REGISTRATION OF LOBBYIST

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

Section I - Identification of Lobbyist

"Lobbyist" means any person paid to influence administrative or legislative action.

Gautreau	Melanie	Director o	of Special Events
Last Name	First Name	Title	
1001 Wisconsin Place			
Mailing Address			
Madison	WI		53703
City	State		Zip Code
•			·
Business Address (if different)			
(608) 535-8200			
Contact Phone			
		mgautreau@theedgewater.c	com
Contact Fax		Contact E-mail Address	
www.theedgewater.com			
Internet Address			
Person to whom correspondence sh	ould be sent (if differ	ent from above)	
Gautreau	ould be defit (if differ	Melanie	
Last Name		First Name	
The Edgewater			
Firm or Organization			
1001 Wisconsin Place			
Mailing Address			
Madison	WI		53703
City	State		Zip Code
(608) 535-8200		mgautreau@theedge	water.com
Phone FAX		E-mail Address	
Section II - Nature and Interest of Pr	rincipal		
Melanie Gautreau			
Name of Principal			
Designated Representative of Principal:			
Gautreau	Melanie		
Last Name	First Name	Title	
1001 Wisconsin Place			
Mailing Address			
Madison	WI		53703
City	State		Zip Code
Business Address (if different)			
(608) 535-8200		mgautreau@theedgewater	c.com
Contact Phone		Contact E-mail Address	
Contact Fax		Internet Address	

V	Business Entity Describe the business activity in which the	entity is engaged:			
	Hospitality				
	☐ Is a partnership or limited liability company.	See list of partners/members at end	of form.		
	Industry, Trade or Professional Asso	ciation			
	Describe the industry, trade or profession in primarily represents:	ncluding any segment thereof whic	ch the association exclusively or		
	Other Not for Profit				
	Describe the organization's purpose:				
	Describe any other group with a common pu	urpose the organization represents	s:		
	Describe any other group with a common in	terest the organization represents	:		
	Describe any other group with a common in	terest providing membership to th	e organization:		
	Describe any other group with a common in	terest providing funding to the orç	ganization:		
	Individual				
	Name and address of the individual's employ The Edgewater 1001 Wisconsin Place Madison, WI 53703	yer, if any, or of the individual's pr	imary place of business, if self-employ		
	Describe the business activity in which the	individual or the individual's empl	oyer is engaged:		
	If Industry, Trade, or Professional Association,	or Not for Profit, approximate numbe	r of members:		
	Chief Executive Officer of Business Entity or Inc	ef Executive Officer of Business Entity or Industry, Trade, or Professional Association:			
	Dunn	Robert	President and CEO		
	Last Name	First Name	Title		

Check one of the following and complete only that section:

atten	ide a reasonably specific nar npt to influence: rtainment License	rative summary of areas of	legislative and administrative action the principal may			
List t	the City agencies in which the	e principal seek to influenc	e administration action:			
□ A	II None	☑ Listed Below				
Com	mon Council					
	tify the proposed legislative o tends to make a lobbying cor		connection with which the principal has made ber 31.			
1.	Item: Entertainment License	<u> </u>				
	A. How will this item affect Source of revenue	ct the principal's business o	or other activity?			
	b. Which industry, trade, Hospitality, Entertainmen		portion thereof would be principally affected?			
			City program or person for which the mount, if you know the amount.			
	For additional items, see a	uttachments.				
2.	If lobbying communication	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 Lobb behalf of the Principal.	yist named above is hereby authorized to lobby on	
☐ The lobbyist is an employee of the Principal.		
The lobbyist is also authorized to file expense re Dated: 01/19/2018		
Name:		
Position:		
Signature:		
Section V - Certification		
	ny knowledge, information and belief, and that I am the registrant or an forfeiture if I know or believe any of the above information not to be true	
•	Director of Special Events	
Signature	Title	
Melanie Gautreau	01/19/2018	
Type or print name as signed above	Date	
Address & Telephone (if different from first page of this fo	orm)	
On Behalf of Principal:		
Signature	Title	
Melanie Gautreau	01/19/2018	
Type or print name as signed above	Date	
Address & Telephone (if different from first page of this fo	orm)	

List of partners/members (see Section II above):

Melanie Gautreau