

23611

Date: 20 Sept 2011

# **WISH TO SPEAK FORM**



## **CITY OF MADISON**

Registration Statement -		Common Council		
J		COMMITTEE		
Please Print		PLEASE	E PRINT NAME CLEARLY	
Agenda No		Name Address	Franklin Wikon 360 W Washington 411 Madiston W 53703	
Please check	one:	AND	Please check:	
Support			Wish to Speak	
Oppose				
Neither	Support Nór Op	pose		
(If you answered "n of who you represen	t and go on to the next q	t complete the rest question.)	on other than yourself: Yes And Yes of this form. If you answered "yes," provide the name zation you are representing:	
Are you being paid	for your representation?		Yes 4No	
	s part of your other paid o," <b>STOP;</b> you need no		son or organization?  Yes Ano of this form. If you answered "yes," go on to the next	
Speaking Limits:	Public Hearing (Com Information Hearing			

(SEE BACK)

### **REGISTRATION STATEMENT - PAGE 2**

Are you an el other governn	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
	red "yes" to the question, <b>STOP.</b> 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 are bei that:	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?
	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 20.	Set 204 Signature All Miles
	Print Name Wandlus A. W. 182





Date: 9/20/11

## **WISH TO SPEAK FORM**

## **CITY OF MADISON**

Registration Statement -	COMMITTEE	Council
Please Print		E PRINT NAME CLEARLY
Agenda No	Name Address	Fler Hartman 5118 Flamboan Rd Madison
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose	·	
Neither Support Nor Op	pose	
At this meeting are you representing an orga (If you answered "no," STOP; you need not of who you represent and go on to the next q Name, address and telephone number of each	t complete the rest uestion.)	of this form. If you answered "yes," provide the name
Are you being paid for your representation?		Yes No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)		on or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Com- Information Hearing. Other Items	3	minutes

### **REGISTRATION STATEMENT - PAGE 2**

Are you an elected official or employee who is appearing solely on behalf of your office or for your rouncipality of the governmental body?					
f you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign is form. If you answered "no" to the question, go on to the next question.)					
you are being paid for your representation, or if your appearance is part of other paid duties, please be advised at:					
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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?					
Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at froom 103 of the City-County Building, Madison, for more information.)					
ate 9/20/1 Signature Will Harthe					
Print Name Plant					