Date: | (8) | 3



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registration Statement -		Common Council COMMITTEE			
		PLEASE	PRINT CLEARLY		
		Name	SusanM H	iendrix	
Agenda No.		Address		_	deus Ln
			Madison, W	15370	, 나
Please check o	ne:	AND	Please che	ck:	
Support			Availa	ble to ans	wer
Oppose			questi	ons	
	Support Nor Op	nose			
(If you answered "no of who you represent	ou representing an organ organ, "STOP; you need not and go on to the next quelephone number of eac	t complete the rest uestion.)	of this form. If you ans		☑No provide the name
Are you being paid for your representation?				Yes	☐ No
	s part of your other paid o, " STOP; you need no			☐ Yes swered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items		3 minutes		

REGISTRATION STATEMENT - PAGE 2

Are you an eleother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?		
(If you answer this form. If yo	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question.)		
If you are being that:	ng 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.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.		
(Please go to Room 103 of t	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		