

Registration Statement -	Common C	Council
	COMMITTEE	
Please Print	DIFACE	POINT NAME OF EADLY
	PLEASE	PRINT NAME CLEARLY
$\mathcal{L}$	Name	(arole Ochaetta
Agenda No.	Address	282 Olpine Meadow Cir
1sta City		Oregon WI 63575
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Opp	noso	
retiner support nor Op	pose	•
Name, address and telephone number of each	complete the rest uestion.)	of this form. If you answered "yes," provide the name
Are you being paid for your representation?		∑¥es □ No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)		·— ·—
Speaking Limits: Public Hearing (Comr Information Hearing		

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?			
(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)			
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:			
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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)			
Date $\frac{2-5\cdot 13}{}$ Signature			
Print Name Carols chaefer			



Date: 3/5/13

# **WISH TO SPEAK FORM**

Registration Statement -	Common Co	ouncil	****	
Please Print  Agenda No.	PLEASE Name Address	PRINT NAME CL	EARLY UOHS CONSILO	A10
Please check one:	AND	Please ch	eck:	
Support		Wis	h to Speak	
<b>Oppose</b>				
Neither Support Nor Op	pose			
At this meeting are you representing an organized (If you answered "no," STOP; you need not of who you represent and go on to the next of Name, address and telephone number of each	ot complete the rest o question.)	f this form. If you an	nswered "yes," provid	No le the name
	***************************************			
Are you being paid for your representation?			☐ Yes ☐ N	lo
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)			Yes N nswered "yes," go on t	
Speaking Limits: Public Hearing (Com Information Hearing Other Items	3 r			

	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No	
	ered "yes" to the question, <b>STOP.</b> 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.)	
If you are be 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.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.	
	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	





Registration Statement -	Common (	Council		
Please Print	PLEAS	E PRINT NA	ME CLEARLY	
Agenda No.	Name Address	2714 5	V TISH AFOLLETTE AVE SON	•
Please check one:	AND	Plea	ise check:	
Support		A	Wish to Speak	
<b>Oppose</b>				
■ Neither Support Nor Op	pose			
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of Name, address and telephone number of each MADISON TRUST FOR I	t complete the rest question.)  h person or organi	t of this form. I	If you answered "yes," pro	No vide 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 no question.)	duties for this per t complete the rest	son or organiz of this form.	tation? Yes [] If you answered "yes," go	No on to the next
Speaking Limits: Public Hearing (Com Information Hearing Other Items		3 minutes		

Are you an el other government	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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 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.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.
	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 5 fe	B, 2013 Signature 772
	Print Name \ \Aspa( 1 \ 73SH



Date:	7/	5	113	

Registration Statement -	Common C	<u>ouncil</u>		
_	COMMITTEE			
Please Print	DIFACE	DDINIT NAME	CLEADLY	
7	PLEASE	PRINT NAME		The second of the second
	Name	DAMES	: McPAG	JUTIN/
Agenda No.	Address	16Ax	1 UT DOM	SI
Please check one:	AND	Please	check:	
Support		□ W	Vish to Speak	•
<b>Oppose</b>				
Neither Support Nor Op	nose			
retiner support ivor op	pose			
At this meeting are you representing an organization or a person other than yourself:  (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.)  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 (If you answered "no," <b>STOP</b> ; you need not complete the rest of this form. If you answered "yes," go on to the next question.)				
Speaking Limits: Public Hearing (Com- Information Hearing. Other Items	3	minutes		

Are you an el other governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?  Yes No	
	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 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.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.	
	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	



Registration Statement -	Common C	Council	
Please Print		E PRINT NAME CLEARLY	
Agenda No.	Name Address	4984 Borchers Beach Wanner Ree WI	
Please check one:	AND	Please check:	
Support		Wish to Speak	
Oppose			
Neither Support Nor Opp	pose		
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.)  Name, address and telephone number of each person or organization you are representing:			
		·	
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 (Communication Hearing Other Items	3	minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
(If you answ this form. If	ered "yes" to the question, <b>STOP.</b> 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.)
If you are be that:	eing 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 Room 103 oj	to 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  Print Name



Date:  $\frac{2}{5}$ 

# **WISH TO SPEAK FORM**

Registration Statement	Common Co	ouncil
Please Print		
	PLEASE	PRINT NAME CLEARLY
Agenda No.	Name Address	Stephenie Stender GOI N. HENRY MADISONI
Please check one:	AND	Please check:
☐ Support		Wish to Speak
<b>Oppose</b>		
Neither Support Nor Opp	ose	
At this meeting are you representing an organ (If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next que.  Name, address and telephone number of each	complete the rest of estion.)	this form. If you answered "yes," provide the name
	_	vosa Corpor Atroi
Are you being paid for your representation?		Yes No
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not a question.)	uties for this person complete the rest of	or organization? Yes PNo this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Comm Information Hearing Other Items	3 n	inutes

	·			
Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality of their governmental body?				
	ed "yes" to the question, <b>STOP.</b> 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.)			
If you are bein 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 th	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 2/	Signature Signature			
	Print Name STEPHANIE STENDER			



Date:	2/5	/13	
		,	

Registration Statement -	Common C	Council		·
Please Print				
	PLEASE	E PRINT NAMI	E CLEARLY	
7	Name	Colin B	?owden	A
Agenda No.	Address	625 N.	Frances Sti	ret
		Madison	53705	
Please check one:	AND	Please	e check:	
Support			Wish to Speal	k
<b>Oppose</b>				
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 yo	ou answered "yes,"	☐ No " provide the name
		25344004		And the first ship of the firs
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.)				No on to the next
Speaking Limits: Public Hearing (Com- Information Hearing. Other Items	3	minutes		

		ected official or employee vental body?	who is appeari	ng solely on behalf of your	office or for you Yes	ur municipality or  No
(If you this for	answere m. If yo	ed "yes" to the question, <b>S</b> u answered "no" to the qu	STOP. You nee uestion, go on t	d not complete the rest of the other of the next question.)	nis form, except t	hat you must sign
If you that:	are beir	ng paid for your represent	ation, or if yo	ur appearance is part of oth	ner paid duties, j	please be advised
	1.	Before you engage in lob with the City Clerk.	bying as a lob	byist, you or your principal	must file an autl	horization
	2.	Your principal is not perricity Clerk.	mitted to auth	orize you to lobby unless y	ou are registered	d with the
	3.	Your principal must file calendar year regardless of		ments with the City Clerk pent on lobbying.	for the remaind	der of the
		the City Clerk's website ne City-County Building, M		adison.com/clerk/index.html ore information.)	or go to the	Clerk's Office at
Date _	2/5		Signature Print Name	College A Rome	<u> </u>	
		j	Fillit Ivaille	CO(IN /1- 02000		



Date:	2.5.13	

Registration Statement -		Council		
	COMMITTEE			
Please Print	DIFASE	PRINT NA	AME CLEARLY	
	_	,		
		BRIAN 1		
Agenda No	Address	120 EAS	IT LAKESIDE	
		MADISON	1	
Please check one:	AND	Plea	ase check:	
<b>Support</b>		V	Wish to Speak	
Oppose			•	
Neither Support Nor Opp	nose			
Retther Support Nor Op	ροσο			
At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next que.  Name, address and telephone number of each	complete the rest uestion.)	of this form. I	If you answered "yes," provide the na	те
PALISADES APARTMENTS				
6417 NORMANDY WAY				
MARISON, WIT	271-8864			
Are you being paid for your representation?	V		Yes No	_
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need not question.)				ext
Speaking Limits: Public Hearing (Communication Hearing Other Items	3	3 minutes		

Are you an electother government	ted official or employee who is appearing solely on behalf of your office or for your municipality or ntal body?
	d "yes" to the question, <b>STOP.</b> 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:	g paid for your representation, or if your appearance is part of other paid duties, please be advised
	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
	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 to Room 103 of the	he City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at City-County Building, Madison, for more information.
Date <u>Z.5.13</u>	Signature Print Name RAN MUNSS N



	2/	5/	1	3	
Date:	/	/			

Registration Statement -	Common C	council
_	COMMITTEE	
Please Print	PLEASE	PRINT NAME CLEARLY
Agenda No.	Name _	15a Koob
Agenda 110.	Address _	Madison WI 53703
Please check one:	AND	Please check:
<b>Support</b>		Wish to Speak
Oppose		
Neither Support Nor Op	nnose	
At this meeting are you representing an org (If you answered "no," STOP; you need no of who you represent and go on to the next Name, address and telephone number of each	ot complete the rest of question.)	of this form. If you answered "yes," provide the name
• ,		
Are you being paid for your representation?	ı	Yes No
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)		on or organization?
Information Hearing	mmon Council)5 33	minutes

Are you an el other governm	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 beithat:	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.
	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



_	7/5/13
Date:	

Registration Statement -		uncil
Discour Daine	COMMITTEE	
Please Print	PLEASE F	PRINT NAME CLEARLY
Anomala Na	Name	Jason Batton
Agenda No.	Address	Z106 Sheriden VI Madison = 3704
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 no of who you represent and go on to the next of Name, address and telephone number of each state.	ot complete the rest of question.)	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," <b>STOP</b> ; you need no question.)		or organization? Yes No No this form. If you answered "yes," go on to the next
Information Hearing	nmon Council)5 m 3 m 3 m	inutes

Are you an elother governr	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No			
	ered "yes" to the question, <b>STOP.</b> 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.)			
If you are be 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.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.			
	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 7/	Signature Print Name			



Date:		

Registration Statemen	nt - Common C	Council	
Please Print	PLEASE	E PRINT NAME CLEAR	
Agenda No.	Name Address	Adam o 1	Hermanns CT Madazon d S 3203
Please check one:	AND	Please check:	:
Support		Wish to	Speak
<b>Oppose</b>			
Neither Support Nor	Oppose		
At this meeting are you representing an (If you answered "no," <b>STOP</b> ; you need of who you represent and go on to the n	d not complete the rest		
Name, address and telephone number of	feach person or organize IOTA CF	Madis on S	: 3703
608-295-1613			
Are you being paid for your representati	on?		☐ Yes   No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	• •		Yes No ed "yes," go on to the next
Information Hear	Common Council)5 ring3	minutes	

Are you an el other government	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?  Yes No
	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 beithat:	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



### **CITY OF MADISON**

Registration Statement -	Common C	ouncil
•	COMMITTEE	
Please Print	PLEASE	PRINT NAME CLEARLY
	Name	LAMA XAMMETA
Agenda No.	Address	DID MINESTER
	Address	XII / WWWVY
	-	
Please check one:	AND	Please check:
☐ Support		Wish to Speak
Oppose	/	
Neither Support Nor Op	mose	
Mentiner Support Mor Op	pose	
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of Name, address and telephone number of each of the state	t complete the rest question.)	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," <b>STOP</b> ; you need no question.)	duties for this pers t complete the rest	on or organization? Yes No No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Com Information Hearing Other Items	3	minutes

(SEE BACK)

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?
(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:
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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)
Date 2-13 Signature Man Man
Print Name



Date:	2-	5	-2013

Registration Statement -	Common C	ouncil
Please Print	COMMITTEE  PI FASE	PRINT NAME CLEARLY
Agenda No. # Z	Name Address	Franny Ingebritson 516 Wisconsin Ave #1
Please check one:	AND	Please check:
Support		Wish to Speak
<b>Oppose</b>		
Neither Support Nor Op	pose	
At this meeting are you representing an orga (If you answered "no," <b>STOP</b> ; you need no of who you represent and go on to the next quality 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

Are you an el other government	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 beithat:	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



Date:	1-5-	/	

Registration Statement	Common Co	uncil		
Please Print  Agenda No.	PLEASE P  Name  Address	RINT NAME	CLEARLY  KAROFSKY	
Please check one:	AND	Please o	check:	
Support		$\bigvee_{i}$ <b>W</b>	ish to Speak	
Oppose				
Neither Support Nor Opp	ose			
At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next que Name, address and telephone number of each	complete the rest of uestion.)	this form. If you	answered "yes," provide the nam	ie —
Are you being paid for your representation?			☐ Yes ☐ No	_
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not question.)				ît.
Speaking Limits: Public Hearing (Comm Information Hearing Other Items	3 m	inutes		

	RE	GISTRATION STATEME	INT - PAGE 2	
Are you an eleother governm		who is appearing solely	on behalf of your office	ce or for your municipality or Yes No
(If you answer this form. If yo	red "yes" to the question, <b>S</b> oou answered "no" to the qu	TOP. You need not comestion, go on to the next	plete the rest of this fo question.)	orm, except that you must sign
If you are bei that:	ing paid for your representa	ation, or if your appears	nce is part of other p	paid duties, please be advised
1.	Before you engage in lobb with the City Clerk.	bying as a lobbyist, you	or your principal mus	t file an authorization
2.	Your principal is not pern City Clerk.	nitted to authorize you	to lobby unless you a	re registered with the
3.	Your principal must file calendar year regardless or			the remainder of the
(Please go to Room 103 of t	the City Clerk's website he City-County Building, M	<u>www.cityofmadison.com</u> adison, for more inform	<u>n/clerk/index.html</u> or ation.)	go to the Clerk's Office at
Date (	-5-13	Signature	2	
		Print Name	TODY KA	ROFSKY
		•		
			•	



Date:	2	15	1	7)	J
		-			

Registration Statement -	Common (	Council	
Please Print	COMMITTEE		
	PLEAS	E PRINT NA	ME CLEARLY
Agenda No.	Name	Abn	am Bussiere
	Address	Ma	DKNJ DD WI
Please check one:	AND	Plea	ise check:
<b>Support</b>			Wish to Speak
<b>Oppose</b>			
Neither Support Nor Op	nose		
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next quality Name, address and telephone number of each	t complete the rest question.)	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," <b>STOP</b> ; you need not question.)			
Speaking Limits: Public Hearing (Com Information Hearing. Other Items		3 minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	ered "yes" to the question, <b>STOP.</b> 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.)
If you are be that:	eing 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.
	to 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: 2/5/13

# **WISH TO SPEAK FORM**

Registration Statement -	Common C	Council
Please Print	DI EASE	E PRINT NAME CLEARLY
Agenda No	Name _ Address _	John Magnilo 423 N Carrell St
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Opp	pose	
At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next quality Name, address and telephone number of each	complete the rest of 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.)		son or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Communication Hearing Other Items	3	3 minutes

Are you an el other government	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, <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 be 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.	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.		
	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		



	7 _	=	17
Date:	$\alpha$	) <u> </u>	15

Registration Statement -	Common C	Council
	COMMITTEE	
Please Print		
	PLEASE	PRINT NAME CLEARLY
-	Name	YETER USTLIND
Agenda No.	Address	533 W. Main St
Ida Ct.		MAD 151 N
	-	WIR X V.
Please check one:	AND	Please check:
Support		Wish to Speak
<b>Oppose</b>		
	nogo	
<b>☐</b> Neither Support Nor Op	phose	
At this meeting are you representing an orgalized (If you answered "no," STOP; you need not of who you represent and go on to the next of Name, address and telephone number of each	ot complete the rest question.)	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 no question.)		on or organization?
Speaking Limits: Public Hearing (Con Information Hearing Other Items		minutes

Are you an eleother government	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 beithat:	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.	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.		
	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		



		Section .	4		
	4"	1		1	,,,,,,,
Date:		TP	0	1811	<
Date.		<u> </u>	4.	01	

Registration Statement -	Common Co	ouncil	
Please Print	PLEASE	PRINT NAME CLEARLY	
Agenda No. WATERFRUNT	Name _ Address	BOB BUCKLEY	
	Address _	M/N/) LE TUN, WI	
Please check one:	AND	Please check:	
Support		Wish to Speak	
Oppose Oppose			
Neither Support Nor Opp	pose		
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.)  Name, address and telephone number of each person or organization you are representing:			
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 (Communication Hearing Other Items	3	minutes	

	elected official or employ nmental body?	ee who is appe	aring solely on beh	alf of your office o	r for you ] Yes	r municipality or	
	vered "yes" to the question you answered "no" to the				except th	nat you must sign	
If you are b that:	eing paid for your repres	entation, or if	your appearance is	part of other paid	duties, p	lease 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 City Clerk.	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.						
	to the City Clerk's web. f the City-County Building			<u>/index.html</u> or go	to the C	lerk's Office at	
Date <u>2</u> /	5/13	Signature	Labort		set	Deg	
	,	Print Name	ROBER	Thil	DUCK	lley	



Date:	2/	5/	13_	
	7			

## **WISH TO SPEAK FORM**

Registration Statement -	Common (	Council		
Please Print		•	ME CLEARLY	
Agenda No	Name Address	Esthes 146	Prochaska Lungdon St	×.
Please check one:	AND	Plea	ase check:	
			Wish to Spe	ak
<b>Oppose</b>				
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 quality Name, address and telephone number of each	t complete the rest ruestion.)	t of this form.	If you answered "ye.	/
Traine, address and telephone number of each	n person or organi	zacion you are	, representation	
Are you being paid for your representation?			☐ Ye	s 🗖No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)	duties for this per t complete the rest	rson or organiz t of this form.	zation? Ye.  If you answered "ye	,
Speaking Limits: Public Hearing (Com Information Hearing Other Items		3 minutes		

Are you an e other governi	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	ered "yes" to the question, <b>STOP.</b> 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.)
If you are be 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.	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	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: 2/5/13

# **WISH TO SPEAK FORM**

Registration Statement -	Common Co	uncil
Please Print		
	PLEASE F	PRINT NAME CLEARLY
9	Name	CHRIS HOUDEN,
Agenda No.	Address	1115 Miller LN
		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," <b>STOP</b> ; 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 of ruestion.)	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," <b>STOP</b> ; you need not question.)		n or organization?
Speaking Limits: Public Hearing (Com Information Hearing. Other Items	3 n	ninutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?		
	ed "yes" to the question, <b>STOP.</b> 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.)	
If you are beinthat:	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 th	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	Signature	
	Print Name	



Date: 2/5/14

## **WISH TO SPEAK FORM**

Registration Statement -	Common (	Council	_
Please Print	PLEASI	SE PRINT NAME CLEARLY	
Agenda No.	Name Address	EMILY EVICKSON 152 Langdon St. Madison, WI 5370?	<del>D</del>
Please check one:	AND	Please check:	
Support		Wish to Speak	
<b>Oppose</b>			
Neither Support Nor Op	pose		
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of	t complete the rest	son other than yourself: Yes No st of this form. If you answered "yes," provide	
Name, address and telephone number of each	h person or organi	nization you are representing:	
Alpha Chi Omega			
152 Langdon St.			
310-720-6158			***************************************
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 no question.)		erson or organization? Yes No st of this form. If you answered "yes," go on to	
Speaking Limits: Public Hearing (Com- Information Hearing Other Items		3 minutes	

	ALGIGITATION OTHER LINEAR THE LANGE OF THE L		
Are you an el other government	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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 be 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.	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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)			
Date 2/0	Signature EMIL EVICKSON  Print Name EMILL EVICKSON		
	·		



Date:	
-------	--

# WISH TO SPEAK FORM

Registration Statement -	Common Co	uncil
Please Print	PLEASE P	PRINT NAME CLEARLY  Cha Bealh
Agenda No.	Address	3041 WebbAre Madisn
Please check one:	AND	Please check:
<b>Support</b>		Wish to Speak
Oppose		
Neither Support Nor Op	pose	
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of Name, address and telephone number of each	t complete the rest of question.)	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 no question.)	I duties for this person to complete the rest of	n or organization?
Information Hearing	nmon Council)5 n 3 n 3 n	ninutes

-	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?  Yes No	
	vered "yes" to the question, <b>STOP.</b> 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.)	
If you are be that:	being 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.	
, –	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	



Date: 100 Feb \$, 2013

# **WISH TO SPEAK FORM**

Registration Statement -	Common Co	uncil
-	COMMITTEE	
Please Print		
	PLEASE P	RINT NAME CLEARLY
	Name	Tin Mora
Agenda No.	Address	146 Landon Sy
		116 Cangara
Please check one:	AND	Please check:
Support		Wish to Speak
		Wish to Speak
Oppose		
Neither Support Nor Op	pose	
	F	
At this meeting are you representing an org.	anization or a person o	other than yourself: Yes No
		this form. If you answered "yes," provide the name
of who you represent and go on to the next	question.)	
Name, address and telephone number of each	ch person or organizati	on you are representing:
· ·		
Are you being paid for your representation?	1	☐ Yes ☐ No
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)	-	or organization?
Speaking Limits: Public Hearing (Con	nmon Council)5 m	inutes
Information Hearing	;3 m	inutes
Other Items	3 m	inutes

	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?		
	ed "yes" to the question, <b>STOP.</b> 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.)		
If you are beinthat:	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.		
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at a clear county Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Date: 2/5/13

## **WISH TO SPEAK FORM**

Registration Statement -	Common C	<u>ouncil</u>	
Please Print		DDINT NA	ME OLEADIV
	PLEASE	PRINIŅA	ME CLEARLY
	Name	Lauren	Cahillane
Agenda No	Address	622 N	J (teny
	_	Madza	\
Please check one:	AND	Plea	se check:
Support			Wish to Speak
Oppose			
Neither Support Nor Op	nose		
	, p 0 0 0		
At this meeting are you representing an org (If you answered "no," STOP; you need no of who you represent and go on to the next of Name, address and telephone number of each	nt complete the rest ( question.)	of this form. I	f 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 no question.)	d duties for this pers to to the rest	on or organiz of this form. I	ation? Yes No If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Con Information Hearing Other Items	;3	minutes	

Are you an eleother government	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 beinthat:	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.					
	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 US	//3 Signature 32 (Chill)					
	Print Name Lawer Chillage					



Date:	2	5	13	

# **WISH TO SPEAK FORM**

Registration Statement -	Common C	Council		
	COMMITTEE			
Please Print				
	PLEASE	PRINT NA	ME GLEARLY	<i>f</i> .
· .	Name	1411	whi	A-C:
Agenda No.		1839	- 11	C #212
	Address	18 >	S WINNELD	144001 2/2
Ida Ct.				<u> </u>
Please check one:	AND	Plea	se check:	
<b>∑</b> Support			Wish to Spe	eak
Oppose				
<b>☐</b> 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	complete the rest uestion.)	of this form. I	f you answered "y	
· .				
Are you being paid for your representation?				es No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)				<b>— `</b>
Speaking Limits: Public Hearing (Comuniformation Hearing  Other Items	3	minutes		

		eted official or employee ental body?	who is appearing	solely on behalf of	your office	or for you  Yes	r municipality or No
(If you and this form.	swere If yoı	d "yes" to the question, <b>S</b> u answered "no" to the qu	STOP. You need n uestion, go on to th	ot complete the rest ne next question.)	of this form	n, except ti	hat you must sign
If you are that:	bein	g paid for your represent	ation, or if your a	appearance is part o	of other pai	d duties, p	blease be advised
1.		Before you engage in lob with the City Clerk.	bying as a lobbyi	st, you or your princ	cipal must f	file an auth	norization
2.		Your principal is not per City Clerk.	mitted to authoriz	e you to lobby unle	ess you are	registered	with the
3.		Your principal must file calendar year regardless o			Clerk for th	e remaind	er of the
Room 103	o to of the		www.cityofmadi. Madison, for more Signature Print Name	son.com/clerk/index. information.)	html or go	o to the C	Clerk's Office at



Date: 2/5/13

## **WISH TO SPEAK FORM**

Registration Statement -		ouncil	
	COMMITTEE		
Please Print	PLEASE	PRINT NA	ME CLEARLY
2	Name	LAUR	A GOLLER
Agenda No			E LAKELAWN
	_		150N, W1 53703
Please check one:	AND	Plea	se check:
Support		X	Wish to Speak
Oppose			
Neither Support Nor Op	pose		
At this meeting are you representing an orga (If you answered "no," <b>STOP</b> ; you need no of who you represent and go on to the next of	t complete the rest		
Name, address and telephone number of each	ch person or organiz	zation you are	e representing:
Raighne Mitchell Lu	eft a	25 E	Cakelaun P
Raighne Mitchell Lu	210-865	Ò	•
Are you being paid for your representation?			∐ Yes No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need no question.)			
Speaking Limits: Public Hearing (Con Information Hearing Other Items	, • • • • • • • • • • • • • • • • • • •	3 minutes	

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?				
	wered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign fyou answered "no" to the question, go on to the next question.)				
If you are l that:	being 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.				
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)				
Date <u>2</u>	Signature Que QQQ Print Name LAURA GELLEN				

Date: 3/5/13



## **WISH TO SPEAK FORM**

Registration Statement	- Common Committee	ouncil	APPLICATION OF THE PROPERTY OF	
Please Print		PRINT NA	AME CLEARLY	
Agenda No. 2	Name _	Willie	Kunert La Kelawn Pl.	
Please check one:	AND	Plea	ase check:	
Support		V	Wish to Speak	
<b>Oppose</b>				
Neither Support Nor O	ppose			
At this meeting are you representing an or (If you answered "no," <b>STOP</b> ; you need to of who you represent and go on to the next	not complete the rest o			name
Name, address and telephone number of e	ach person or organiza	ation you are	e representing:	
C.E.A. C.E. C.E. C.E. C.E. C.E. C.E. C.E				
· .				
Are you being paid for your representation	1?		☐ Yes ☑ No	
Are you appearing as part of your other pa (If you answered "no," STOP; you need requestion.)				next
Information Hearin	ommon Council)5 ng3	minutes		

'	REGISTRATIO	MOINICIAIL	INT-FAGL 2		
Are you an elected official or employe other governmental body?	e who is appea	aring solely	on behalf of your office	ce or for you	r municipality or No
(If you answered "yes" to the question, this form. If you answered "no" to the				orm, except t	hat you must sign
If you are being paid for your represe that:	entation, or if	your appeara	ance is part of other p	oaid duties, p	please be advised
1. Before you engage in lowith the City Clerk.	obbying as a lo	obbyist, you	or your principal mus	t file an auth	norization
2. Your principal is not portion of City Clerk.	ermitted to au	thorize you	to lobby unless you a	re registered	l with the
3. Your principal must fit calendar year regardless	•		•	the remaind	ler of the
(Please go to the City Clerk's websi Room 103 of the City-County Building,				go to the (	Clerk's Office at
Date 2/5/13	Signature	Willy	Knut		
	Print Name	Willie	Kunert		



Date:  $\frac{1/5//3}{}$ 

# WISH TO SPEAK FORM

Registration Statement -	Common C	ouncil		·
Please Print  Agenda No.	PLEASE Name Address	PRINT NA PANO 1601	MECLEARLY  Y BRUCE  VNIVERSITY AVE	5 
Please check one:	AND	Plea	ase check:	
Support Oppose		X	Wish to Speak	
Neither Support Nor Op	opose			
At this meeting are you representing an org (If you answered "no," <b>STOP</b> ; you need no of who you represent and go on to the next	ot complete the rest	on other than y	yourself: Yes [ If you answered "yes," pro	] No vide the name
Name, address and telephone number of ea	ch person or organi	zation you are	e representing:	
DALISADE	S APART	MENTS	>	
Are you being paid for your representation	?		Yes [	] No
Are you appearing as part of your other pain (If you answered "no," STOP; you need no question.)	d duties for this per ot complete the res	rson or organize tof this form.	zation? Yes [ If you answered "yes," go	] No on to the next
Speaking Limits: Public Hearing (Co Information Hearin Other Items	g	3 minutes		

*	
Are you an el other governn	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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 beithat:	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.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.
	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  Signature  Signature  Signature  Signature  Signature  Signature
	1 Intervalle



Date:	1/	51	90	15	

# WISH TO SPEAK FORM

Registration Statement -	COMMITTEE	Council
Please Print	Name	Bewarh Pierle
Agenda No.	Address	MADIJOAG WI 53703
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Op	opose	
At this meeting are you representing an org (If you answered "no," STOP; you need no of who you represent and go on to the next Name, address and telephone number of ea	ot complete the res question.)	of this form. If you answered yes, provide the hame
Are you being paid for your representation	?	Yes No
Are you appearing as part of your other pair (If you answered "no," STOP; you need n question.)	id duties for this pe ot complete the res	rson or organization? $\square$ Yes $\square$ No to this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Co Information Hearin Other Items	g	.3 minutes

Are you an elother government	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:	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.
	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



Date:	

# DO NOT WISH TO SPEAK FORM

Registrati	on Statement -	Common Cou	uncil	
Agenda No. (4) A Te	or front		PRINT NAME CLEARLY  TODY BUCKLEY  THOUSE FLYWOOD  MIDDLETON U	Ave
Please check or Support Oppose	ie:	AND	Please check:  Do not wish to spea	k
	upport Nor Op	ppose		
(If you answered "no, of who you represent o	" STOP; you need no and go on to the next	question.)	other than yourself: Yes Sthis form. If you answered "yes," provi	No de the name
Are you being paid for	r your representation?	?	☐ Yes	 No
Are you appearing as j (If you answered "no, question.)	part of your other pai "STOP; you need no	d duties for this person ot complete the rest of	n or organization? Yes this form. If you answered "yes," go or	No n to the next
Speaking Limits:	Information Hearing	mmon Council)5 m g3 m 3 m	ninutes	

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality of other governmental body?  (If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)  If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:  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 the City Clerk's website <a href="https://www.cityofinadison.com/clerk/index.html">www.cityofinadison.com/clerk/index.html</a> or go to the Clerk's Office a Room 103 of the City-County Building, Madison, for more information.)		
<ol> <li>this form. If you answered "no" to the question, go on to the next question.)</li> <li>If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:         <ol> <li>Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.</li> <li>Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.</li> <li>Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.</li> </ol> </li> <li>(Please go to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office a Room 103 of the City-County Building, Madison, for more information.)</li> </ol>		
<ol> <li>Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.</li> <li>Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.</li> <li>Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.</li> </ol> (Please go to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office a Room 103 of the City-County Building, Madison, for more information.)		
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 the City Clerk's website <a href="www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office a Room 103 of the City-County Building, Madison, for more information.)	-	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
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 the City Clerk's website <a href="www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office a Room 103 of the City-County Building, Madison, for more information.)	1.	
calendar year regardless of the amount spent on lobbying.  (Please go to the City Clerk's website <a href="www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office a Room 103 of the City-County Building, Madison, for more information.)	2.	
Room 103 of the City-County Building, Madison, for more information.)	3.	
oth as I want to ul		
Date 5 tebruary 2013 Signature Jeden Lon tockly  Print Name July 1741 M. Buckles	Date 5F	



Date:	5-	2-	(3	
-------	----	----	----	--

# DO NOT WISH TO SPEAK FORM

Registration Statement	Common C	ouncil	
Please Print	PLEASE	E PRINT NAME CLEARLY	
Agenda No. #1	Name _ Address _	Kathleen Buckley 777 University Ave. Ag Madison, WI 53715	
Please check one:	AND	Please check:	
Support		Do not wish to speak	
Oppose			
Neither Support Nor Opp	ose		
At this meeting are you representing an organical (If you answered "no," STOP; you need not of who you represent and go on to the next quality Name, address and telephone number of each	complete the rest c estion.)	of this form. If you answered "yes," provide the name	e
Are you being paid for your representation?		☐ Yes 🔯 No	
Are you appearing as part of your other paid d (If you answered "no," STOP; you need not a question.)	-	on or organization?  Yes No No of this form. If you answered "yes," go on to the nex	t
Speaking Limits: Public Hearing (Comm Information Hearing Other Items	3	minutes	

Are you an eleother government	ected official or employee ental body?	who is appea	ring solely on behalf of y	our office or for Yes	
	red "yes" to the question, Son answered "no" to the qu			of this form, excep	ot that you must sign
If you are being that:	ng paid for your represent	tation, or if y	our appearance is part of	other paid dutie	s, please be advised
1.	Before you engage in lob with the City Clerk.	bying as a lo	bbyist, you or your princi	pal must file an a	uthorization
2.	Your principal is not per City Clerk.	mitted to aut	horize you to lobby unles	ss you are registe	red with the
3.	Your principal must file calendar year regardless of			erk for the rema	inder of the
	the City Clerk's website he City-County Building, M			<u>html</u> or go to th	e Clerk's Office at
Date 2	5/13	Signature	Hophleen	a Berl	le ( )
		Print Name	Mathleen	Budden	<i>X</i> /
				(	



Date: 2/5/20/2

# DO NOT WISH TO SPEAK FORM

### CITY OF MADISON

Registrati	ion Statement	Common Coul	ncil		
Please Print	(2)	PLEASE PR	INT NAME CLEA	ARLY	
Agenda No. <u>2</u> S	4/4	Name Address	avid Ba 1706 Sc. gdison, i	ranson hroeder WI 537/1	# >
Please check or	ne:	AND	Please chec	k:	
Support			No not	wish to speak	
Oppose O					
Neither S	upport Nor Opp	ose			
(If you answered "no, of who you represent a	ou representing an organ "STOP; you need not a and go on to the next que ephone number of each	complete the rest of th estion.)	is form. If you answ		e name
Are you being paid for	r your representation?			☐ Yes ÛNo	
Are you appearing as partial (If you answered "no, question.)	part of your other paid d " STOP; you need not o	luties for this person o complete the rest of th	r organization? is form. If you answ	Yes No vered "yes," go on to to	he next
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3 min	nutes		

(SEE BACK)

al or employee who is appearing?	g solely on behalf of your offic	e or for your municipality or Yes No
o the question, <b>STOP.</b> You need d "no" to the question, go on to	not complete the rest of this fo the next question.)	rm, except that you must sign
your representation, or if you	r appearance is part of other p	aid duties, please be advised
	yist, you or your principal mus	t file an authorization
	rize you to lobby unless you ar	re registered with the
alf year), the principal must f	e than \$1,000 for lobbying servile expense statements with th	vices in any reporting e City Clerk for the
Clerk's website <u>www.citvofma</u> unty Building, Madison, for moi	dison.com/clerk/index.html or re information.)	go to the Clerk's Office at
Signature _		
Print Name		
	o the question, STOP. You need d "no" to the question, go on to representation, or if you ou engage in lobbying as a lobby City Clerk.  Incipal is not permitted to authority.  Incipal spends or will owe moralf year), the principal must for of the calendar year?  Clerk's website www.cityofma.  Clerk's website www.cityofma.  Unity Building, Madison, for morals.	o the question, STOP. You need not complete the rest of this for d "no" to the question, go on to the next question.)  It your representation, or if your appearance is part of other property of the property of the property of the property of the principal as a lobbyist, you or your principal must city Clerk.  Incipal is not permitted to authorize you to lobby unless you as k.  Incipal spends or will owe more than \$1,000 for lobbying serve alf year), the principal must file expense statements with the rof the calendar year?  Clerk's website www.cityofmadison.com/clerk/index.html or unity Building, Madison, for more information.)  Signature



Date:  $\frac{\sqrt{5}/\sqrt{3}}{\sqrt{3}}$ 

# DO NOT WISH TO SPEAK FORM

Registration Statement	- Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. #2 /28414	Name Nicholas Henkle  Address Her Kendra Dt 1438 N. Stor
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor C	Oppose
(If you answered "no," STOP; you need of who you represent and go on to the next	rganization or a person other than yourself:  No not complete the rest of this form. If you answered "yes," provide the name at question.) each person or organization you are representing:
Are you being paid for your representation	n? Yes No
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)	aid duties for this person or organization?   Yes No not complete the rest of this form. If you answered "yes," go on to the next
Information Heari	ommon Council)5 minutes ng3 minutes3 minutes

	REGISTRATION STATEMENT - LAGE 2
Are you an elect	ted official or employee who is appearing solely on behalf of your office or for your municipality or trial body?
(If you answered this form. If you	d "yes" to the question, <b>STOP.</b> 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:	g paid for your representation, or if your appearance is part of other paid duties, please be advised
	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
p	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 Room 103 of the	he City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at City-County Building, Madison, for more information.)
Date 25	Signature Signature
	Print Name

Date: FEB. 5, 2013



# DO NOT WISH TO SPEAK FORM

Registration Stater	ment - Common Council		
Please Print	PLEASE PRINT NAME O	CLEARLY	
Agenda No. <u>#2</u>	Name GENE Rus; Address 1602 S. 1.  MANISON;	ARK ST.	
Please check one:	AND Please c	heck:	
<b>Support</b>	× Do	not wish to speak	
Oppose			
Neither Support Nor Oppose			
(If you answered "no," STOP; you of who you represent and go on to t	g an organization or a person other than yourseld need not complete the rest of this form. If you at the next question.)  where of each person or organization you are represented the second of the person or organization.	answered "yes," provide the name	
Are you being paid for your represe	entation?	Yes No	
Are you appearing as part of your of (If you answered "no," STOP; you question.)	ther paid duties for this person or organization? need not complete the rest of this form. If you	Yes No answered "yes," go on to the next	
Information	ing (Common Council) 5 minutes Hearing		

Are you an el- other governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
(If you answer	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 are beithat:	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?		
(Please go to Room 103 of t	o the City Clerk's website <u>www.citvofmadison.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		

Madison

				Date:	_
DO	NOT	WISH	TO	SPEAK FORM	

Registration	on Statement - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. 28 9	Name Rod Meyer  Address 1438 N Stoughton Rd.  Madwag WI
Please check or	ne: AND Please check:
Support	Do not wish to speak
Oppose	
Neither S	upport Nor Oppose
(If you answered "no, of who you represent of	u representing an organization or a person other than yourself: Yes No "STOP; you need not complete the rest of this form. If you answered "yes," provide the name and go on to the next question.)  ephone number of each person or organization you are representing:
Are you being paid for	
Are you appearing as J (If you answered "no, question.)	part of your other paid duties for this person or organization? Yes No "STOP; you need not complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing (Common Council) 5 minutes Information Hearing

Are you an ele	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	ed "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 beinthat:	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.	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 Room 103 of th	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: 4/05/13

# DO NOT WISH TO SPEAK FORM

Registrati	on Statement	COMMITTEE	Council	
Please Print			E PRINT NAME CLE	ARLY
	sittiisising	Name	NEERT	LUX
Agenda No	January	Address	521 EUGE	NIA ANE
,			MADISOI	LOX ENIA AUE J 53705
Please check or	ne:	AND	Please che	ck:
<b>Support</b>			Do no	t wish to speak
<b>Oppose</b>				
Neither S	upport Nor Opp	pose		
(If you answered "no, of who you représent	and go on to the next qu	complete the rest uestion.)	on other than yourself:  t of this form. If you ans  zation you are represent	Yes No wered "yes," provide the name ting:
Are you being paid fo Are you appearing as (If you answered "no, question.)	nart of your other paid	duties for this per	rson or organization? t of this form. If you ans	Yes No  Yes No wered "yes," go on to the next
Speaking Limits:	Public Hearing (Communication Hearing). Other Items	• • • • • • • • • • • • • • • • • • • •	3 minutes	

Are you an elother government	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:	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.		
	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		



Date:	_
-------	---

Registration Statement -	Common C	ouncil			
Please Print		PRINT NAME CLEARLY Veva Rilag 8260 Stagecouch Rd Gross Plains, W1 53520			
Agenda No.	Address _	Gross Plains, WI 53520			
Please check one:	AND	Please check:			
☐ Support		Do not wish to speak			
Oppose  Neither Support Nor Oppose					
At this meeting are you representing an orga (If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next q	t complete the rest c	of this form. If you answered "yes," provide the name			
Name, address and telephone number of each		ation you are representing:			
152 Lang	600 St W1 5370 3				
Are you being paid for your representation?	01 3370	☐ 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			

		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?		
		ed "yes" to the question, <b>STOP.</b> 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.)		
If you ar that:	re bein	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.		
		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	1-	Signature Were Riley  Print Name Were Riley		





Registration Statemen	t - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. 2	Name Eyse Bergeron  Address 152 Langdon Street  Madison, WI 53703
Please check one:	AND Please check:
Support	Do not wish to speak
<b>Oppose</b>	
Neither Support Nor	Oppose
(If you answered "no," STOP; you need of who you represent and go on to the ne	organization or a person other than yourself: Yes No do not complete the rest of this form. If you answered "yes," provide the name ext question.)  Yes No No do not complete the rest of this form. If you answered "yes," provide the name ext question.)
·	
Are you being paid for your representati	on? Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this person or organization?  Yes No not complete the rest of this form. If you answered "yes," go on to the next
Information Hea	Common Council)5 minutes ring

-	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?		
	vered "yes" to the question, <b>STOP.</b> 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.)		
If you are b that:	being 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.		
	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		



Date:	
-------	--

Registratio	n Statement	Common Cour	ncil	·
Please Print  Agenda No.	2	PLEASE PR Name Address	INT NAME CLEAF  becar floo  21.5 flows  Madison	erson was f
Please check one Support		AND	Please check	: vish to speak
Oppose			Do not v	visit to speak
	pport Nor Opp	ose		
At this meeting are you (If you answered "no," of who you represent an Name, address and telep	STOP; you need not d go on to the next qu	complete the rest of th uestion.)	is form. If you answer	☐ Yes ☐ No red "yes," provide the name g:
, -				
Are you being paid for y	our representation?		•	Yes No
Are you appearing as pa (If you answered "no," question.)	rt of your other paid of STOP; you need not	duties for this person o complete the rest of th	r organization? is form. If you answe	Yes No No red "yes," go on to the next
I	nformation Hearing	mon Council)5 mir 3 mir 3 mir	nutes	

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 beithat:	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.		
_	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		



Date: 45/13

## DO NOT WISH TO SPEAK FORM

Registrati	on Statement	COMMITTEE	ouncil	
Please Print		PLEASE	PRINT NAME CLEARLY	
Agenda No^	2	Name Address	Jammy Lange 835 S. Cont. Jay Au Woundles Wi	Ž.
Please check or	ie:	AND	Please check:	
<b>Support</b>	•		Do not wish to speak	
Oppose				
Neither S	upport Nor Op	pose		
(If you answered "no, of who you represent of	and go on to the next q	complete the rest of uestion.)	other than yourself: Yes No No f this form. If you answered "yes," provide the name that the provide the name that you are representing:	me 
Are you being paid for	your representation?		☐ Yes No	
Are you appearing as J (If you answered "no, question.)	part of your other paid "STOP; you need not	duties for this perso complete the rest of	on or organization? Yes No No f this form. If you answered "yes," go on to the ne	ext
Speaking Limits:	Public Hearing (Com- Information Hearing. Other Items	3 1	minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality mental body?	y or		
	ered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must s you answered "no" to the question, go on to the next question.)	ign		
If you are be that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advi	sed		
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.			
, _	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office the City-County Building, Madison, for more information.)	at		
Date 2/	Signature Signature			
	Print Name To my Longs			
	the state of the s			



Date:	1-1	5	112	5

Registration Stateme	ent - Common Cou	uncil
Please Print		
		RINT NAME CLEARLY
Agenda No.	Name <u>10</u>	rdar) Houden
Agenda No	Address $\bigcirc$	35 W Johnson St
	<u>M</u>	30115011, W1, 93, 10, 2
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose		
Neither Support Nor	r Oppose	
At this meeting are you representing a (If you answered "no," STOP; you not of who you represent and go on to the Name, address and telephone number	red not complete the rest of the next question.)	his form. If you answered "yes," provide the name
Are you being paid for your representa	ation?	☐ Yes No
Are you appearing as part of your other	er paid duties for this person of	
Information He	(Common Council)5 mi earing3 mi	nutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental 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:	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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)				
Date <u>2</u> 6	Signature Print Name  Ordan taden			



Date: 2/5/3

# DO NOT WISH TO SPEAK FORM

Registration State	common Co	uncii
Please Print		PRINT NAME CLEARLY
Agenda No.	Name Address 5	Brooke Winter 35 W. Johnson St. Madison, WI 53703
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose		
Neither Support N	Nor Oppose	
At this meeting are you representing (If you answered "no," STOP; you of who you represent and go on to Name, address and telephone numbers.	u need not complete the rest of the next question.)	this form. If you answered "yes," provide the name
Are you being paid for your represe	entation?	☐ Yes ☐ No
Are you appearing as part of your of (If you answered "no," STOP; you question.)	other paid duties for this person a need not complete the rest of t	or organization? Yes No No this form. If you answered "yes," go on to the next
Information	ing (Common Council)5 m Hearing	inutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?  (If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)  If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:  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 the City Clerk's website <a href="https://www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)  Signature  Print Name  By Odd.  Signature  Print Name						
this form. If you answered "no" to the question, go on to the next question.)  If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:  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 the City Clerk's website <a href="https://www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)  Date  Date  Signature  Signature						
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 the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)  Date 2/5/13 Signature						
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 the City Clerk's website <a href="www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)  Date 2/5/13 Signature	•	ng paid for your representation, or if your appearance is part of other paid duties, please be advised				
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 the City Clerk's website <a href="https://www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)  Date 2/5/13 Signature	1.					
calendar year regardless of the amount spent on lobbying.  (Please go to the City Clerk's website <a href="www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)  Date 2/5/13 Signature	2.					
Room 103 of the City-County Building, Madison, for more information.)  Date 2/5/13 Signature	3.					
	(Please go to Room 103 of th	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 2/5/	113 Signature Roman Winter				

Madison

	2/1/1	3
Date: _	421	

Reg	gistration Statement	Common Council COMMITTEE		
Please Print		PLEASE PRINT NAM	we clearly Stebn	1 /2
Agenda No.	8414	Name $\frac{\sqrt{3} + \sqrt{9}}{\sqrt{9}}$ Address $\frac{9}{15}$	Waban t	+11/
Please cl	heck one:	AND Pleas	se check:	
Suj	pport		Do not wish to s	peak
Ор	pose	,		
Nei Nei	ither Support Nor Opp	ose		
(If you answ of who you r	ing are you representing an organisered "no," STOP; you need not corepresent and go on to the next queess and telephone number of each	complete the rest of this form. If estion.)	7 you answerea yes, <sub>1</sub>	No provide the name
Are you bein	ng paid for your representation?		Yes	No No
Are you app (If you answ question.)	earing as part of your other paid deered "no," STOP; you need not deered "no," stopping you need not deep the stopping as a second contract of the second need not deep the second need need need need need need need n	luties for this person or organization complete the rest of this form. I	ation? Yes  If you answered "yes,"	No go on to the next
Speaking Li	Information Hearing	non Council) 5 minutes 3 minutes 3 minutes		

	REGISTRATION STATEMENT - FAGE 2		
Are you an el other governn	lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
(If you answer this form. If yo	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 beithat:	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?		
(Please go to Room 103 of t	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)		
Date	2/2012 Signature Bay Sulout Print Name Gary 5 tebnitz		



Date:	2/5/13
Duce.	

Registration	on Statement	Common Cou	ıncil		
Please Print			RINT NAME CLE	-ARLY	
Agenda No. 284	14	Name A	ndrev Ste 26 Schro Padismi	ebrita edir ct	,
Please check on	e:	AND	Please che	eck:	
Support	_		Do no	t wish to speal	<b>₹</b>
Oppose		,			
Neither Su	pport Nor Opp	pose			
At this meeting are you (If you answered "no," of who you represent at Name, address and tele	STOP; you need not nd go on to the next qu	complete the rest of t uestion.)	his form. If you ans		
Are you being paid for	your representation?			Yes N	O
Are you appearing as partial (If you answered "no," question.)	art of your other paid of STOP; you need not	duties for this person complete the rest of t	or organization? his form. If you ans	☐ Yes ☐ Ń swered "yes," go on	o to the next
7 8	Public Hearing (Comr Information Hearing Other Items	3 m	inutes		

	REGIOTATION STATEMENT AND A ST
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?
(If you answer	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 beithat:	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.	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 Room 103 of t	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date 2/5	Signature  Print Name  Molecus Stebnish

_*A
TIEVA
Madison

Date: 2|5|3

## DO NOT WISH TO SPEAK FORM

Registration S		mmon Cour	ncil		
Please Print  Agenda No. 28414			int name clea even John 38 N Stough adison, WI	ARLY 1501 Hon Rd	
Please check one:	A	AND	Please chec	k:	
Support	STANDARD AND AND AND AND AND AND AND AND AND AN	Hand the state of	Do not	wish to spe	eak
Oppose		Ť			
Neither Suppo	rt Nor Oppose				
At this meeting are you repre (If you answered "no," STO) of who you represent and go.  Name, address and telephone	P; you need not comple on to the next question.,	te the rest of this	s form. If you answ		No pvide the name
Are you being paid for your read Are you appearing as part of y (If you answered "no," STOP question.)	our other paid duties fo	or this person or te the rest of this	organization? s form. If you answ	Yes V  Yes v ered "yes," go	No No on to the next
Inform	Hearing (Common Conation Hearing	3 minu	ites		

	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?				
(If you answer	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 are beithat:	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.	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 Room 103 of t	o the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)				
Date $\frac{\partial}{\partial t}$	Signature Steven Sohnson  Print Name Steven Sohnson				

Date: <u>2-5-13</u>



# DO NOT WISH TO SPEAK FORM

Registrati	on Statement	Common Cou	ncil	
Please Print			RINT NAME CLEA	RLY
Agenda No. <u>284</u>	114			ousHTON RU
Please check or	ne:	AND	Please check	
Support			Do not v	wish to speak
Oppose				
Neither S	upport Nor Opp	pose		
(If you answered "no, of who you represent a	ou representing an organ organ organ or STOP; you need not and go on to the next que of each	complete the rest of the complete the rest of the complete the rest of the complete the rest of the complete	his form. If you answe	rea "yes, provide ine name
Are you being paid for	r your representation?			Yes No
Are you appearing as j (If you answered "no, question.)	part of your other paid of "STOP; you need not	duties for this person complete the rest of t	or organization? his form. If you answe	☐ Yes ☑ No ered "yes," go on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 mi	nutes	

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?				
(If you answer	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 are beithat:	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.	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 Room 103 of t	the City Clerk's website <u>www.citvofmadison.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				

Date:	2-	5	-autorités	l	3	



### CITY OF MADISON

Registration	on Statement	Common Co	uncil		
Please Print	2	COMMITTEE  PLEASE F	PRINT NAME CLEA	ARLY	
Agenda No	28414	Name	Toby Me South STO	icher	RD
Please check on	ie:	AND	Please chec	:k:	
<b>Support</b>			No not	wish to spea	ak
Oppose		· ·			
Neither St	ipport Nor Opj	pose			
At this meeting are you (If you answered "no, of who you represent a Name, address and tele	" STOP; you need not and go on to the next q	complete the rest of uestion.)	this form. If you answ	vered "yes," provi	No ide the name
Are you being paid for	your representation?			☐ Yes 💢	No
Are you appearing as p (If you answered "no," question.)	art of your other paid 'STOP; you need not	duties for this person complete the rest of	ı or organization? this form. If you ansv	Yes wered "yes," go or	No n to the next
Speaking Limits:	Public Hearing (Cominformation Hearing.) Other Items	3 n	ninutes		

(SEE BACK)

	NE.	GISTRATIO	4 OTATEMENT TOWN
Are you an el other governn	ected official or employee v	who is appea	ring solely on behalf of your office or for your municipality or Yes No
(If you answe this form. If y	red "yes" to the question, $S$ ou answered "no" to the qu	TOP. You ne	eed not complete the rest of this form, except that you must sign to the next question.)
If you are be that:	ing paid for your representa	ation, or if y	our appearance is part of other paid duties, please be advised
1.	Before you engage in lobb with the City Clerk.	bying as a lo	bbyist, you or your principal must file an authorization
2.	Your principal is not perr. City Clerk.	mitted to aut	horize you to lobby unless you are registered with the
3.	If your principal spends of period (half year), the premainder of the calendar	incipal must	nore than \$1,000 for lobbying services in any reporting t file expense statements with the City Clerk for the
(Please go to Room 103 of t	the City Clerk's website the City-County Building, M	<u>www.citvofi</u> adison, for n	nadison.com/clerk/index.html or go to the Clerk's Office at nore information.)
Date 2	5-13	Signature	Jan Mh
	I	Print Name	For Muchy

Date: 2 - 5 - 2013



# DO NOT WISH TO SPEAK FORM

Registratio	on Statement	Common Co	uncil	
Please Print  Agenda No.	414	PLEASE P Name Address	RINT NAME CLEARLY  DANIE   BO  438 NOSTONO  MAJISON WIT	rke gnton Ri 53714
Please check on	e:	AND	Please check:	
Support			Do not wish to	o speak
Oppose				
Neither Su	pport Nor Opp	ose		
of who you represent ar	STOP; you need not nd go on to the next qu	complete the rest of a sestion.)	ther than yourself: Yes this form. If you answered "yes on you are representing:	
Are you being paid for	your representation?		Yes	; No
Are you appearing as pa (If you answered "no," question.)	art of your other paid of STOP; you need not	luties for this person complete the rest of	or organization? Yes this form. If you answered "yes	
	Public Hearing (Comn Information Hearing Other Items	3 m	inutes	

	REGISTRATION STATEMENT. THE E				
Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?				
(If you answer this form. If yo	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?				
(Please go to Room 103 of t	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)				
Date <u>2 - S</u>	Signature Dai Ale Bignature  Print Name Movie (Biske				

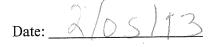


Date:  $\frac{2/5/3}{}$ 

## DO NOT WISH TO SPEAK FORM

Registrat	tion Statement	COMMITTEE	ouncii		
Please Print		PLEASI	E PRINT NAME	CLEARLY	
Agenda No.		Name Address	Ken Me 665 04 Madison	ulberg ZBFIdge	ct 106
Please check of	one:	AND	Please	check:	
<b>Support</b>	•		_ No	not wish to s	speak
Oppose					
Neither S	Support Nor Opj	pose			
(If you answered "no of who you represent	ou representing an organie, "STOP; you need not and go on to the next quelephone number of each	complete the rest uestion.)	of this form. If you	u answered "yes," <sub>[</sub>	No provide the name
Are you appearing as	or your representation?	duties for this per	son or organization	Yes  1? Yes	□ No □ No
question.)	o," STOP; you need not	compiete the rest	oj mus jorm. 1j yo	u unswereu yes,	go on to the next
Speaking Limits:	Public Hearing (Com- Information Hearing. Other Items		3 minutes		

Are you an eleother government	ected official or employee nental body?	who is appear	ing solely on behalf o		for your Yes	municipality or No
	red "yes" to the question, so ou answered "no" to the qu		-	est of this form, e	except the	ıt you must sign
If you are being that:	ng paid for your represent	tation, or if yo	ur appearance is par	of other paid d	uties, ple	ease be advised
1.	Before you engage in lob with the City Clerk.	obying as a lob	byist, you or your pri	ncipal must file	an autho	rization
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.					
3.	Your principal must file calendar year regardless of	•		Clerk for the re	emainder	of the
	the City Clerk's website he City-County Building, N			e <u>x.html</u> or go to	o the Cl	erk's Office at
Date _ <del> </del>		Signature Print Name	+ors	Ken Men	lben	





Registration Statement	COMMITTEE	ouncil
Please Print	PLEASE	PRINT NAME CLEARLY
Agenda No	Name _ Address _ _	2014 Tawhee Dr. Madeson, LUI 53711
Please check one:	AND	Please check:
<b>Support</b>		Do not wish to speak
Oppose		
Neither Support Nor O	ppose	
At this meeting are you representing an orgalized (If you answered "no," STOP; you need no f who you represent and go on to the next Name, address and telephone number of each	ot complete the rest of question.)	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 pa (If you answered "no," STOP; you need no question.)	id duties for this person to tomplete the rest of	son or organization?
Information Hearin	ommon Council)5 ag3	3 minutes

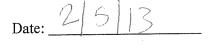
•	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?					
	ed "yes" to the question, ou answered "no" to the		ed not complete the rest of this to the next question.)	s form, except t	hat you must sign	
If you are being that:	ng paid for your represe	ntation, or if yo	ur appearance is part of othe	er paid duties, p	blease be advised	
1.	Before you engage in lowith the City Clerk.	obbying as a lob	byist, you or your principal n	nust file an auth	norization	
2.	Your principal is not po	ermitted to auth	orize you to lobby unless you	u are registered	with the	
3.	Your principal must fil calendar year regardless		ments with the City Clerk for pent on lobbying.	or the remaind	er of the	
	the City Clerk's websi ne City-County Building,		adison.com/clerk/index.html ore information.)	or go to the (	Clerk's Office at	
Date \( \frac{\lambda \lambda \lambda}{\lambda}	5/13	Signature	ZITKHN			
		Print Name	Steven RR	obinson		



Date:	2/9	5/13
		£

Registration Stateme	ent - Common Council	
Please Print	PLEASE PRINT NAME O	LEARLY
Agenda No.	Name SARAY CAC Address 406 Science Mag sol	ERWE
Please check one:	AND Please c	heck:
<b>Support</b>	✓ Do	not wish to speak
Oppose		
Neither Support Nor	r Oppose	
(If you answered "no," <b>STOP</b> ; you not of who you represent and go on to the	an organization or a person other than yourse eed not complete the rest of this form. If you next question.)  of each person or organization you are repre	answered "yes," provide the name
A van haing maid fan your rangant	ortion?	☐ Yes ⊠ No
Are you being paid for your represent  Are you appearing as part of your othe (If you answered "no," STOP; you no question.)	er paid duties for this person or organization eed not complete the rest of this form. If you	Yes ⊠ No
Information H	g (Common Council)5 minutes earing	

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?					
	vered "yes" to the question, S you answered "no" to the qu		ed not complete the rest of this fo to the next question.)	orm, except t	hat you must sign
If you are b that:	eing paid for your represent	tation, or if yo	our appearance is part of other p	oaid duties, p	blease be advised
1.	Before you engage in lob with the City Clerk.	obying as a lob	byist, you or your principal mus	st file an auth	norization
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.				
	to the City Clerk's website fthe City-County Building, M		adison.com/clerk/index.html or ore information.)	go to the (	Clerk's Office at
Date	15/13	Signature	Auch Cyes	d	
		Print Name	SARAN CAMPENTEN	<u></u>	





Registration	on Statement - ַ	Common Co	uncil	
Please Print			RINT NAME CLEARLY	
Agenda No.	2	Name	Abbey Jaege 152 Langdon 1001:son WI	V St 53703
Please check on	e:	AND	Please check:	
Support			Do not wish	to speak
<b>Oppose</b>				
Neither Su	pport Nor Op	pose		
At this meeting are you (If you answered "no," of who you represent as	' <b>STOP;</b> you need not	t complete the rest of	other than yourself: Y this form. If you answered "y	es No es," provide the name
Name, address and tele	phone number of each	h person or organizat	ion you are representing:	
Alpha ( 152 Lo 310-7:	Chi Ome Inodon S 20-675	ga F 8		
Are you being paid for your representation?				
Are you appearing as p (If you answered "no," question.)	art of your other paid 'STOP; you need not	duties for this person t complete the rest of	n or organization? Y this form. If you answered "y	es No wes," go on to the next
1 0	Public Hearing (Com Information Hearing) Other Items	3 n	ninutes	

		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?		
		ed "yes" to the question, <b>STOP.</b> 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.)		
If you that:	are beir	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.		
	-	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at e City-County Building, Madison, for more information.)		
Date _	2/5	Signature Alugaley		
		Print Name Abbey Theyer		

Date: 2/5/2013



# DO NOT WISH TO SPEAK FORM

Registration	on Statement - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No2	Name Nich Miller  Address 629 N. Frances St  Madzen, WI 53703
Please check or Support  Oppose	Please check:  Do not wish to speak
Neither St	upport Nor Oppose
(If you answered "no, of who you represent o	u representing an organization or a person other than yourself:  "STOP; you need not complete the rest of this form. If you answered "yes," provide the name and go on to the next question.)  ephone number of each person or organization you are representing:
Are you being paid for	part of your other paid duties for this person or organization?
(If you answered "no, question.)	"STOP; you need not complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing (Common Council)5 minutes Information Hearing

	ALGIOTATION OTALLIMENT TAGE		
Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality other governmental body?			
	ed "yes" to the question, <b>STOP.</b> 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 beir 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.		
	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 <u>2/5</u> .	12013 Signature 12		
	Print Name		



Registration Statem	nent - Common Co	uncil
Please Print		
	PLEASE F	PRINT NAME CLEARLY
2	Name	Jaryd Lindheim
Agenda No.	Address	17 West Gilman St.
		Madison, WI 53703
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose		
Neither Support No	or Oppose	
At this meeting are you representing (If you answered "no," STOP; you represent and go on to the Name, address and telephone number	need not complete the rest of ne next question.)	this form. If you answered "yes," provide the name
Are you being paid for your represen	itation?	☐ Yes ☑ No
Are you appearing as part of your oth (If you answered "no," STOP; you r question.)	*	or organization? Yes Yoo No this form. If you answered "yes," go on to the next
Information F	ng (Common Council)5 n Hearing3 n 3 n	ninutes

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
(If you answer	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:	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.		
	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 2/5	Signature And M.  Print Name Jaryd Lindhelm		



Date:	

Registration	on Statement	Common C	ouncil	
Please Print			PRINT NAME CLE	ARLY
Agenda No.	2	Name Address	Linda F 804 Lewi Madison	and is Ct wi 53711
Please check on	ie:	AND	Please che	ck:
<b>Support</b>			Do not	t wish to speak
<b>Oppose</b>				
Neither St	ipport Nor Opj	pose		
of who you represent a	" <b>STOP;</b> you need not and go on to the next q	complete the rest uestion.)	on other than yourself: of this form. If you ans zation you are represent	☐ Yes ☑ No wered "yes," provide the name ting:
Are you being paid for				☐ Yes ☐ No
Are you appearing as partial (If you answered "no, question.)	oart of your other paid " STOP; you need not	duties for this per t complete the rest	son or organization? of this form. If you ans	∐ Yes · ∐ No swered "yes," go on to the nex
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items		3 minutes	

(Please an	calendar year regardless of the amount spent on lobbying.  to the City Clerk's website <a href="www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at		
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.		
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.		
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.		
If you are b that:	being paid for your representation, or if your appearance is part of other paid duties, please be advised		
	vered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign fyou answered "no" to the question, go on to the next question.)		
other govern	nmental body? Yes No		



Registrati	on Statement -	COMMITTEE	Council		
Please Print		PLEASI	E PRINT NAME	CLEARLY	
Agenda No.	<u>}</u>	Name Address	Kaelie 120 Lan	Kennedy Igdon St	reet
Please check or	ie:	AND	Please of	check:	
Support Support			Do Do	not wish to s	peak
Oppose			·		
At this meeting are yo (If you answered "no, of who you represent of	" STOP; you need no	anization or a pers ot complete the res	on other than yours t of this form. If you	elf:	☐ No provide the name
Name, address and tel	ephone number of ea	ch person or organ	ization you are repr	resenting:	
Are you being paid for	r your representation	?		Yes	⊠ No
Are you appearing as (If you answered "no, question.)	part of your other pai	d duties for this pe ot complete the res	rson or organization t of this form. If you	n? Yes u answered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items	g	.3 minutes		

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipal other governmental body?				
	wered "yes" to the question, <b>STOP.</b> 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.)			
If you are be that:	being 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.			
	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			

Date: _	44/3	_
_		



Registration Sta	ement - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name  Address  Address  Madison, WS 53703
Please check one:	AND Please check:
Support	Do not wish to speak
<b>Oppose</b>	
Neither Suppor	Nor Oppose
(If you answered "no," <b>STOP</b> of who you represent and go o	nting an organization or a person other than yourself: Yes No you need not complete the rest of this form. If you answered "yes," provide the name to the next question.)  The provided the name and the next question or organization you are representing:
Are you being paid for your real Are you appearing as part of y (If you answered "no," STOP question.)	oresentation?  Yes No  Our other paid duties for this person or organization?  Yes No  you need not complete the rest of this form. If you answered "yes," go on to the nex
Inform	Hearing (Common Council)5 minutes stion Hearing

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?	
(If you answe this form. If y	ered "yes" to the question, <b>STOP.</b> 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.)	
If you are be that:	sing 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	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	



# CITY OF MADISON

Registration	on Statement	Common Co	uncil	
Please Print		PLEASE P	RINT NAME CLEAR	RLY
Agenda No		Name	Jennifer Apo 622 N. Hen	sdaen 1 J
Please check or	ne:	AND	Please check	
Support	· ·		Do not v	vish to speak
Oppose				
Neither S	upport Nor Op	pose		
(If you answered "no of who you represent	and go on to the next	it complete the resi of question.)	other than yourself: f this form. If you answe	☐ Yes ☐ No erred "yes," provide the name
	or your representation?		on or organization?	☐ Yes ☐ No
Are you appearing as (If you answered "no question.)	part of your other paid, "STOP; you need no	a auties for this perso ot complete the rest o	of this form. If you answ	ered "yes," go on to the nex
Speaking Limits:	Information Hearing	mmon Council)5 g3	minutes	

(SEE BACK)

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?	
(If you answe this form. If y	ered "yes" to the question, <b>STOP.</b> 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.)	
If you are be that:	sing 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	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:  $\frac{2/5/13}{}$ 



# DO NOT WISH TO SPEAK FORM

### CITY OF MADISON

Registrat	ion Statement -	Common C	ouncil		
Please Print		PLEASE	PRINT NAME C	SLEARLY	
Agenda No		Name _ Address _	Helen Be 622 N. Madis	Henry S	5.53703
Please check o	ne:	AND	Please c	heck:	
Support			Do 1	not wish to	speak
<b>Oppose</b>					
Neither S	Support Nor Op	pose			
(If you answered "no of who you represent	ou representing an organ, "STOP; you need no and go on to the next of lephone number of each	ot complete the rest of question.)	of this form. If you	answered "yes,"	No provide the name
Are you being paid fo	or your representation?			☐ Yes	No
Are you appearing as (If you answered "no question.)	part of your other paid," STOP; you need no	l duties for this persont complete the rest of	on or organization? of this form. If you	Yes Yes answered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items	3	minutes		

(SEE BACK)

	re you an elected official or employee who is appearing solely on behalf of your office or for your municipality other governmental 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 are bei 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.				
	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 2/5	Signature Weller Berth				
	Print Name Helen Beutler				

Date: 2, 5, 2013



# DO NOT WISH TO SPEAK FORM

Registration Statement	- Common Co	uncil
Please Print	PI FASE P	PRINT NAME CLEARLY
Agenda No	Name	Justine Kreitzer 1027 N Henry St. Madison WI 53703
Please check one:	AND	Please check:
<b>Support</b>		Do not wish to speak
<b>Oppose</b>		
Neither Support Nor Op	ppose	
At this meeting are you representing an org (If you answered "no," STOP; you need no of who you represent and go on to the next Name, address and telephone number of ea	ot complete the rest of i question.)	this form. If you answered "yes," provide the name
Are you being paid for your representation?  Are you appearing as part of your other paid		☐ Yes ☐ No n or organization? ☐ Yes ☐ No
· · · · · · · · · · · · · · · · · · ·	*	this form. If you answered "yes," go on to the next
Information Hearing	mmon Council)5 m g3 m 3 m	ninutes

			·					
	re you an elected official or employee who is appearing solely on behalf of your office or for your municipality or her governmental body?							
	red "yes" to the question, ou answered "no" to the		need not complete the rest of this form, except that you must sign on to the next question.)					
If you are bei that:	ng paid for your represe	ntation, or if	your appearance is part of other paid duties, please be advised					
1.	Before you engage in lowith the City Clerk.	obbying as a l	obbyist, you or your principal must file an authorization					
2.	Your principal is not po	ermitted to au	athorize you to lobby unless you are registered with the					
3.	Your principal must fill calendar year regardless		atements with the City Clerk for the remainder of the nt spent on lobbying.					
	the City Clerk's websi he City-County Building,		fmadison.com/clerk/index.html or go to the Clerk's Office at more information.)					
Date 2	5.2013	Signature	Eggs for kin					
		Print Name	lygn Justine Kreitzer					



Date:  $\frac{2}{5}/\frac{2013}{}$ 

# DO NOT WISH TO SPEAK FORM

Registration Sta		ommon C mmittee	ouncil		
Please Print			PRINT NAME CLE	ARLY	
Agenda No. 2		Name _ Address _	Anna Casta Cozz N. 1 Modison	meda tenryst.	708
Please check one:		AND	Please chec	ek:	
Support			Do not	wish to s	speak
<b>Oppose</b>					
Neither Suppor	t Nor Oppose	<b>:</b>			
At this meeting are you represent (If you answered "no," STOP; of who you represent and go on Name, address and telephone no	you need not comp to the next question	lete the rest on.)	f this form. If you ansv		No provide the name
Are you being paid for your rep	resentation?			Yes	☐ No
Are you appearing as part of you (If you answered "no," STOP; question.)	ur other paid duties you need not compl	for this perso lete the rest o	n or organization? f this form. If you ansv	Yes yered "yes,"	☐ No go on to the next
Informat	earing (Common C ion Hearing ms	3	minutes		

	are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental 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.	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 the City-County Building, Madison, for more information.)							
Date	$\Lambda$ . $C_{\alpha} \setminus C_{\alpha}$							
,	Print Name							

Date: <u>2/5/13</u>



# DO NOT WISH TO SPEAK FORM

Registration	Statement - C	Common Cou	ncil		NATIONAL DESCRIPTION OF THE PROPERTY OF THE PR
Please Print  Agenda No.		Name	RINT NAME CLEA Will Kune RAST E. La	ect	Pl.
Please check one  Support  Oppose		AND	Please chec  Do not	k: wish to s	peak
	port Nor Oppos	se			
At this meeting are you re (If you answered "no," So of who you represent and	TOP; you need not com	iplete the rest of th	ner than yourself: nis form. If you answ	Yes yered "yes," p	No Provide the name
Name, address and teleph	one number of each per	rson or organizatio	n you are representi	ng:	· · · · · · · · · · · · · · · · · · ·
Are you being paid for you appearing as part (If you answered "no," So question.)	of your other paid dutie	es for this person on the second	or organization? nis form. If you answ	Yes Yes vered "yes," §	☑ No ☑ No go on to the next
In	ablic Hearing (Common formation Hearing Ther Items	3 mii	nutes		

Are you an elected official or employ other governmental body?	ee who is appe	aring solely on behalf of your off	fice or for you Yes	ır municipality or ☑ No
(If you answered "yes" to the question this form. If you answered "no" to the			form, except to	hat you must sign
If you are being paid for your represthat:	entation, or if	your appearance is part of other	paid duties, p	blease be advised
1. Before you engage in with the City Clerk.	lobbying as a lo	obbyist, you or your principal mu	st file an auth	norization
2. Your principal is not part of City Clerk.	permitted to au	thorize you to lobby unless you	are registered	with the
3. Your principal must to calendar year regardles		ntements with the City Clerk for at spent on lobbying.	the remaind	er of the
(Please go to the City Clerk's web. Room 103 of the City-County Building			go to the (	Clerk's Office at
Date <u>3/5/13</u>	Signature	Will Mit		
	Print Name	Willie Kunert		





Registration Staten	ent - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name LAURA GELLERU  Address QQSE LAKELAWN PL  MAPISON, W/ 53703
Please check one:	AND Please check:
<b>Support</b>	<b>Do not wish to speak</b>
<b>Oppose</b>	
Neither Support N	r Oppose
	an organization or a person other than yourself: Yes No need not complete the rest of this form. If you answered "yes," provide the name to next question.)
Name, address and telephone number	r of each person or organization you are representing:
Are you being paid for your represe	tation? Yes No
Are you appearing as part of your of (If you answered "no," STOP; you question.)	neer paid duties for this person or organization? Yes No need not complete the rest of this form. If you answered "yes," go on to the next
Information	g (Common Council)5 minutes Iearing

-	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?						
	red "yes" to the question, <b>STO</b> ou answered "no" to the questi				hat you must sign		
If you are beir that:	ng paid for your representatio	on, or if you	ar appearance is par	t of other paid duties,	please be advised		
1.	Before you engage in lobbyin with the City Clerk.	ing as a lobb	oyist, you or your pr	incipal must file an autl	norization		
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.						
	the City Clerk's website <u>ww</u> he City-County Building, Madi			<u>lex.html</u> or go to the (	Clerk's Office at		
Date	5/13 Sigr	nature	200				
		nt Name	LAURA	GALEN			



Developing a new quality of life in the tradition of the Langdon area

**Benefits Analysis** February 5, 2013

Economic Development	Current	Waterfront
Increase Tax Base	No	Yes
Construction Jobs	No	Yes
Neighborhood Revitalization	No	Yes
Architecture / Design		
Compatible Architecture	Yes	Yes
Integration / Preservation of	621 N Henry	150 Langdon
Existing Buildings	625 N Henry	140 Iota
	145 Iota	
	150 Langdon 140 Iota	
Stories	4	6
Balconies	No	Yes
Formal Entries	No	Yes
Pormar Entires	110	
Site Enhancements		
Fire Lane	No	Yes
Mid-Block Path	No	Yes
Mendota Lakeshore Path	No	Yes
Viewshed Compromised	No	No
Green Space / Landscaping	None	Courtyards, Balconies, Community Rooftops
Community Space	No	Yes
Study Lounge	No	Yes
Trash	Surface dumpsters	In-building collection
Recycling	Yes	Enhanced
Setbacks	Touching neighbor	Meets Code
Safety & Security		
Security	Key access	Lighting, cameras, key fob access
Onsite Management	Yes	Yes
Environmental Benefits		V
Energy Efficiency Upgrades	No	Yes Yes
Green Roofs	No	0 Surface
Parking	44 Surface	55 underground
15	No	Yes
ADA	No	Yes
Enhanced Streetscapes/Walkways	No	Yes
Stormwater Management Alternative Transit	No	Community Car
Alternative Transit	NO	Underground Car, Moped, Bike parking
Permeable Pavement	No	Yes
Widened Sidewalks	No	Yes
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Long to the second	
City Plans		V
Downtown Plan Compliant	NA	Yes
Comprehensive Plan	NA NA	Yes
Zoning Code	NA NA	Yes
PUD Standards	NA	Yes
Downtown Design Zones	NA	Yes



Click to view all folders 54

Junk E-mail [1019]

Manage Folders...

Sent Items

Sent: Tuesday, February 05, 2013 6:02 PM

carole@schaefferconsult.com; Sarah.Carpenter@cgschmidt.com; White, William F (22246) [wfwhite@michaelbest.com]; Chris Houden; Jeff Houden

----Original message----

From: Troy Vosseller <troy@vosseller.com>

To: "allalders@cityofmadison.com" <allalders@cityofmadison.com>

Sent: Wed, Feb 6, 2013 00:00:23 GMT+00:00 Subject: In support of Waterfront Apartments

Name: Troy Vosseller

Address:

614 W Doty St #310 Madison, WI 53703

I am strongly in support of the Waterfront Apartments project proposed for Henry St and Iota Ct in the Langdon Street Neighborhood.

As a graduate student I had the privilege of living in the Palisade Apartment building on W Johnson Street. It was the best living experience that I had as a renter in Madison. The building management, safety, upkeep and responsiveness to tenants was second to none. Of any landlord I interacted with while a tenant, the Palisade Property Management was the best, and I am very excited about their proposed project to add to the rich Langdon tradition.

I am currently the President of the Wisconsin Beta Sigma Phi Epsilon Corp., which is the non-profit alumni association that owns and manages the Sigma Phi Epsilon fraternity house located at 237 Langdon Street, just blocks away from the proposed apartment complex. Based on my positive experience with Palisade in the past, our board engaged Palisade to be the property manager of our fraternity house. We have a great relationship with Palisade, and through my business dealings with them I know they are committed to maintaining the unique essence that makes up the Langdon Street Neighborhood.

If we are to believe that the residents of the Langdon Street Neighborhood are the arbitrators of what "is" and "is not" authentically "Langdon", then we must come to terms with the fact that the existing structures are no longer in demand by the populous. This is evidenced by the fact that there are current vacancies in these buildings. The shift across downtown has been toward higher end, higher density housing. I believe density is a great thing for Madison, as will be discussed later.

Langdon will always been Fraternity and Sorority row. The proposed Waterfront Apartments do nothing to change that, and in my opinion they support this tradition. As a Langdon fraternity advisory and housing corporation president, I want more quality housing options in close proximity to our Chapter House. This allows for our members to have more interaction with each other and the fraternity itself, thus increasing brotherhood.

I also question what makes a building "contributing." Does it merely have to be 1-4 stories and made of brick? That would be an objective threshold, rather than a subjective one. Subjectively, I do not find the existing buildings as "contributing." To me, the existing structures do not contribute at all the the uniqueness of Langdon Street-rather they detract. This is not due to their age, wear or tear, but rather the fact that these buildings are beyond their useful lives and not worthy of remediation. Nor, to my knowledge, were these structures ever associated with any historical context (eg. fraternity house, famous residence, university building, etc).

There is much discussion about how this project does or does not fit into the Downtown Plan. I believe it completely fits into the Downtown Plan because the proposal's size, massing, setbacks and most importantly architectural aesthetic fit in to the current Langdon Street Neighborhood. It is naive to think that a new project will not bring a modern flair (ie. you can't build a building that is 50 years old). I think this project brilliantly balances respect for the history and unique aesthetic of the Langdon Street Neighborhood while providing a much needed architectural facelift to the current, blighted properties.

e t	
	LP/CLASSIC CONTROL CON
	Anna de la company de la compa

Furthermore, the Downtown Plan explicitly calls for more owner-occupied housing downtown. If we as a community ever expect the current student-rental areas of Mifflin, W Washington, Main and Doty Streets to have any chance of being owner-occupied majority areas, then we NEED more density. Without more density downtown, these border student-rental areas will still have overwhelming demand that keeps them rental housing, thus not fulfilling the specific objective of the Downtown Plan to increase owner-occupied housing downtown.

Anecdotally, I know that newer, denser apartment buildings are safer for their residents and surrounding neighborhood. I contribute this to tighter security measures, access control, lighting, on-site management and security, and video cameras. I also know, anecdotally, that the area (especially the alleys) that encompass the project's footprint are home to undesirable activity. I am confident that the Waterfront Apartments will enhance safety and security in the neighborhood.

In closing, I am very much in favor of the Waterfront Apartment's proposal as both a Madison resident and Fraternity advisor.

Sincerely, Troy Vosseller

