Date: 21 MAY 13

# CITY OF MADISON

Registration Statement - BUILDING, FILS FOR CODE

Please Print	PLEASE PRINT CLEARLY
Agenda No. 4	Name LOU HOST-JABLOUSKI Address 30 LAUSWIG ST. MADISON, WI
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppo	and Wish to speak  Do not wish to speak  Available to answer questions
At this meeting are you representing an org (If you answered "no," STOP; you need n of who you represent and go on to the next	ot complete the rest of this form. If you answered "yes," provide the name
	ach person or organization you are representing:
SASY NEIGHBORHOOD	ASSOCIATION
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 or organization?   Yes No not complete the rest of this form. If you answered "yes," go on to the next
Information Hearin	ommon Council) 5 minutes ng 3 minutes 3 minutes

# **REGISTRATION STATEMENT - PAGE 2**

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality other governmental body?  Yes No			
100	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 bein that:	g 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 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	Signature		
Print Name			

Date: 21 May 2013

# CITY OF MADISON

Registration	on Statement			
		MMITTEE		
Please Print		PLEASE	E PRINT CLEARLY	
Agenda No.	Bonfiles	Name Address	John S 3327 Ch Madison	rago Ane
Please check the appro	opriate boxes:			
At this meeting are yo (If you answered "no, of who you represent of	pport Nor Oppose  u representing an organizat "STOP; you need not com and go on to the next questi ephone number of each per	plete the re on.)	rson other than yourself: est of this form. If you answ	to speak answer questions  Yes Novered "yes," provide the name
Friends .	+ Stork	wea	ther Creek	
Are you being paid fo	r your representation?			Yes No
	part of your other paid dution of your other paid dution of STOP; you need not com			☐ Yes ☐ No wered "yes," go on to the next
Speaking Limits:	Public Hearing (Common Information Hearing Other Items		3 minutes	

# **REGISTRATION STATEMENT - PAGE 2**

Are you an elected official or employee who is appearing solely on behalf of your office or for your 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.)				
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(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 21 May 2013 Signature John Sleve				
Print Name OOHN STE / NES				

	Date: 521.13
	CITY OF MADISON
Registration Statement -	Buldny Wde
Please Print	PLEASE PRINT CLEARLY
Agenda No. #4 Bonfires	Name Alder Marsha Rummel Address 1029 Spaignt St 60
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppos	and Wish to speak  Do not wish to speak  Available to answer questions
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	ot complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	ch 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 no question.)	d duties for this person or organization?  Yes No ot complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mmon Council) 5 minutes g 3 minutes 3 minutes

# **REGISTRATION STATEMENT - PAGE 2**

Are you an ele- other governme	cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?	
	ed "yes" to the question, STOP. 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.)	
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2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.	
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?	
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)		
Date	Signature	
	Print Name	