## 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. **TRACHTENBERG RONALD** Last Name First Name Title 10 E Doty St, Ste 900 Mailing Address Madison State City Business Address (if different) (608) 661-3975 Contact Phone RTRACHTENBERG@VONBRIESEN.COM Contact Fax Contact E-mail Address Internet Address Person to whom correspondence should be sent (if different from above) Last Name First Name Firm or Organization Mailing Address City State Zip Code Phone FAX E-mail Address **Section II - Nature and Interest of Principal** Lisie Kitchel Name of Principal Designated Representative of Principal: Kitchel First Name Last Name Title 940 Lawrence St Mailing Address Madison 53715 City Zip Code

eric63@charter.net

Internet Address

Contact E-mail Address

Business Address (if different)

(608) 209-8330

Contact Phone

Contact Fax

Che	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:				
$\checkmark$	Other Not for Profit				
	Describe the organization's purpose:				
	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:				
	bescribe any other group with a common interest providing membersing 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:					
					Lost Name
	Last Name First Name Title				

Section III - Areas of Lobbying			
attemp	e a reasonably specific narrative summary of a of to influence: ition to Barriques CUP (Legistar File No. 41731)	areas of legislative and administrative action the principal may	
List the	e City agencies in which the principal seek to	influence administration action:	
☐ All	✓ None ☐ Listed Below	w	
or inte	nds to make a lobbying communication before	ction in connection with which the principal has made e December 31.	
1.	Item:		
	a. How will this item affect the principal's bu	usiness or other activity?	
	b. Which industry, trade, profession or segn	nent or portion thereof would be principally affected?	
	c. If the item is an appropriation, please idea appropriation is proposed and the approx	ntify the City program or person for which the ximate amount, if you know the amount.	
	For additional items, see attachments.		
2.	If lobbying communication relates to the capital or operating budget, identify topic or topics.		
	CAPITAL 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 red	eports or other filings on behalf of the Principal.			
Dated: 09/13/2018				
Name:				
Position:				
Signature:				
Section V - Certification				
	y knowledge, information and belief, and that I am the registrant or an orfeiture if I know or believe any of the above information not to be true.			
Signature	Title			
RONALD TRACHTENBERG	09/13/2018			
Type or print name as signed above	Date			
Address & Telephone (if different from first page of this fo	ırm)			
On Behalf of Principal:				
Signature	Title			
Lisie Kitchel	09/13/2018			
Type or print name as signed above	Date			
Address & Telephone (if different from first page of this fo	orm)			