Date:	5-	16-0	6	

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print O	3495	PRINT NAME CLEARLY
Agenda No.		Name Helen Dietzler Address U10 Western Ave.
		Madism, WI 53711
Please check the appr	opriate boxes:	
	peak ish to speak to answer questions	☐ Oppose ☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
		tion or a person other than yourself: Yes No nplete the rest of this form. If you answered "yes," go on to the next
Name, address and te	lephone number of each per	son or organization you are representing:
Are you being paid fo	r your representation?	☐ Yes ☐ No
		es for this person or organization?
Speaking Limits:	Public Hearing Information Hearing	5 minutes 5 minutes

Date: 5-16-06

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print O	3495	PRINT NAME CLEARLY
Agenda No. 5		Name Maribeth Witzel-Beh Address 5200 Esker Drive Madison
Please check the appr	opriate boxes:	
At this meeting are yo (If you answered "no question)	ish to speak to answer questions ou representing an organiz ," STOP; you need not co	Oppose ☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions ation or a person other than yourself: ☐ Yes ☒ No mplete the rest of this form. If you answered "yes," go on to the next erson or organization you are representing:
Are you being paid fo	r your representation?	☐ Yes ☐ No
		ties for this person or organization? Yes No mplete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing	5 minutes 5 minutes

Date:	5-16-01	0	
and the second		·	

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print 034	95	PF	RINT NAME	CLEA	ARLY
Agenda No. 54	N	ame Del ddress Z690 Fitch	pre Sch Research	amid Bok 5271	t Dr.#216
Please check the appropriate					
Support Wish to speak Do not wish to seak Available to anse At this meeting are you represent (If you answered "no," STO question.) Name, address and telephone	wer questions esenting an organization of P; you need not complete	a person other that the rest of this form	n. If you answered	er question] Yes	🔀 No
Are you being paid for your	representation?] Yes	□ No
Are you appearing as part of (If you answered "no," STO question)				→	No o on to the next
	c Hearing mation Hearing				