	
Jason Ilstrup	01/02/2018	
Type or print name as signed above	Date	

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