Date
CITY OF MADISON
Registration Statement - LANDLORD & TENANT ISSUES SUBCOMMITTEE
Please Print PLEASE PRINT CLEARLY
Agenda No Address
Please check the appropriate boxes:
Support Oppose Neither Support Nor Oppose and Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organization or a person other than yourself: Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the nam of who you represent and go on to the next question.)
Name, address and telephone number of each person or organization you are representing:
Are you being paid for your representation?
Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the nex question.)

Speaking Limits:

_		lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
		red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)
If you that:	are be	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
	3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
		o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

Date: 4/14/1

CITY OF MADISON

Registration Statement - LANDLORD & TENANT ISSUES SUBCOMMITTEE

Please Print	PLEASE PRINT CLEARLY
_Agenda No/	Name Dan Socley Address God Willow-Brown Trl. Sun Prairie, WT 53590
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppose	and Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organizatio (If you answered "no," STOP; you need not complete of who you represent and go on to the next question	lete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each person	on or organization you are representing:
Are you being paid for your representation?	Yes No
Are you appearing as part of your other paid duties (If you answered "no," STOP; you need not complete question.)	for this person or organization? Yes No lete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Common Conformation Hearing	•

Are you an elect other governmen	ted official or employee who is appearing solely on behalf of you nated body?	ur office or for your municipality or Yes No
	l "yes" to the question, STOP. You need not complete the rest of answered "no" to the question, go on to the next question.)	this form, except that you must sign
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	Your principal is not permitted to authorize you to lobby unless City Clerk.	you are registered with the
p	f your principal spends or will owe more than \$1,000 for lobbying period (half year), the principal must file expense statements we emainder of the calendar year?	
	he City Clerk's website <u>www.cityofmadison.com/clerk/index.ht</u> City-County Building, Madison, for more information.)	ml or go to the Clerk's Office at
Date	Signature	
	Print Name	

Date: Office Date:

CITY OF MADISON

Registration Statement - LANDLORD & TENANT ISSUES SUBCOMMITTEE

Please Print	PLEASE PRINT CLEARLY
	Name Myssaffellerbrand-Best Address SOG Bridlewood CM
Agenda No	Address SSY Bridlewood CM
	Watertown, W1 53094
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppose	and Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organization (If you answered "no," STOP; you need not complete of who you represent and go on to the next question	ete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each perso	n or organization you are representing:
	
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid duties (If you answered "no," STOP; you need not comple question.)	for this person or organization? Yes No lete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Common Conformation Hearing	3 minutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality of their governmental body?				
	vered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question.)			
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	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)			
Date	Signature			
	Print Name			

CITY OF MADISON
Registration Statement - LANDLORD & TENANT ISSUES SUBCOMMITTEE COMMITTEE
Please Print PLEASE PRINT CLEARLY
Agenda No. Future Aganda Address Bo N Heur El St. Mandel Son WI
Please check the appropriate boxes:
Support □ Oppose □ Oppose □ Neither Support Nor Oppose □ Available to answer questions
At this meeting are you representing an organization or a person other than yourself: Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question.)
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Are you being paid for your representation?
Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)
Speaking Limits: Public Hearing (Common Council)5 minutes Information Hearing3 minutes

Date: _____

-	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?				
1 3 3		ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)			
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		the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ne City-County Building, Madison, for more information.)			
Date	101	15/11 Signature Breudo While			
		Print Name BREVIA 4 KONCEL			