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City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

J.	PLEAS	E PRINT (CLEARLY		
Agenda No	22 Obtained from agenda	NameAddress	Lia Velle 24 N. B. Madison	ayouta aldurno n	St.
-	• • •				
Please check the app	propriate boxes:				
At this meeting are v	speak vish to speak e to answer questions you representing an organizati o, " STOP; you need not comp	on or a person	Available n other than yourself:	ish to speak to answer ques	No
Name, address and to	elephone number of each pers	on or organiz	cation you are represe	nting:	,
					•
Are you being paid for	or your representation?			Yes	No
Are you appearing as (If you answered "no question.)	s part of your other paid duties o, "STOP; you need not comp	s for this pers plete the rest	on or organization? of this form. If you ar	☐ Yes nswered "yes,' /	No on to the next
Speaking Limits:	Public Hearing Information Hearing	5			3 - N

Registration Statement - Page 2

Are you an elected official who is appearing solely on behalf of your office or for your municipality or ot governmental 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.)			
If you a that:	re bein	ng 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?			
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.			
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)			
Date		Signature			
		Print Name			

Date: $\frac{6/19/13}{}$

City of Madison Registration Statement – Alcohol License Review Committee

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		Name	DYLA	in I	3R4	NE	
Agenda No	2	Address	20 N	BAI	-1001	N	ST
Required – Can be obtoon registration table.	otained from agenda	,	D9LA 20 M MADI	SON	WI	53	705
Please check the appropriate the property of t	opriate boxes:						. •
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(If you answered "no, question.)	ou representing an organ or story; you need not dephone number of each	complete the res	t of this form. If	you answe.		go on to	the next
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Are you appearing as (If you answered "no, question.)	part of your other paid "STOP; you need not	duties for this per complete the res	rson or organiza t of this form. If	tion? <i>you answe</i> :	☐ Yes red "yes,"	No go on to	the nexi
Speaking Limits:	Public HearingInformation Hearing		5 minutes 5 minutes				

Registration Statement - Page 2

		elected official who is appearing solely on behalf of your office or for your municipality or other al body?
		vered "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.)
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Date		Signature
		Print Name

Date: 6/19/13

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PLEASE PRINT CLEARLY

Agenda Noe Required – Can be con registration table	2 Obtained from agenda	Name Address	Ryan 1304 Madia	Sch E 3an	washing WI	5370	Ave 3
Please check the app	propriate boxes:						,
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Registration Statement - Page 2

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Date _		Signature
		Print Name