Date:	1240	<u>}</u>
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City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

PLEASE PRINT CLEARLY

Agenda No	Name RICHARD ENTENMENT Address 1228 SHERMAN MENUE MDISHN WI 53703
Please check the appropriate boxes:	
Support Wish to speak Do not wish to speak Available to answer questions	Oppose Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organic (If you answered "no," STOP; you need not a question.) Name, address and telephone number of each	complete the rest of this form. If you answered "yes," go on to the next
	·
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.)	luties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing Information Hearing	5 minutes 5 minutes

Registration Statement - Page 2

Are you an governmenta	elected official who is appearing solely on behalf of your office or for your municipality or other lbody?			
	ered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question.)			
If you are be that:	eing paid for your representation, or if your appearance is part of other paid duties, do you understand			
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 the principal is registered with the City Clerk? Yes Yes No			
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. Yes No			
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)				
Date	Signature			
	Print Name			

Date: 4.24.17	
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City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

PLEASE PRINT CLEARLY

F	· ·
	Name JOSEPH TACHOVSKY
Agenda No. 20	Address 1223 SHERMAN AVE
Required – Can be obtained from agenda on registration table.	MSN 53703
Please check the appropriate boxes:	
Support Wish to speak Do not wish to speak Available to answer questions	□ Oppose□ Wish to speak□ Do not wish to speak□ Available to answer questions
At this meeting are you representing an organizate (If you answered "no," STOP; you need not conquestion.) Name, address and telephone number of each per	nplete the rest of this form. If you answered "yes," go on to the next
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid dution (If you answered "no," STOP; you need not compuestion.)	es for this person or organization? Yes Monplete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing Information Hearing	

Registration Statement - Page 2

-		elected official who is a al body?	ippearing solely or	behalf of your office o	or for your mun	nicipality or other No
		vered "yes" to the question you answered "no" to the			is form, except	that you must sign
If you that:	u are be	eing paid for your represe	ntation, or if your	appearance is part of other	er paid duties, o	lo you understand
	1.	Before you engage in I with the City Clerk?	obbying as a lobby	ist, you or your principal	must file an aut Yes	horization No
	2.	Your principal is not j with the City Clerk?	permitted to author	ize you to lobby unless t	the principal is Yes	registered No
	3.	Your principal must fi calendar year regardles	*	ents with the City Clerk nt on lobbying.	for the remaine	der of the
		ered "no" to any of the la om 103 of the City-County		•	at 266-4601 or	go to the Clerk's
			•			
Date	u		Signature			
			Print Name			