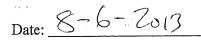


· · ·			1.0
Date:	8	6	13_

Registration S	Statement	Common C	<u>ouncil</u>		
Please Print		PLEASE	PRINT NA	ME CLEARLY	
Agenda No.		Name _ Address _	2708	3 hakeland	Are
Please check one:		AND	Plea	se check:	
Support % Oppose %	CUP.			Wish to Speak	
Oppose the	Appeal				
Neither Supp		ose			
At this meeting are you represent and go of who you represent and go Name, address and telephore	OP; you need not co o on to the next que	omplete the rest (stion.)	of this form. I	f you answered "yes,"	☐ No provide the name
	11000		- U		
Are you being paid for your	representation?	·		Yes	□ No
Are you appearing as part o (If you answered "no," STO question.)	f your other paid du O P; you need not co	nties for this persomplete the rest	on or organiz of this form.	ation?	No go on to the next
Info	ic Hearing (Commormation Hearinger 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, 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	Signature Print Name Wm F. Wh AF





Registration Statement -	Common C	Council	
_	COMMITTEE		
Please Print	•		
Transcription of the state of t	PLEASE	E PRINT NAME CLEARLY	
	Name	David Shuffer	
Agenda No.	Address	653 FNICKEOBOCKER ST	
		MADISON WI 53711	
	-	- William Co.	
Please check one:	AND	Please check:	
Support		Wish to Speak	
Oppose			•
Neither Support Nor Opp	2000		
Neither Support Not 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 qu	complete the rest	on other than yourself: Yes No tof this form. If you answered "yes," provide the nat	me
Name, address and telephone number of each	n person or organiz	zation you are representing:	
· · · · · · · · · · · · · · · · · · ·	2	, , ,	
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.)		rson or organization?	ext
Speaking Limits: Public Hearing (Communication Hearing Other Items	3	3 minutes	

	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, 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 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		

Madison

Date: <u>B-6-13</u>	
---------------------	--

Registration Statement -	Common Co	uncil
_	COMMITTEE	
Please Print	DIFASE	PRINT NAME CLEARLY
		MARCIA DIAMOND
4 7 -	Name	
Agenda No.	Address	663 CRANDAN
		MAISCSON
Please check one:	AND	Please check:
Support the appeal	:	Wish to Speak
Oppose Oppose		
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 of uestion.)	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.)	duties for this perso complete the rest of	n or organization? Yes No ho f this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Com Information Hearing. Other Items	3 r	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, 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:	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.
٠.	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	8-6	Signature Marcia Mamoria Print Name MARCIA L. SCAMON



Date: bAngust 2013

WISH TO SPEAK FORM

Registration Statement -	Common Co	ouncil
	COMMITTEE	
Please Print	DI 5405	DDINT MARKE OF EARLY
	PLEASE	PRINT NAME CLEARLY
	Name _	JON DAHL
Agenda No	Address _	629 Knickerbockerst.
	· ·	madison WI
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 not of who you represent and go on to the next quality Name, address and telephone number of each	t complete the rest of tuestion.)	of this form. If you answered yes, provide the numb
		<u> </u>
		· · · · · · · · · · · · · · · · · · ·
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 person t complete the rest of	on or organization?
Speaking Limits: Public Hearing (Com Information Hearing Other Items	3	minutes

	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, 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 that:	are bei	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:	
Daic.	

Registration Statem		ouncil		
	COMMITTEE			
Please Print	PLEASE	PRINT NAME CLE	ARLY	
Agenda No	NameAddress	Kathy Mi	ner dall St.	
		V	2,00.1	
Please check one:	AND	Please chec	ek:	
Support		Wish	to Speak	
Oppose				
Neither Support No	or Oppose		•	
At this meeting are you representing (If you answered "no," STOP; you of who you represent and go on to the Name, address and telephone number	need not complete the rest (he next question.)	of this form. If you ansv		name
		· ·		
Are you being paid for your represen	ntation?		Yes No	
Are you appearing as part of your ot (If you answered "no," STOP ; you question.)	her paid duties for this pers need not complete the rest	on or organization? of this form. If you ans	Yes No wered "yes," go on to th	e next
Information 1	ng (Common Council)5 Hearing3	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, 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 a that:	re 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	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 the City-County Building, Madison, for more information.)
Date		Signature
•		Print Name



Date:	S	161	13

Registration Statement -	Common (Council		
•	COMMITTEE		•	, •
Please Print	PLEASI	PRINT NAME C	LEARLY	,
Agenda No. 2		Amanda Solbe 64le Knicker Madison, WI		
Please check one:	AND	Please ch	reck:	
Support the appeal		Wis	sh to Speak	
Oppose				
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 you a	inswered "yes," p	☐ No 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.)	duties for this per complete the rest	son or organization? of this form. If you a	☐ Yes answered "yes," g	☐ No 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 nental 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 that:	ı are bei	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 he City-County Building, Madison, for more information.)
Date _	8/6,	Signature Amanda S. Solberg Print Name Amanda S. Solberg
		U



Date: 8/6/3

WISH TO SPEAK FORM

Registration Statement	Common Co	ouncil	
	COMMITTEE		,
Please Print	PLEASE	PRINT NAME CLEARLY	,
	Name	GRE Berceal	
Agenda No.	Address	43210 Somerset	ha
		53711	
Please check one:	AND	Please check:	
Support the appeal		Wish to Speak	
Oppose			• •
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 (uestion.)	of this form. If you answered yes, F	. No provide the name
		<u>-</u>	
	, , , , , , , , , , , , , , , , , , ,		
Are you being paid for your representation? Are you appearing as part of your other paid	1 desting for this ners	Yes Son or organization? Yes "Yes"	No No on on to the next
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)	t complete the rest	of this form. If you answered yes,	go on to the hext
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 mental body?
	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:	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.
	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	6/13 Signature There Buchen
ř	Print Name Perese Several



Date: 8/6/13

WISH TO SPEAK FORM

Registration	n Statement - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda NoZ	Name PRISCIUA ARSOVE Address 656 KNICKERBOCKER ST MADISON
Please check on	e: AND Please check:
Support 7	The appeal Wish to Speak
Oppose	
Neither Su	ipport Nor Oppose
(If you answered "no," of who you represent a	u representing an organization or a person other than yourself: Yes No Yes 'STOP; you need not complete the rest of this form. If you answered "yes," provide the name and go on to the next question.) The provided the name are representing:
Are you being paid for Are you appearing as a (If you answered "no, question.)	r your representation? Yes No
Speaking Limits:	Public Hearing (Common Council)5 minutes Information Hearing

	other government	nental body? Rected official or employee who is appearing solely on behalf of your office or for your municipality or length of the property
		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.)
1	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.
(. F	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.)
Γ	Date 8	Signature PD SI A ARSO A



D	•
Date:	

Registration Statement -	Common C	ouncil
Please Print	· .	TOUR MARKE OF EARLY
	PLEASE	PRINT NAME CLEARLY
()	Name	MICHAEL BRIGGS
Agenda No.	Address	1519 STORYTOLON AD
	- -	OREGON WI 5650
Please check one:	AND	Please check:
Support	:	Wish to Speak
Oppose		
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 each	ot complete the rest question.)	of this form. If you answered yes, provide in
		<u>-</u>
Are you being paid for your representation Are you appearing as part of your other paid	1 Julies for this per	Yes No son or organization? Yes No sof this form If you answered "ves" go on to the next
(If you answered "no," STOP ; you need n question.)	ot complete the rest	of 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 elected official or employee who is appearing solely on behalf of your office or for your municipalit other governmental body?				
	wered "yes" to the question, STOP. 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 f the City-County Building, Madison, for more information.)			
Date	Signature			
•	Print Name			



Date: 8/16/13

WISH TO SPEAK FORM

Registrat	ion Statement	Common C	<u>council</u>		
J		COMMITTEE	•		•
Please Print		•			
1 10030 1 11110		PLEASE	PRINT NA	ME CLEARLY	
		Name	RUSSE	er Po	PE .
·	- 7			COPELA.	1105
Agenda No.		Address	610	COPCOPI	1000
			MAI)1501V L	V+ 521
		<u> </u>			
Please check o	ne:	AND	Plea	se check:	
<u></u>	1100 2660 0	# 10.47	<u></u>	XX71 1 / C	.
Support	MODIFICA	1 PVN	. 🔀	Wish to Spea	łK ·
Oppose					
	Yana On	200	•		
Neither S	Support Nor Opp	pose			
	•				
			m other then r	ourself: Yes	No.
At this meeting are y	ou representing an organ, " STOP; you need not	nization or a perso	of this form.		
of who vou represent	and go on to the next q	uestion.)	• <i>y</i> •••••		•
•			,,		•
Name, address and te	elephone number of each	n person or organi	zation you are	representing:	
				- -	
	, .				
					Day.
Are you being paid for	or your representation?			∐ Yes	No No
	part of your other paid	duties for this ner	son or organiz	ration? TYes	s No
(If you answered "no	o," STOP; you need not	complete the resi	of this form.	If you answered "ye	s," go on to the next
question.)	, 2202, 900000000				
			5 minutes		
Speaking Limits:	Public Hearing (Com	mon Council)	o minutes 3 minutes		
	Information Hearing. Other Items		3 minutes		

Are you an el other governr	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, 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	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 he City-County Building, Madison, for more information.)
Date	Signature
•	Print Name

Date: 8/6/13

CITY OF MADISON

Ligh to Speak Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print	PLEASE PRINT NAME CLEARLY
Agenda No	Name <u>Ken Golden</u> Address <u>2904 Gneggyy St</u>
Please check the appropriate box: Support the project Oppose (the Appen) Neither Support Nor Oppose	AND Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organiza (If you answered "no," STOP; you need not con of who you represent and go on to the next quest Name, address and telephone number of each pe	
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid dut (If you answered "no," STOP; you need not conquestion.)	ties for this person or organization? Yes Yo No mplete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Common Information Hearing Other Items	3 minutes

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
	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 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.	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?
	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:	8	6	ŀ	3	
				-	

Registration Statement -	Common Co	Council	
<u> </u>	COMMITTEE		
Please Print	PLEASE	E PRINT NAME CLEARLY	
	Name (Jacky Da Wast	
Agenda No.	Address	4119 Deronie ST	
	·	Madison 53716	
Please check one:	AND	Please check:	
Support - Appeal		Wish to Speak	
Oppose			•
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 o question.)	of this form. If you answered "yes," provide the na	ime
		-	
		·	
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.)	duties for this person t complete the rest of	son or organization? Yes No t of this form. If you answered "yes," go on to the n	ext
Speaking Limits: Public Hearing (Com Information Hearing) Other Items	3	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, 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 arthat:	re bein	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
1	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2	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		Signature
•		Print Name



Date:	8	 6-	13	
20000		 		

Registration Stater	ment - <u>Common (</u>	Council	
•	COMMITTEE		
Please Print	PLEAS	E PRINT NAME CLEARLY	
	Name	David Goodond	
Agenda No.	Address	2376 West Lawn Aux	
ngonda 110.	Address	Madison	
		7.0001301	
Please check one:	AND	Please check:	
Support appro		Wish to Speak	
Oppose			•
Neither Support N	or Oppose		
At this meeting are you representing (If you answered "no," STOP; you of who you represent and go on to a Name, address and telephone numbers.	need not complete the rest the next question.)	t of this form. If you answered "yes," provide the no	ame
	·	-	
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 per uneed not complete the rest	rson or organization?	ıext
Information	ing (Common Council) Hearing	3 minutes	

Are you an e	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, 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:	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



Date: 8 /4/2013

WISH TO SPEAK FORM

Registration Statement -	Common Co	uncil
·	COMMITTEE	
N Drivet	•	
Please Print	PLEASE F	PRINT NAME CLEARLY
		11 8 1 0
	Name of	athy Soupup
Agenda No	Address	37117 Daives St.
	11441055	
	Λ	1ad1501 00/19
Please check one:	AND	Please check:
Support appear	•	Wish to Speak
Oppose		
Noith or Cunnout Nor On	nosa	
Neither Support Nor Op	pose	
		/
	•	
At this meeting are you representing an orga	nization or a person	other than yourself: Yes No
(If you answered "no," STOP; you need not	t complete the rest of	this form. If you answered "yes," provide the name
of who you represent and go on to the next q	uestion.)	
Name, address and telephone number of each	h person or organizat	ion you are representing:
Name, address and telephone named of the		1 0
		·
Are you being paid for your representation?		☐ Yes 🛂 No
,		
Are you appearing as part of your other paid	duties for this person	n or organization? Yes No
	t complete the rest of	this form. If you answered "yes," go on to the next
question.)		
Speaking Limits: Public Hearing (Com	mon Council)5 n	ninutes
Information Hearing.	3 n	ninutes
Other Items	3 n	ninutes

-	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, 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 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 f the City-County Building, Madison, for more information.)
Date	Signature
,	Print Name



Date: 8/6/13

WISH TO SPEAK FORM

Registrati	ion Statement	Common C	ouncil		
		COMMITTEE	•		
Please Print		•			
		PLEASE	PRINT NA	ME CLEARLY	·
		Name	BANDA	BRUCE	
Agenda No. 2				UNIVERSITY 1	1.4
Agenda No		Address _		, , ,	ANC
		· · · · · · · · · · · · · · · · · · ·	MIPPE	ston, up	
		ANTO	TO I	y 1	
Please check or	ne:	AND	Plea	ise check:	
Support				Wish to Spea	ık
Oppose	THUMAG				
	upport Nor Opp	nose		•	
Metiner 5	upport to Op	Pose			
	e e				
(If you answered "no,	ou representing an organ "STOP; you need not and go on to the next qu	complete the rest of	other than y	yourself: XYes If you answered "yes	
Name address and tal	ephone number of each	nerson or organiz	ation vou are	renresenting.	
			ation you are	roprosoneme.	
- FRE	p rous			_	
Ron	p Rouge	UENT		-	
					·
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 perso complete the rest o	on or organiz	zation? Yes If you answered "yes	☐ No 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?
	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:	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 8	Signature Rand Print Name RANGY BRUCE



Date:	*
Duto.	

Registrat	tion Statement -	Common C	ouncil		
J		COMMITTEE			
Please Print	•	•			
		PLEASE	PRINT NAME CLE	ARLY	•
	\bigcirc	Name	Jon Sta	ndridg l	
Agenda No		Address	1011 Edgen	wood to	/ Q
the state of the s					
Please check o	one:	AND	Please chec	ek:	
Support		4	Wish Wish	to Speak	. •
Oppose	Jupp	port the	Appeal	- OPPI	15 f
Neither S	Support Nor Op	nose		V	1
Termer c	support to top	pose	He proj	a	
				40/	
(If you answered "no	ou representing an organ o," STOP; you need not and go on to the next q	complete the rest	n other than yourself: of this form. If you answ		No ovide the name
Name, address and te	lephone number of each	n person or organiz	ation you are represent	ing:	•
	•				
	,				
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 not	duties for this personal complete the rest of	on or organization? of this form. If you answ] No on to the next
Speaking Limits:	Public Hearing (Coming Information Hearing	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 answe this form. If	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 bothat:	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 t Room 103 of	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: 8/6/2013

WISH TO SPEAK FORM

Registration Statement -	Common C	ouncil			
_	COMMITTEE				
Please Print	•	•			
	PLEASE	PRINT NA	ME CLEARLY		,
	Name	Mike	Murra	1	
Agenda No.	•	1.000	1	/ 	0/
Agenda No.	Address	432	Knickerb		<u> ナー</u>
	·	Madisc	M, WI	537/	<u>/</u>
	4 7 700	W- W		•	
Please check one:	AND	Plea	ase check:		
Synnowt			Wish to Sn	nan Iz	
Support			Wish to Sp)tak	
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 of the	complete the rest uestion.)	of this form.	If you answered "	Yes No 'yes,'' provide	the name
Name, address and telephone number of each	person or organiz	ation you are	representing:		
·		•			
				-	
Are you being paid for your representation?		· · · · · · · · · · · · · · · · · · ·	Y	Yes No)
Are you appearing as part of your other paid (If you answered "no," STOP; you need not	duties for this pers complete the rest	on or organiz		Yes No	o the next
question.)					
Speaking Limits: Public Hearing (Communication Hearing Other Items	3	minutes			

Are you an ele	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, 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 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 ee City-County Building, Madison, for more information.)
Date	(6/13 Signature Min Manual Man
	Print Name Mike Murray



WISH TO SCEARC LAST

Date: AVG. 6 2013

WISH TO SPEAK FORM

Registration Statement	Common C	Council
	COMMITTEE	
Please Print	PLEASE	PRINT NAME CLEARLY
	Name	DAVID MARANISS
Agenda No.	Address	,
	·	
Please check one:	AND	Please check:
Support THE APPEAL	_v	Wish to Speak
Oppose		
Neither Support Nor Opp	oose	
	•	
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 qu	complete the rest	n other than yourself: Yes No No of this form. If you answered "yes," provide the name
Name, address and telephone number of each	person or organiz	ation you are representing:
DAVID MARANISS 0		
459 KNICKERBOCK	ER ST.	-
MADISON		
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.)		on or organization? Yes No No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Communication Hearing Other Items	3	minutes

Are you an electory other government	ental body? Yes Your office or for your municipality of the partial 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 are bein that:	ng 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.
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at e e City-County Building, Madison, for more information.)
Date AV6	42013 Signature Macuil
.¥	Print Name DAVID MARANISS



Date: 8/6/2013

DO NOT WISH TO SPEAK FORM

Registration Statement	t - Common Council
DI D. '	COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
	Vala Millal II
# 2	Name Mate MitterStadi
Agenda No.	- Address 644 KAICKEN BOCKEN
Please check one:	AND Please check:
Support of appeal	Do not wish to speak
Oppose	
Neither Support Nor C	Oppose
(If you answered "no," STOP; you need to of who you represent and go on to the next	rganization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide the name et question.) each person or organization you are representing:
Time, address and telephone manifest of e	den person of exgundation you are representing.

Are you being paid for your representation	n? Yes No
Are you appearing as part of your other pa (If you answered "no," STOP; you need r 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 Hearin	ommon Council)5 minutes ng

Are you an other govern	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form. If	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 both	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



Date: 8/6/20(3

DO NOT WISH TO SPEAK FORM

Registratio	n Statement	Common C	<u>ouncil</u>		***************************************
Please Print		COMMITTEE			
1 icase i int		PLEASE	PRINT NAME CLE	ARLY	
Agenda No	#Z	NameAddress	Russ W 648 CM Msn	hitesel andull- 537	sh 11
Please check on	e:	AND	Please che	ck:	
Support			Do no	t wish to spea	k
Oppose					
Neither Su	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 nd go on to the next qu	complete the rest (uestion.)	of this form. If you ans	wered "yes," provid	No de the name
Are you being paid for		1	an anganization?	☐ Yes ☐ N	
Are you appearing as pa (If you answered "no," question.)	ort of your other paid of STOP; you need not	complete the rest	on or organization: of this form. If you ans		to the next
,	Public Hearing (Comr 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?
(If you this for	answere m. If yo	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 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.
(Please Room 1	go to 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



CITY OF MADISON

Registration Statement -	Common Council COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. # Z	Name Chilliams Address 1001 Drake St. Madison, W. 537/5
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor Opp	oose
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 this form. If you answered "yes," provide the name uestion.)
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 of question.)	luties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	non Council)5 minutes 3 minutes 3 minutes

(SEE BACK)

Are you as	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you ans	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 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 Room 103 d	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 8	e-13 Signature Gulle
	Print Name



Registrat	ion Statement	Common Cou	ıncil		
		COMMITTEE		•	
Please Print		DI FASE DE	RINT NAME CLE	ARIY	• .
Agenda No. #	2		Janice K	,	/acKi
Please check o	ne:	AND	Please che	ck:	
Support			Do not	t wish to	speak
Oppose					
Neither S	upport Nor Opp	ose			
(If you answered "no,	ou representing an organi "STOP; you need not co and go on to the next que	omplete the rest of th	ner than yourself: is form. If you ansv	Yes vered "yes,"	No provide the name
Name, address and tel	ephone number of each p	person or organization	n you are representi	ing:	
	A				
Are you being paid for	your representation?		•	Yes	No
Are you appearing as p (If you answered "no, question.)	part of your other paid du "STOP; you need not co	nties for this person of the p	r organization? is form. If you answ	Yes wered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Commo Information Hearing Other Items	3 min	utes		

	•
Are you an electronic other government	cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
(If you answere this form. If you	ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign a 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
	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.
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 t Room 103 of the	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at e City-County Building, Madison, for more information.)
Date 8/6	113 Signature James K. Dawneker Print Name Janice B. Zawacki



CITY OF MADISON

Registr	ation Statement	Common Co	uncil		
Please Print		COMMITTEE	PRINT NAME CLI	EARI V	
Agenda No	2	NameAddress	John St 640 Kr Minchino	nosm rickebocke 2 , Wis	x 57,
Please check	one:	AND	Please che	ck:	
Suppor	t ·		Do no	t wish to spe	eak
Oppose					
Neither	Support Nor Opp	oose			
(If you answered "r of who you represer	you representing an organgle, "STOP; you need not at and go on to the next qualities telephone number of each	complete the rest of the sest of the sestion.)	this form. If you ans		vide the name
·			·		
Are you being paid	for your representation?			Yes] No
Are you appearing a (If you answered "n question.)	s part of your other paid do," STOP; you need not d	luties for this person complete the rest of t	or organization? his form. If you ans	L	No no the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 mi	inutes		

(SEE BACK)

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form. If	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 b 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 1 Room 103 of	to 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



CITY OF MADISON

Registration Statement	Common Cou	ıncil
	COMMITTEE	
Please Print	PLEASE P	RINT NAME CLEARLY
	Name	MARGARET GUTHNECK
Agenda No	Address	617 Knickerbocker S
		MADESON, WI 53
Please check one:	AND	Please check:
I Support The appool		X Do not wish to speak
Oppose		
Neither Support Nor Oppo	ose	
At this meeting are you representing an organiz (If you answered "no," STOP; you need not coof who you represent and go on to the next questions.	omplete the rest of t	her than yourself: Yes No No his form. If you answered "yes," provide the name
Name, address and telephone number of each p	erson or organizatio	n you are representing:
Are you being paid for your representation?		☐ Yes ☐ No
Are you appearing as part of your other paid du (If you answered "no," STOP; you need not co question.)	ties for this person omplete the rest of the	or organization? Yes No his form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Commo Information Hearing	on Council)5 mi 3 mi	nutes

(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 answe this form. If y	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:	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 6	Clug 13 Signature Margarel Suthherb Print Name MARGARET GUTNNECK			

⇒ △
几一一
Mediagon

Date: 8-10-13

CITY OF MADISON

Registration Statement - Common Council Please Print PLEASE PRINT NAME CLEARLY Name Agenda No. Please check: Please check one: AND Do not wish to speak Support **Oppose Neither Support Nor Oppose** 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: $\prod N_0$ Yes 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," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Public Hearing (Common Council) 5 minutes Speaking Limits: Other Items......3 minutes

(SEE BACK)

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?
(If you answe this form. If y	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 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 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
	Drint Name



Registration Statement -	Common Council COMMITTEE	
Please Print	PLEASE PRINT NAME CLEARLY	
Agenda No. # Z	Name ROBERT GLEDS Address 2604 ARBOR OR H 120 MADISON, WI 53711	
Please check one:	AND Please check:	
Support the Append	Do not wish to speak	
☐ Oppose☐ 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	nnization or a person other than yourself: Yes No tomplete the rest of this form. If you answered "yes," provide the nanquestion.)	ne
Name, address and telephone number of each	h 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.)	duties for this person or organization? Yes No to the next complete the rest of this form. If you answered "yes," go on to the next	ct
Information Hearing.	mon Council)5 minutes 3 minutes 3 minutes	

Are you an e	lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
(If you answe this form. If y	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:	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 8	6/13 Signature Polity Illus
	Print Name ROBERT 7. 6CEBS



Date: 8 - 6 - 13

Registration		Common Cou	<u>ncil</u>		
Diagram Diagram	· · · · · · · · · · · · · · · · · · ·	COMMITTEE		•	
Please Print		PLEASE PR	INT NAME CL	.EARLY	
		Name D	ARYL S	SHERM	AN
Agenda No.		Address	106 G	PEGORY	
				5	37//
Please check one:		AND	Please che	eck:	
Support Th	EAPPEAL		Do no	ot wish to s	peak
Oppose					
	naut Nau Onna	5.0			
Neither Sup	port Nor Oppo	SE			
At this meeting are you rep (If you answered "no," ST of who you represent and g Name, address and telepho	FOP; you need not corgo on to the next quest	nplete the rest of thi tion.)	is form. If you an	swered "yes," p	No provide the name
				i i	
· .					
Are you being paid for you	r representation?			☐ Yes	☐ No
Are you appearing as part of (If you answered "no," ST question.)	of your other paid duti	es for this person or nplete the rest of thi	organization? Soform. If you an.	Yes Yes," g	☐ No go on to the next
Info	lic Hearing (Common ormation Hearing er Items	3 min	utes		

Are you other go	an ele vernme	cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
(If you a this form	inswere 1. If you	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 and that:	re bein	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	•	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 g Room 10.	go to . 3 of the	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at e City-County Building, Madison, for more information.)
Date		Signature
		Print Name



Date: Aug 6, 2013

Registration	on Statement	Common Cot	uncil		
Please Print		COMMITTEE		•	
		PLEASE P	RINT NAME CL	EARLY	
$ \bigcirc $		Name 1	(athrya	Leder	hause
Agenda No		Address	3/06 6	Vegory	<u> </u>
			Madi	500 -	3711
Please check on	e:	AND	Please che	eck:	
Support	e Appeal		No no	ot wish to s	speak
Oppose					
Neither Su	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 on the next quality of the next quality and the next quality are something.	complete the rest of the estion.)	nis form. If you ans	swered "yes," _I	⊠ No provide the name
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 du STOP; you need not c	uties for this person o omplete the rest of th	r organization? iis form. If you ans	Yes Yes," y	□ No go on to the next
I.	ublic Hearing (Comm nformation Hearing Other Items	3 mir	utes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or namental body?
(If you answ this form. If	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.)
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.
(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 fithe City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Registra	ation Statement	COMMITTEE	ouncil		
Please Print		PLEASE	PRINT NAME CLE	ARLY	
Agenda No		Name Address	EDWARD KINT	IXIP SKI	
Please check	one:	AND	Please che	ck:	
Suppor	t		Do not	t wish to speak	
At this meeting are (If you answered "nof who you represent	Support Nor Opp SMARKS SONT TO DWN S121NG KIGHT you representing an organi no," STOP; you need not cont and go on to the next que telephone number of each	SILING sization or a person complete the rest of estion.)	other than yourself: f this form. If you answ	Yes No wered "yes," provide i	,
, .					· · · · · · · · · · · · · · · · · · ·
Are you being paid	for your representation?			Yes No	
Are you appearing a (If you answered "r question.)	ns part of your other paid do no, " STOP; you need not c	uties for this person complete the rest of	n or organization? f this form. If you answ	☐ Yes ☐ No wered "yes," go on to	the next
Speaking Limits:	Public Hearing (Comm Information Hearing	3 r			

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form. If	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.)
If you are b 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 1 Room 103 of	to 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



Registr	ation Statement -	Common Co	ouncil		·
Dlagge Drint		COMMITTEE		•	
Please Print		PLEASE	PRINT NAME CL	EARLY	
	9	Name	Susan Pa	OPR	51
Agenda No		Address	3 610 Co	peland	St
	·	, ,,		537	
Please check	one:	AND	Please che	ck:	
Suppor	ť		Do no	t wish to	speak
Oppose					
Neither	Support Nor Opp	ose			
(If you answered ") of who you represe:	you representing an organ no," STOP; you need not on the and go on to the next quality telephone number of each	complete the rest of vestion.)	this form. If you ans		No provide the name
rvame, address and	telephone number of each	porson or organizati	ion you are represent		
Are you being paid	for your representation?			Yes	No
Are you appearing a (If you answered "n question.)	ns part of your other paid d no," STOP; you need not c	luties for this persor complete the rest of	or organization? this form. If you ans	☐ Yes wered "yes,"	☑ No go on to the next
Speaking Limits:	Public Hearing (Comm Information Hearing	3 m			

	n elected official or employee who is appearing solely on behalf of your office or for your municipality or enumental body?
(If you an this form.	swered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign If you answered "no" to the question, go on to the next question.)
If you are 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.
(Please go Room 103	o to the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



CITY OF MADISON

Registration Statement -	Common Council COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name Daviel Diebens Address 193 Dixon St Madison WI 53704
Please check one:	AND Please check:
Support Support	Do not 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	ot complete the rest of this form. If you answered "yes," provide the name
	ch person or organization you are representing:
1-0	(low There's
4.	
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 or organization? Yes No No st complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	nmon Council)5 minutes

(SEE BACK)

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?
(If you answe this form. If y	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 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 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



Registration Statement		uncil	
	COMMITTEE		
Please Print	DIFACE		DIV
	PLEASE	RINT NAME CLEA	IKL I
	Name	Beverly	Flangan
Agenda No.	Address	4003 Hu	immersher Ave.
30934		Madeson	enencia
		Swall	Village MA
Please check one:	AND	Please check	K:
Support the appeal		Do not	wish to speak
Oppose			
Neither Support Nor Opp	NOSE .		
Neither Support Not Opp	7030		
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 testion.)	this form. If you answe	
	·		
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.)	uties for this person complete the rest of t	or organization? his form. If you answe	Yes No No red "yes," go on to the next
Speaking Limits: Public Hearing (Comm Information Hearing Other Items	3 mi	inutes	

Are you an elected official or employee who is appearing solely on behalf of your office or for your munic other governmental body?	ipality or	
If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you this form. If you answered "no" to the question, go on to the next question.)	must sign	
If you are being paid for your representation, or if your appearance is part of other paid duties, please be that:	advised	
 Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk. 	n	
 Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk. 	е	
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 (Room 103 of the City-County Building, Madison, for more information.)	Office at	
Date Signature	·	
Print Name		



Registration Statement	Common Council
	COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
	Name Sandral Rogg
Agenda No. <u>#2</u>	Address 206 Davidson St
30934	Madison, WI 537/6
Please check one:	AND Please check:
Support the appeal	Do not wish to speak
Oppose	
Neither Support Nor Opp	oose
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 this form. If you answered "yes," provide the name estion.)
•	
	·
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 c question.)	uties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	on Council)5 minutes

Are you an e	lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?	
(If you answe this form. If y	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 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.	
 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 www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at the City-County Building, Madison, for more information.)	
Date	Signature	
	Print Name	



Date: 8/6/13

CITY OF MADISON

Registration Statement	Common Cour	ncil		
Please Print	PLEASE PR	INT NAME CLE	ARLY	
Agenda No.	Name Address N	forthany Lath 943 McKin Judison, WI	irof ley	
Please check one:	AND	Please chec	k:	
Support the Appeal and	I the Neighborhoo	Do not	wish to	speak
Oppose				
Neither Support Nor Opp	ose			
At this meeting are you representing an organi (If you answered "no," STOP; you need not confirm of who you represent and go on to the next que Name, address and telephone number of each page 1.	complete the rest of this estion.)	s form. If you answ		[≿] No provide the name
Are you being paid for your representation?		•	Yes	No
Are you appearing as part of your other paid du (If you answered "no," STOP; you need not coquestion.)			☐ Yes ered "yes,"	□ No go on to the next
Speaking Limits: Public Hearing (Commo Information Hearing Other Items	3 minu	tes		

(SEE BACK)

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 answere this form. If yo	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 are being that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.
(Please go to Room 103 of th	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at e City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Registration Statement	t - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name Julianne Dwyer Address 2943 WcKinley St. Madison WT
Please check one:	AND Please check:
Support the Appeal	and the Neighborhood 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 nex	organization or a person other than yourself: Yes 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	Yes No
Are you appearing as part of your other part (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	common Council) 5 minutes ng 3 minutes 3 minutes

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	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question.)	
If you are being that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised	
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.	
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.	
 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.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the Clerk's O	
Date	Signature	
	Print Name	



CITY OF MADISON

	•	
Registr	ation Statement -	Common Council COMMITTEE
Please Print		PLEASE PRINT NAME CLEARLY
		PLEASE PRINT NAIME CLEARLY
		Name DAULD-ANDERSON
Agenda No.	_	Address 212 MADIAN AT
**************************************		Nowstown
Please check	one:	AND Please check:
Suppor	t	Do not wish to speak
Oppose		
	_	
Neither	Support Nor Op	pose
(If you answered "	you representing an orga no," STOP; you need not nt and go on to the next q	nization or a person other than yourself: Yes No complete the rest of this form. If you answered "yes," provide the name uestion.)
Name, address and	telephone number of eacl	n person or organization you are representing:
Are you being paid	for your representation?	☐ Yes ☐ No
Are you appearing a (If you answered "r	as part of your other paid no," STOP; you need not	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
question.)		
Speaking Limits:	Public Hearing (Com	non Council)5 minutes
- Lawrence Dumen.		3 minutes
	Other Items	3 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 answ this form. If	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.)
If you are b 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 t Room 103 of	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at fifther the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



CITY OF MADISON

Registration Statement	- Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name Address Address Address Address
Please check one:	AND Please check: 537//
Support	Do not wish to speak
OpposeNeither Support Nor Op	opose The Building 15 700 B1g.
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	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 not complete the rest of this form. If you answered "yes," go on to the next
	nmon Council)5 minutes

Are you an e	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	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, 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 t Room 103 of	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



CITY OF MADISON

Registra	ation Statement -	Common Cor COMMITTEE	uncil		
Please Print			RINT NAME CLE	1	. • • .
Agenda No	2		Patrick So. 3717 Danes Madison, u	s St.	
Please check	one:	AND	Please che	ck:	
Z Support	-appeal		Do no	t wish to spea	ık
OpposeNeither	Support Nor Opj	pose			
(If you answered "n of who you represen	you representing an organ no," STOP; you need not not and go on to the next que telephone number of each	complete the rest of tuestion.)	this form. If you ans	rwerea yes, provi	No de the name
Are you being paid	for your representation?			Yes 1	No
Are you appearing a (If you answered "n question.)	s part of your other paid on the state of your need not	duties for this person complete the rest of t	or organization? his form. If you ans		No n to the next
Speaking Limits:	Public Hearing (Communication Hearing	3 mi	inutes		

Are you an e	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, 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:	ring 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.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



CITY OF MADISON

Registra	tion Statement -	Common Cou	ıncil	
Please Print			RINT NAME CLEARLY	
Agenda No.	42	Name	Paul Term 837 Term Madison, WS	Place 5371
Please check	one:	AND	Please check:	
Support			Do not wish	to speak
Oppose				
Neither !	Support Nor Opp	pose		
(If you answered "no of who you represen	you representing an organg, "STOP; you need not to and go on to the next quelephone number of each	complete the rest of the uestion.)	nis form. If you answered "ye	
		·		
Are you being paid f	or your representation?		Ye	s No
Are you appearing as (If you answered "no question.)	s part of your other paid on, "STOP; you need not	duties for this person of complete the rest of the	or organization?	
Speaking Limits:	Public Hearing (Community Information Hearing Other Items	3 mir	nutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form. If	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 both	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 t Room 103 of	to 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



CITY OF MADISON

Registration Statement	- Common Co	uncil		W.O.
Please Print	PLEASE F	PRINT NAME CLE	EARLY	•
Agenda No. 2	Name - Address	BRYAN RICE I BENNETT CT MADISAN I WI	-	
Please check one:	AND	Please che	ck:	
Support		Do no	t wish to speak	(
Oppose				
Neither Support Nor O	ppose			
At this meeting are you representing an or (If you answered "no," STOP; you need to of who you represent and go on to the next. Name, address and telephone number of each	not complete the rest of t t question.)	this form. If you ans	wered "yes," provide	
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 n question.)	id duties for this person not complete the rest of t	or organization? his form. If you ans	☐ Yes ☐ No wered "yes," go on to	
Information Hearin	ommon Council)5 mi .g3 mi	inutes		

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 this form. If yo	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.	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 he City-County Building, Madison, for more information.)
Date	Signature
Date	Print Name



CITY OF MADISON

Registra	tion Statement	Common Cou	uncil		
Please Print			RINT NAME CLEA	RLY	
Agenda No.	2	Name	indsoy fir Bennett C ladison, U	igle it	
Please check	one:	AND	Please check	:	
Support	_		Do not v	wish to speak	
Oppose					
Neither !	Support Nor Opp	ose			
(If you answered "no of who you represen	you representing an organ o, "STOP; you need not a tand go on to the next quelephone number of each	complete the rest of the strain.)	his form. If you answe		ame
	-				
Are you being paid f	or your representation?			Yes No	
Are you appearing as (If you answered "no question.)	s part of your other paid of o, "STOP; you need not o	luties for this person complete the rest of the	or organization? his form. If you answe	☐ Yes ☐ No erred "yes," go on to the r	rext
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3 mi	nutes		

	lected 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, 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:	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	Signature
	Print Name

Date: 8-6-20/3



DO NOT WISH TO SPEAK FORM

Registration	Statement - C		incil		
	CC	DMMITTEE .			
Please Print		• .			• •
		PLEASE PI	RINT NAME CLE		
		Name	tat Fo	orbes	>
Agenda No		Address	3/12 /		. 1
		//	Yadiso		53711
			fara, se		
Please check one:		AND	Please chec	k:	
⊠ Support H	ne appeal	. *	Do not	t wish to s	peak
Oppose					
Neither Sun	port Nor Oppose	e			
	11				
At this meeting are you rep (If you answered "no," ST of who you represent and go Name, address and telephology and the state of the st	OP; you need not compgo on to the next question	olete the rest of the on.) son or organization	nis form. If you answ	vered "yes," p	□ No provide the name
Madisi	on WI	9 9 7 7 7			
Are you being paid for you	r representation?			Yes	⊠No
Are you appearing as part of (If you answered "no," ST question.)	of your other paid duties OP; you need not comp	s for this person of the state of the state of the rest of the state o	or organization? nis form. If you answ	☐ Yes vered "yes," §	No 30 on to the next
Info	olic Hearing (Common Cormation Hearinger Items	3 mir	nutes		

Are you an e	lected 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, 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:	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 i	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: 8-6-2013



DO NOT WISH TO SPEAK FORM

CITY OF MADISON

Registra	ntion Statement	Common Co	uncil		
		COMMITTEE			
Please Print					•
		PLEASE I	PRINT NAME CLI	_ :	
		Name	Edf		
Agenda No		Address	3112 14	Ton roe	e 5h.
			3112 M Madiso	in W/	53711
· ·				-,	
Please check	one:	AND	Please che	eck:	
X Support	the appea		Do no	ot wish to s	peak
Oppose	V. V			•	
	Commant Nam One	3050		•	
Neither	Support Nor Opp	JUSE			
(If you answered "n of who you represen	you representing an organge, "STOP; you need not at and go on to the next quelephone number of each	complete the rest of uestion.)	this form. If you ans	swerea yes, p	provide the name
		·			
Are you being paid t	for your representation?			Yes	☐ No
Are you appearing a (If you answered "n question.)	s part of your other paid on, "STOP; you need not	duties for this person complete the rest of	or organization? this form. If you and	☐ Yes swered "yes," §	□ No go on to the next
Speaking Limits:	Public Hearing (Comm				
1	Information Hearing Other Items	3 n	ninutes		•

Are you an ellother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
(If you answe this form. If y	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 beinthat:	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 he City-County Building, Madison, for more information.)
Date	Signature
	Print Name





Registrat	ion Statement -	Common C	<u>ouncil</u>		
		COMMITTEE			
Please Print		PLEASE	PRINT NAME CLE	ARLY	
			Patricia		
Agenda No	S SANTAI PROPERTY OF THE PROPE	Name _	2/11 /	54	
Agenda No.		Address _	KA 11-	w/53	5711
		<u>-</u>	Mad, sen		
Please check o		AND	Please che	ek:	
Support	the oppea		Do not	t wish to speak	
Oppose					
Neither S	upport Nor Op	nose			
			other than vourself	∏ Yes 🔀 No	
(If you answered "no	ou representing an orga " STOP; you need not and go on to the next q	t complete the rest of	of this form. If you answ	wered "yes," provide th	ne name
Name, address and te	lephone number of eacl	h person or organiz	ation you are represent	ing:	
				1.e	
Are you being paid fo	r your representation?			Yes No	
Are you appearing as (If you answered "no, question.)	part of your other paid " STOP; you need not	duties for this person complete the rest	on or organization? of this form. If you ans	Yes No wered "yes," go on to t	he next
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?
(If you answ this form. If	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.)
If you are b 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 o	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: 8 7 13

DO NOT WISH TO SPEAK FORM

Registration Statement -	Common Council
_	COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
	Name Barbara Gerloff
Agenda No	Address 315 Westmorland Blud.
	Madlson WI 53705
Please check one:	AND Please check:
Support the Appeal	Do not wish to speak
Oppose	
Neither Support Nor Op	pose
of who you represent and go on to the next q	t complete the rest of this form. If you answered "yes," provide the name
1	
· · · · · · · · · · · · · · · · · · ·	
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.)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing.	mon Council)5 minutes

Are you an other govern	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
(If you answ this form. If	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.)
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.
(Please go Room 103 oj	to the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at fithe City-County Building, Madison, for more information.)
Date	Signature
	Print Name



CITY OF MADISON

Registration State	ement - Common Co	ouncil	
Please Print	PLEASE	PRINT NAME CLEARLY	
Agenda No.	NameAddress	657 KNECKENDO MADISON WES	n ocker -3711
Please check one:	AND	Please check:	
Support		Do not wish to spea	.k
Oppose			
Neither Support	Nor Oppose		
At this meeting are you represent (If you answered "no," STOP; yo of who you represent and go on to Name, address and telephone num	ou need not complete the rest of othe next question.)	tinis jorm. Ij you answerea yes, provid	.,0
· .			
Are you being paid for your repre			No
Are you appearing as part of your (If you answered "no," STOP; yo question.)	other paid duties for this person ou need not complete the rest of	n or organization?	No a to the next
Information	aring (Common Council)5 ron Hearing3 rons3 r	ninutes	· ·

	REGISTRATION STATEMENT - FACE 2				
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?				
(If you answe this form. If y	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 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.				
(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 Clerk's Office at the Clerk's office at the City-County Building, Madison, for more information.)				
Date	Signature Print Name Print Name Philip H. Olsey				



CITY OF MADISON

Registration Statement -	Common Council	
Please Print	PLEASE PRINT NAME CLEARLY	
Agenda No.	Name <u>SCOTT STODDARD</u> Address <u>5146 RATTON</u> DRIVE EIRCHBURK WI 537	
Please check one:	AND Please check:	
Support	Do not wish to spe	eak
Oppose		
Neither Support Nor Op	pose	
of who you represent and go on to the next q	t complete the rest of this form. If you answered "yes," pro	☑No wide 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.)	duties for this person or organization? Yes complete the rest of this form. If you answered "yes," go] No on to the next
Information Hearing	mon Council) 5 minutes 3 minutes 	

Are you an other gover	elected official or employee who is a mmental body?	appearing solely on behalf of your office or for your municipality or Yes No
(If you answ this form. Ij	wered "yes" to the question, STOP. Y f you answered "no" to the question, §	ou need not complete the rest of this form, except that you must sign 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 with the City Clerk.	a lobbyist, you or your principal must file an authorization
2.	Your principal is not permitted to City Clerk.	authorize you to lobby unless you are registered with the
3.	Your principal must file expense calendar year regardless of the am	e statements with the City Clerk for the remainder of the ount spent on lobbying.
(Please go Room 103 o	to the City Clerk's website <u>www.ci</u> f the City-County Building, Madison, _J	tyofmadison.com/clerk/index.html or go to the Clerk's Office at for more information.)
Date	Signature	e Sext Antoles
	Print Nar	



CITY OF MADISON

Registration Statement -**Common Council** Please Print PLEASE PRINT NAME CLEARLY Agenda No. Address Please check one: Please check: AND Support Do not wish to speak **Oppose** Neither Support Nor Oppose At this meeting are you representing an organization or a person other than yourself: Yes (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 Are you appearing as part of your other paid duties for this person or organization? Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Public Hearing (Common Council) 5 minutes Speaking Limits: 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 nental body?
(If you answe this form. If y	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 betthat:	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.
Room 103 of t.	the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at he City-County Building, Madison, for more information.)
Date	Signature Print Name



Registration St		ommon Cou	ıncil		
	CO	MMITTEE		•	
Please Print		PLEASE P	RINT NAME CI	LEARLY	·
Agenda No.		Name	Mara St 142 S.S. 53105	egoe	
Please check one:		AND	Please ch	eck:	
Support			Do n	ot wish to s	speak
Oppose		* ·			
Neither Suppor	rt Nor Oppose	;			
At this meeting are you represe (If you answered "no," STOP of who you represent and go of who you represent and go of Name, address and telephone in	; you need not comp in to the next question	lete the rest of the new the state of the new the state of the new the state of the	his form. If you ar	nswered "yes," _[No provide the name
					,
4.					
Are you being paid for your re	presentation?			Yes	☐ No
Are you appearing as part of you answered "no," STOP question.)	our other paid duties; you need not comp	for this person of the the the rest of the	or organization? nis form. If you ar	☐ Yes aswered "yes," ,	☐ No go on to the next
Informa	Hearing (Common Cation Hearingtiens	3 mir	nutes		

	REGISTRATION OF AT EMELY!	
Are you an electrother governmen	ted official or employee who is appearing solely on behalf of your office or for your municipal atal body?	ılity or
(If you answered this form. If you d	d "yes" to the question, STOP. You need not complete the rest of this form, except that you must answered "no" to the question, go on to the next question.)	st sign
If you are being that:	paid for your representation, or if your appearance is part of other paid duties, please be ac	dvised
	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.	
3. Ye	Your principal must file expense statements with the City Clerk for the remainder of the allendar year regardless of the amount spent on lobbying.	
(Please go to the Room 103 of the (ne City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Offi City-County Building, Madison, for more information.)	ice at
Date 86	Signature Manual Signature	
	Print Name ////////////////////////////////////	-



Registration Statement	t - Common Co	uncil	
_	COMMITTEE		
Please Print		DINT NABBE OF EADIV	
	PLEASE P	RINT NAME CLEARLY	
	Name	SANDRA E. SPARK	
Agenda No.	- Address	2720 gregory ST	
		V l l	
Please check one:	AND	Please check:	
Support		Do not wish to spea	ık
Oppose			
	mnoso		
Neither Support Nor O	ppose		
At this meeting are you representing an or (If you answered "no," STOP; you need to of who you represent and go on to the next Name, address and telephone number of e	not complete the rest of the question.)	his form. If you answered "yes," provi	•
Are you being paid for your representation	?	Yes 1	No
Are you appearing as part of your other pa (If you answered "no," STOP; you need nature question.)	id duties for this person on the complete the rest of the		No to the next
Information Hearin	g	nutes	

	REGISTRATION STATEMENT - FAGE 2				
Are you an e	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 answe this form. If y	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:	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.citvofmadison.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 \$	S/06/2013 Signature Print Name Savana E Stack				
	\cdot				



Registration Statement -	Common Cou	ıncil	
	COMMITTEE		
Please Print	DIFACED	RINT NAME CLEARL	v
	PLEASE PI	TINI NAIME CLEARL	
H 🔿	Name	J.GREVET	0 00
Agenda No. #	Address	50 Miahri	Lass.
	<u> </u>	HADICAN, W	153711
Please check one:	AND	Please check:	
Support		Do not wis	sh to speak
Oppose			
Neither Support Nor Op	nnose		•
Teither Support Nor Of	pose		
At this meeting are you representing an orgalist (If you answered "no," STOP; you need not of who you represent and go on to the next of	ot complete the rest of th	her than yourself: his form. If you answered	Yes No No "yes," provide the name
Name, address and telephone number of each	ch person or organization	n 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.)	I duties for this person of the complete the rest of the	or organization?	Yes No ''yes,'' go on to the next
Information Hearing	nmon Council)5 min 	nutes	

		REGISTRATION STATEMENT - PAGE 2
		ected official or employee who is appearing solely on behalf of your office or for your municipality of hental body?
(If you	u answei orm. If yo	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 that:	are bei	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.
(Pleas Room	e go to 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 _	81/1	Signature Signature
	/	Print Name



Registration	n Statement	Common Col	uncil		
Please Print		COMMITTEE DI EASE D	RINT NAME CLE	ARI Y	
Agenda No.		Name Address	Alice G.	revet nj Pass WL 537	-
Please check on	2:	AND	Please che	ck:	
Support	6500		Do no	t wish to spea	ık
Oppose					
Neither Su	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 condition of the next que	omplete the rest of t estion.)	his form. If you ans	wered "yes," provid	No de the name
			,		
,					
Are you being paid for y	our representation?			Yes A	No
Are you appearing as par (If you answered "no," I question.)	t of your other paid du STOP; you need not co	nties for this person omplete the rest of the	or organization? his form. If you ans	Yes Arwered "yes," go on	
I	ublic Hearing (Commonformation Hearing	3 mi	nutes		

Are you an e	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body? Yes No				
(If you answe this form. If y	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:	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.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)				
Date 8	Signature Drint Name MARCA GREVET				
/	Print Name Hile Grevel				



Date:	6	1/3
	7	

Registrati	on Statement	Common Co	uncil		
Please Print		COMMITTEE			
1 Touse 1 Time		PLEASE	PRINT NAME CLE	EARLY	
Agenda No		NameAddress	Karin Roi 4422 Son Madison	ise erset L	n 53)]/
Please check or	ne:	AND	Please che	eck:	
Support			Do no	ot wish to sp	eak
Oppose	the appeal		Ţ.		
Neither S	upport Nor Opj	pose			
(If you answered "no, of who you represent a	u representing an organ "STOP; you need not and go on to the next queephone number of each	complete the rest of uestion.)	this form. If you ans	swered "yes," pro	No povide the name
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	n or organization? [°] this form. If you and	hammad ham	No on to the next
Speaking Limits:	Public Hearing (Communication Hearing). Other Items	3 1	ninutes		

•	er governmental body?				ur municipality of
	red "yes" to the question, ou answered "no" to the		eed not complete the rest of this fon to the next question.)	orm, except i	that you must sign
If you are be that:	ing paid for your represe	entation, or if y	your appearance is part of other p	paid duties,	please be advised
1.	Before you engage in lowith the City Clerk.	obbying as a lo	obbyist, you or your principal mu	st file an aut	horization
2.	Your principal is not p City Clerk.	ermitted to au	thorize you to lobby unless you a	ire registere	d with the
3.	Your principal must fi calendar year regardless		tements with the City Clerk for t spent on lobbying.	the remain	der of the
(Please go to Room 103 of t	o the City Clerk's websi the City-County Building,	ite <u>www.cityof</u> Madison, for i	fmadison.com/clerk/index.html or more information.)	go to the	Clerk's Office at
Date	8/10/13	Signature Print Name	Kaven Rouce		



Registrati	on Statement	Common Col	uncil	,	
Please Print		· · ·	RINT NAME CL	EARLY	
Agenda No.		Name	Miriam 39 Kni	Nax	in oocker
Please check on	e:	AND	Please che	eck:	
Support			Do no	ot wish to	speak
Oppose					
Neither Su	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 nd go on to the next qu	complete the rest of t uestion.)	his form. If you an		provide the name
Are you being paid for	your representation?		٠	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 of the complete the rest of the	or organization? his form. If you and	☐ Yes swered "yes,"	No go on to the next
	Public Hearing (Comminformation Hearing Other Items	3 mi	nutes		

	REGISTRATION STATEMENT - PAGE 2
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 this form. If yo	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.	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 ti	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 8/6	Signature Marin Print Name Mission Warin



CITY OF MADISON

Registra	ation Statement -	Common Co	uncil		
Please Print		PLEASE P	RINT NAME CL	EARLY	
Agenda No	2	Name Address	2125 F	BAE Fax Ao	E
Please check	one:	AND	Please ch	eck:	
Support	· ·		Do n	ot wish to	speak
Oppose					
Neither	Support Nor Opp	pose			
(If you answered "n of who you represen	you representing an organ to," STOP; you need not to and go on to the next que telephone number of each	complete the rest of i uestion.)	this form. If you ar	iswered yes,	⊠ No provide the name
				· · · · · · · · · · · · · · · · · · ·	
Are you being paid	for your representation?			Yes	No
Are you appearing a (If you answered "n question.)	s part of your other paid on the state of your other paid on the state of the state	duties for this person complete the rest of t	or organization? This form. If you are	Yes Yes aswered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Comr Information Hearing	3 mi			

(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 answer this form. If yo	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)			
If you are being that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised			
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.			
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.			
(Please go to Room 103 of th	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ne City-County Building, Madison, for more information.)			
Date Slo	Signature fram Bre Print Name Fram Bre			



Registration Statement -		uncil	
	COMMITTEE		
Please Print	PLEASE I	PRINT NAME CLEARL	Υ
Agenda No.	Name Address	Brandi Fun	Yerbocker .
	<u> </u>	Madison	J- 1971
Please check one:	AND	Please check:	<i>,</i>
Support		Do not wis	sh to speak
Oppose			
Neither Support Nor Op	pose		
At this meeting are you representing an organism (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 of question.)	this form. If you answered	Yes No "yes," provide the name
ivalite, address and telephone number of ode	in person or organical	on you are represented	
		<u> </u>	
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 person t complete the rest of		Yes No No "yes," go on to the next
Information Hearing.	nmon Council)5 m 3 m	inutes	

Are you other go	an ele overnme	cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body? Yes No
(If you d this form	answere n. If you	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 a that:	re bein	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.
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.
Please Room 10	go to 1 3 of the	the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at e City-County Building, Madison, for more information.)
Date	BO	Signature Signature



Date: _______

DO NOT WISH TO SPEAK FORM

Registration Statement -	Common Co	ouncil	
Please Print	PLEASE I	PRINT NAME CLEARLY	
Agenda No.	Name Address	AMU Williamson 653 Knickerbock Madison 33711	ier st
Please check one:	AND	Please check:	
Support	Beginners contract and account of the contract	Do not 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 luestion.)	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 of you answered "no," STOP; you need not question.)	duties for this person complete the rest of t	or organization? Yes No this form. If you answered "yes," go on to	the next
Speaking Limits: Public Hearing (Comm Information Hearing Other Items	3 mi	inutes	
	· · · · · · · · · · · · · · · · · · ·	the state of the s	_

Are you an e	lected 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, 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:	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	Signature Print Name AMM AMM AMM AMM AMM AMM AMM A



Date:	
-------	--

CITY OF MADISON

Common Council Registration Statement -COMMITTEE Please Print PLEASE PRINT NAME CLEARLY Agenda No. Please check: Please check one: AND Do not wish to speak Support **Oppose Neither Support Nor Oppose** At this meeting are you representing an organization or a person other than yourself: Yes (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: No. Yes Are you being paid for your representation? ☐ Yes Are you appearing as part of your other paid duties for this person or organization? (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Public Hearing (Common Council)5 minutes Speaking Limits: Information Hearing......3 minutes

	tre you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?				
(If you this fo	ı answer rm. İf yo	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 that:	are bei	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.			
(Pleas Room	e go to 103 of ti	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:	81/
-------	-----

Registra	tion Statement -	Common Cou	uncil	######################################
Please Print			RINT NAME CLEAR	u v
Agenda No	2		net Salbeng 46 knicker	
Please check of Support	one:	AND	Please check: Do not w	rish to speak
Oppose			<u> </u>	-
	Support Nor Op	pose		
(If you answered "no of who you represent	you representing an organ b, " STOP; you need not t and go on to the next que elephone number of each	complete the rest of tuestion.)	his form. If you answere	☐ Yes ☐ No ed "yes," provide the name
			,	
Are you being paid for	or your representation?		i	Yes No
	part of your other paid o, "STOP; you need not			Yes No No ed "yes," go on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 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?				
	" to the question, STOP. You need not complete the rest of this form, except that you must sign ered "no" to the question, go on to the next question.)			
If you are being paid that:	for your representation, or if your appearance is part of other paid duties, please be advised			
	you engage in lobbying as a lobbyist, you or your principal must file an authorization le City Clerk.			
2. Your p	brincipal is not permitted to authorize you to lobby unless you are registered with the lerk.			
	orincipal must file expense statements with the City Clerk for the remainder of the arr year regardless of the amount spent on lobbying.			
Please go to the Ci Room 103 of the City-	ty Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at County Building, Madison, for more information.)			
Date 8/6/13	Signature Brist Name Brek o Salberg			
<u> </u>	Print Name Bret O Solbery			



Date:	图/6/1-3

Registration Statement	Common Council COMMITTEE
Please Print	
	PLEASE PRINT NAME CLEARLY
Agenda No	Name Address Address Address Address
Please check one:	AND Please check:
∑ Support	Do not 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 quantity.	complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	n 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.)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing.	mon Council)5 minutes

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?
	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:	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	Signature Print Name Arthurth Timer



Date:	8	6	13

Registrat	ion Statement -	COMMITTEE	ouncil		
Please Print		PLEASE	PRINT NAME CL	EARLY	
Agenda No)	Name _ Address _	Karen E 649 Crar Madiso	iday St	3711
Please check o	ne:	AND	Please cho	eck:	
Support			Do no	ot wish to s	peak
Oppose					
Neither S	Support Nor Op	pose			
(If you answered "no of who you represent	ou representing an org	ot complete the rest o question.)	f this form. If you an	swered "yes," [☑No provide the name
			, e		
Are you being paid for	or your representation?			Yes	□ No
Are you appearing as (If you answered "no question.)	part of your other paid," STOP; you need no	d duties for this person of complete the rest of	on or organization? If this form. If you an	Yes Yes aswered "yes," {	No go on to the next
Speaking Limits:	Information Hearing	mmon Council)5 33	minutes		

		ected official or emplonental body?	yee who is appea	ring solely on behalf o	of your office or for your municipality or Yes No	
(If yoı this fo	ı answei rm. If ye	red "yes" to the questi ou answered "no" to ti	on, STOP. You ne he question, go on	eed not complete the re to the next question.)	est of this form, except that you must sign	
If you that:	are bei	ing paid for your repre	esentation, or if y	our appearance is par	t of other paid duties, please be advised	
	1.	Before you engage in with the City Clerk.	n lobbying as a lo	bbyist, you or your pr	incipal must file an authorization	
	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
	3.	Your principal must calendar year regardl			Clerk for the remainder of the	
(Pleas Room	e go to 103 of t	the City Clerk's we he City-County Buildir	bsite <u>www.cityofr</u> 1g, Madison, for n	nadison.com/clerk/ind nore information.)	ex.html or go to the Clerk's Office at	
Date _	8	613	Signature	Haren	amery	
			Print Name	kaven	Emer	



		• •				
Registra	tion Statement	COMMITTEE	<u>ouncil</u>			
Please Print						
r lease r mit		PLEASE	PRINT NAME CL	EARLY		
		Name _	LISA FELL	algez		
Agenda No	2	Address _	3106 Nott	maham	WO)	
			Madison, L	UL 5371	<u> </u>	
Please check	one:	AND	Please che	eck:		
Support			Do no	ot wish to	speak	
Oppose						
Neither !	Support Nor Opj	pose				
(If you answered "no of who you represen	you representing an organg, "STOP; you need not and go on to the next quelephone number of each	complete the rest o uestion.)	f this form. If you are		☐ No Provide the no	<i>тте</i>
,						
Are you being paid f	or your representation?			Yes	No.	
Are you appearing as (If you answered "no question.)	s part of your other paid on, "STOP; you need not	duties for this perso complete the rest o	on or organization? If this form. If you an	☐ Yes swered "yes,'	No go on to the n	iext
Speaking Limits:	Public Hearing (Communication Information Hearing Other Items	3	minutes			

	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 answe this form. If y	(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 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 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 _ 8/6/	Signature Print Name LSA FERRADE						



CITY OF MADISON

Registration		Common Cou	ncil	·	
Please Print		PLEASE PF	RINT NAME CLEA	ARLY	
Agenda No		Name	Mark 1 632 Sp	reBa Prajue	Stree t
Please check one:		AND	Please chec	k:	
Support Support		,	Do not	wish to s	peak
Oppose	•				
Neither Sup	port Nor Oppo	se			
At this meeting are you re (If you answered "no," ST of who you represent and Name, address and telephone	FOP; you need not corgo on to the next quest	nplete the rest of the tion.)	us jorm. Ij you answ		No provide the name
·. ·	-				
Are you being paid for you				Yes	∐No
Are you appearing as part (If you answered "no," ST question.)	of your other paid dut TOP; you need not con	ies for this person on the second of the second of the rest of the second of the secon	or organization? his form. If you answ	Yes Yes," g	∐ No go on to the next
Inf	olic Hearing (Commor ormation Hearing ner Items	3 mii	nutes		

(SEE BACK)

Are you an other govern	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
(If you answ this form. If	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.)
If you are b 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 1 Room 103 of	to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Registration Statement	- Common Cour	ncil	
	COMMITTEE	•	
Please Print			
	PLEASE PRI	INT NAME CLEARLY	8.
<i>(</i>)	Name EL	SPETY MUN	JE ALL
Agenda No.	Address	3518 WYOT	A XVE
		MANICE	61 52:
	·	· viji)(Sø	
Please check one:	AND	Please check:	
Support		Do not wish to	speak
Oppose			
Noithan Support Nor O	nnoso		
Neither Support Nor O	ppose		
At this meeting are you representing an organism (If you answered "no," STOP; you need no f who you represent and go on to the next	not complete the rest of this question.)	s form. If you answered "yes,"	No provide the name
Name, address and telephone number of ea	ich person or organization	you are representing:	
Are you being paid for your representation	?	Yes	□ No
Are you appearing as part of your other pai (If you answered "no," STOP; you need no question.)	d duties for this person or o ot complete the rest of this	organization?	No go on to the next
Information Hearing	mmon Council)5 minut g3 minut 3 minut	tes	

	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, 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, 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



Registration Statement	Common Col	uncil		
Please Print	PLEASE P	RINT NAME CLE	ARLY	
Agenda No.	Name	Janet Z BYM TE Madison	enther rry Pla	ace 3711
Please check one:	AND	Please chec	ek:	
Support		Do not	t wish to s	peak
Oppose				
Neither Support Nor Opp	ose			
At this meeting are you representing an organi (If you answered "no," STOP; you need not confirm of who you represent and go on to the next que Name, address and telephone number of each page 1.	complete the rest of t estion.)	his form. If you ansv		No provide the name
Are you being paid for your representation?			Yes	⊠ No
Are you appearing as part of your other paid du (If you answered "no," STOP; you need not coquestion.)	uties for this person omplete the rest of t	or organization? his form. If you ansv	Yes Yes," g	No no on to the next
Speaking Limits: Public Hearing (Commo Information Hearing Other Items	3 mi	nutes		

re you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ner governmental body?	Are you an other govern
you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign s form. If you answered "no" to the question, go on to the next question.)	(If you answ this form. If
you are being paid for your representation, or if your appearance is part of other paid duties, please be advised at:	If you are b that:
 Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk. 	1.
 Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk. 	2.
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.	3.
ease go to the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at om 103 of the City-County Building, Madison, for more information.)	(Please go Room 103 oj
e Signature	Date
Print Name	



CITY OF MADISON

	•	• •			
Registr	ation Statement - ַ	Common Co	uncil		
Please Print		PLEASE F	PRINT NAME CLE	ARLY	
Agenda No	(30934)	Name Address	1415 VI	lar our	
Please check	one:	AND	Please chec	ek:	
Suppor	t the appeal		Do not	wish to speak	
Oppose			,		
Neither	Support Nor Opp	oose			
(If you answered "r of who you represer	you representing an organ no," STOP; you need not nt and go on to the next qu telephone number of each	complete the rest of the sest of the sestion.)	this form. If you answ		name
		·	·		
Are you being paid	for your representation?		.	☐ Yes ☐ No	
Are you appearing a If you answered "n question.)	s part of your other paid of o," STOP; you need not o	luties for this person complete the rest of t	or organization? his form. If you answ	Yes No pered "yes," go on to th	e next
Speaking Limits:	Public Hearing (Comm Information Hearing	3 mi			

(SEE BACK)

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? Yes No
(If you answe this form. If y	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 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.
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



CITY OF MADISON

Registration Statement -	Common Council COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
	Name ERIC STREICHER
Agenda No. #7_	Address 2804 GREGORY ST
	MADISON
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
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	complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	n person or organization you are representing:
See aboue	
608-234-2762	
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.)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mon Council)5 minutes

(SEE BACK)

Are you an other gover	elected official or employee who is appearing solely on behalf of your office or for your municipality or municipality or municipality or leave the solely of the solely o
(If you answ this form. I	wered "yes" to the question, STOP. 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 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.
(Please go Room 103 o	to the City Clerk's website <u>www.citvofmadison.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



Registration Statement -	Common Cou	ıncil
	COMMITTEE	
Please Print	PLEASE PI	RINT NAME CLEARLY
Agenda No.	Name () Address ()	narlene Shermon 15 Knickerbocker St 53711
Please check one:	AND	Please check:
Support		Do not 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	ot complete the rest of th	her than yourself: Yes No his form. If you answered "yes," provide the name
Name, address and telephone number of eac	ch person or organizatio	n 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.)	duties for this person of the complete the rest of the	or organization? Yes No No No Yes," go on to the next
Speaking Limits: Public Hearing (Com Information Hearing.	nmon Council)5 mir 3 mir 3 mir	nutes

Are yo	ou an ele governn	ected official or employ nental body?	ee who is appea	uring solely on behalf of your office or for your municipality or Yes No
(If you this fo	ı answer rm. If yo	red "yes" to the question ou answered "no" to the	n, STOP. You n question, go or	eed not complete the rest of this form, except that you must sign to the next question.)
If you that:	are bei	ng paid for your repres	entation, or if y	our appearance is part of other paid duties, please be advised
	1.	Before you engage in liwith the City Clerk.	lobbying as a lo	bbyist, you or your principal must file an authorization
	2.	Your principal is not part City Clerk.	permitted to aut	horize you to lobby unless you are registered with the
	3.	Your principal must fi calendar year regardles	ile expense stars of the amount	spent on lobbying.
Please Room	e go to 103 of th	the City Clerk's webs ne City-County Building,	Madison, for n	
Date	X-10	-13	Signature	Charlene Shermon
_	<u>) </u>		Print Name	Charlene Shermon



Registra	ation Statement		uncil		
Please Print		COMMITTEE		•	
		PLEASE P	RINT NAME CLE	EARLY	
g		Name	Janet	Lac	<u> </u>
Agenda No	<u> </u>	Address	2025	Jeffe	Urson 1
			Mady 8-	n \	1, 53
Please check	one:	AND	Please che	eck:	
Support	: appeal		Do no	t wish to s	peak
Oppose	ē .				
Neither	Support Nor Opp	ose			
(If you answered "n of who you represen	you representing an organion, "STOP; you need not out and go on to the next quality and go on the next quality	complete the rest of the stitus of the complete the rest of the stitus of the complete the stitus of	his form. If you ans		No provide the name
					· · ·
· .					
Are you being paid f	or your representation?			Yes	No
Are you appearing as (If you answered "no question.)	s part of your other paid do	uties for this person of the complete the rest of the	or organization? nis form. If you ans	☐ Yes wered "yes," g	No o on to the next
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3 mir	nutes		

	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, 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, 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.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



Date:	8/	
	/	

Registration Statement -	Common Council COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name William Cand Address 804 Lewis Ct Madison DT 537
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor Op	ppose
of who you represent and go on to the next	ot complete the rest 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 pai (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 g3 minutes3 minutes

	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, 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 ar	e bein	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,	•	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		Signature				
		Print Name				



CITY OF MADISON

Registr	ation Statement -	Common Co	uncil		
Please Print				FADIV	
		PLEASE P	PRINT NAME CL	EARLY	
Agenda No	Zusainen	Name	Linda 1 BOY Lei Madison	Land MS C W S3	f 711
Please check	one:	AND	Please che	eck:	
Support	t		Do no	ot wish to	speak
Oppose					
Neither	Support Nor Op	pose			
(If you answered "r of who you represer	you representing an organo, "STOP; you need not at and go on to the next quelephone number of each	complete the rest of tuestion.)	this form. If you ans		MNO provide the name
·	X.				
Are you being paid t	for your representation?			Yes	□No
Are you appearing a (If you answered "n question.)	s part of your other paid on, "STOP; you need not	duties for this person complete the rest of t	or organization? his form. If you ans	☐ Yes wered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 mi	nutes		

(SEE BACK)

Are you an e	lected official or employee who is appearing solely on behalf of your office or for your municipality or nental 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 <u>www.citvofmadison.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: Aug 6,2013

DO NOT WISH TO SPEAK FORM

Registration Statement	- Common Council
Please Print	
	PLEASE PRINT NAME CLEARLY
Agenda No	Name Maria Yelle Address 641 Knickerbocker St. Madison, WI 53711
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor O	ppose
(If you answered "no," STOP; you need to of who you represent and go on to the next	rganization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide the name it question.) such person or organization you are representing:
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 a 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 ng

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?		
	pered "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 t	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 f the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Date: 6 A V 6 13

DO NOT WISH TO SPEAK FORM

Registration Statement -	Common Co	uncil
Please Print		PRINT NAME CLEARLY
Agenda No.	Name	BRUCE GARNES 3518 WYOTA
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose		
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 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 not question.)		n or organization? Yes No this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Com Information Hearing. Other Items	3 n	ninutes

		cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body? Yes No
(If you a this form	inswere n. If you	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	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.
2	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 e City-County Building, Madison, for more information.)
Date	6	AV6 13 Signature Print Name BRIGE PORTRER



Date:	
-------	--

Registration Stateme	
	COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No	Name Address Madison, WI 537K
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support No	or Oppose
(If you answered "no," STOP ; you not of who you represent and go on to the	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 e next question.) r of each person or organization you are representing:
Are you being paid for your represent Are you appearing as part of your oth (If you answered "no," STOP; you requestion.)	ntation? Yes No The paid duties for this person or organization? Yes No The paid duties for this person or organization? Yes No The paid duties for this person or organization? Yes, "go on to the next
Information F	leg (Common Council)5 minutes 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 this for	answere m. If you	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 that:	are 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.			
(Please Room 1	go to 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 _	8/6	Signature Julie H. Dahl Print Name Julie H. Dahl			



Date:	
-------	--

Registration Statement -	Common Col	uncil
Please Print Agenda No		RINT NAME CLEARLY SAUE MARKE OSZ KOLKERBOCKE
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose Neither Support Nor Op 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	anization or a person o	ther than yourself: \ \ Yes \ No this form. If you answered "yes," provide the name
Name, address and telephone number of each	ch person or organizati	on 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.)	I duties for this person of complete the rest of	or organization? Yes No this form. If you answered "yes," go on to the next
Information Hearing	nmon Council)5 m 53 m 3 m	inutes

		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental 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 that:	are bei	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.
(Pleas Room	e go to 103 of ti	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:	- Annual Control of the Control of t
-------	--

CITY OF MADISON

Registrati	on Statement -	COMMITTEE	ouncil		·
Please Print		PLEASE	PRINT NAME CL	EARLY	
Agenda No		Name Address	AMY Ot 652 Kg Madison	to ric <i>Rabboc</i> k w1	er St
Please check or	ie:	AND	Please che	eck:	
Support			Do no	ot wish to speal	k
Oppose					
Neither S	upport Nor Op	ppose			
At this meeting are yo (If you answered "no, of who you represent of Name, address and tele	" STOP; you need no and go on to the next	ot complete the rest question.)	of this form. If you an.		/
Are you being paid for	your representation	?		Yes N	No
Are you appearing as J (If you answered "no, question.)	part of your other pain "STOP; you need no	d duties for this person to complete the rest	son or organization? of this form. If you an		No to the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items	g3	3 minutes		

(SEE BACK)

	re you an elected official or employee who is appearing solely on behalf of your office or for your municipality or her governmental 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.)				
If you are b 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 f the City-County Building, Madison, for more information.)				
Date	Signature				
	Print Name				



Date:	
-------	--

Registration Statement -	COMMITTEE	ouncil	
Please Print	PLEASE	PRINT NAME CLEARLY	
Agenda No.		JOSEPH CONTI 645 CRANDALL ST MADISON, WI S3711	
Please check one:	AND	Please check:	
Support Oppose		Do not wish to speak	
☐ 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 o vuestion.)	of this form. If you answered "yes," provide the	e 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.)	duties for this person the complete the rest of	on or organization?	he next
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? Yes No
	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.)
If you are b 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 o _j	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: 8/6/2013

DO NOT WISH TO SPEAK FORM

Registration State	ment - Commo	on Council	
Please Print	COMMITTEE		
	PLE	ASE PRINT NAME CLEA	RLY
	Name		
Agenda No.	——— Addr	ress 641.	KNICKENDOCKEN ST
		Medis	n 41 53711
Please check one:	AND	Please check	ζ:
Support		Do not v	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 the the next question.)	rest of this form. If you answe	
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.)			Yes No No red "yes," go on to the next
Information	ing (Common Council) . Hearing	3 minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
(If you ans this form. Į	wered "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 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.
(Please go Room 103 (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	Signature
	Print Name



Date:	
-------	--

Registration Statement	Common Council COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. #2	Name PETER PATAU Address 869 TERRY PL
Please check one:	AND Please check:
Support APPEAL	Do not wish to speak
120ppose	
Neither Support Nor O	ppose
(If you answered "no," STOP; you need not of who you represent and go on to the next	ganization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide the name question.) ach person or organization you are representing:
NETLEHBORHOD AWFUL	DEAL - DOESN'T BENEFIT D. TOO BIG. PARKING
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 n 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	mmon Council)5 minutes g3 minutes3 minutes

	elected official or emplo mental body?	yee who is appeari	ng solely on behalf of your office or for your municipality of Yes No	
	ered "yes" to the questi you answered "no" to th		d not complete the rest of this form, except that you must sign o the next question.)	
If you are be that:	eing paid for your repre	esentation, or if you	ur appearance is part of other paid duties, please be advised	
1.	Before you engage in with the City Clerk.	ı lobbying as a lobl	byist, you or your principal must file an authorization	
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	Your principal must calendar year regardl		ments with the City Clerk for the remainder of the pent on lobbying.	
(Please go t Room 103 of	o the City Clerk's we the City-County Buildir	bsite <u>www.cityofma</u> 1g, Madison, for mo	adison.com/clerk/index.html or go to the Clerk's Office at ore information.)	
Date 8	106/13	Signature	PETER PATALL	
-	1	Print Name	PETER PATALL	



Registration Sta	tement - Common Cou	uncil
Please Print		RINT NAME CLEARLY
Agenda No. <u>#2</u>	NameAddress	Trudi V. Patau 869 Terry Place Madison 537/1
Please check one:	AND	Please check:
Support appe	eal	Do not wish to speak
Oppose		
Neither Support	Nor Oppose	
(If you answered "no," STOP; of who you represent and go on Name, address and telephone m	to the next question.) umber of each person or organizati	this form. If you answered "yes," provide the name ion you are representing:
1 Support	the appeal to K	nodify the project
	·	
Are you being paid for your rep	resentation?	☐ Yes No
Are you appearing as part of yo (If you answered "no," STOP; question.)	ar other paid duties for this person you need not complete the rest of t	or organization? Yes No No this form. If you answered "yes," go on to the nex
Informati	earing (Common Council)5 m ion Hearing	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 this form. If yo	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 being that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised			
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.			
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying.			
(Please go to 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 Av66,2013 Signature Trudi V. Patar Print Name Trudi V. Patar				



Date:	8	6	-	3	
		6	£		

Registration Statement	COMMITTEE	ouncil	Walter the Control of		
Please Print	PLEASE	PRINT NA	AME CLEA	ARLY	
Agenda No				LAWN	AUE.
Please check one:	AND	Plea	ase chec	ek:	
Support		\geq	Do not	wish to	speak
Oppose					
Neither Support Nor Opp	ose				
L Please read aloud	9- 1- p.				
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 qu	complete the rest	on other than of this form.	yourself: <i>If you answ</i>	☐ Yes vered "yes,"	No provide the name
Name, address and telephone number of each	person or organiz	zation you ar	e representi	ing:	
7 I SUPPORT THE APPEAL	. WERE	(T NOT	FOR	THE AS	NOMALY OF
ASSA THE BUNGALOW'S	ZONING,	THIS	PROJE	a wo	LLD
NOT BE ABLE TO E					
Are you being paid for your representation?	AS IT DO	うどろ		Yes	☐ No
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not a question.)	luties for this pers complete the rest	son or organi of this form.	zation? <i>If you ans</i> v	☐ Yes wered "yes,'	☐ No ' go on to the next
Speaking Limits: Public Hearing (Comn Information Hearing Other Items		3 minutes			

	n elected official or employee who is appearing solely on behalf of your office or for your municipality or rnmental body?
	wered "yes" to the question, STOP. 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 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	Signature
	Print Name



DO	NOT	WISH	TO	SPEAK	FORM

CITY OF MADISON

Registration Statement - Common Council
COMMITTEE

Please Print

PLEASE PRINT NAME CLEARLY

Name Beth Rhode hame f

Address 6221 N. Highlands Ave

Madison W 53705

Please check one:

AND Please check:

Do not wish to speak

Depose
Neither Support Nor Oppose

The Wave a Shop

At Knicker bocker Place,

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?

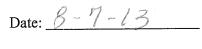
Yes N

Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Speaking Limits:

(SEE BACK)

	ALGOTATION OF A LINEAR TAGE 2
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, 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 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 he City-County Building, Madison, for more information.)
Date	Signature E Modeline Print Name Elizabeth Rhodehamel





Registration Statement -	Common Co	ouncil
Please Print		PRINT NAME CLEARLY
Agenda No. # 2	Name £	-vanny Ingebritson 516 Wisconsin Ave#1 Madison
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose		
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 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 paid (If you answered "no," STOP; you need no question.)	d duties for this perso ot complete the rest o	on or organization? Yes No No of this form. If you answered "yes," go on to the next
Information Hearing	mmon Council)5 1 g3 1	minutes

Are you an elected of other governmental	official or employee who is appearing solely on behalf of your office body?	or for your municipality or Yes No
	ves" to the question, STOP. You need not complete the rest of this form swered "no" to the question, go on to the next question.)	, except that you must sign
If you are being paithat:	id for your representation, or if your appearance is part of other paid	l duties, please be advised
	ore you engage in lobbying as a lobbyist, you or your principal must find the City Clerk.	ile an authorization
	or principal is not permitted to authorize you to lobby unless you are Clerk.	registered with the
	or principal must file expense statements with the City Clerk for the ondar year regardless of the amount spent on lobbying.	e remainder of the
	City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go ty-County Building, Madison, for more information.)	to the Clerk's Office at
Date	Signature	
	Print Name	



Date:	
-------	--

Registration	on Statement	Common Co	uncil	
Please Print Agenda No.	2	PLEASE I Name Address	PRINT NAME CLE avla Bighai Leleo knickest Madis ou	ARLY n ocker wi
Please check on	e:	AND	Please che	ck:
Support			Do no	t wish to speak
Oppose				
Neither Su	ipport Nor Opp	oose		
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 qu	complete the rest of uestion.)	this form. If you ans	wered "yes," provide 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 of STOP; you need not	duties for this perso complete the rest of	n or organization? Tthis form. If you ans	Yes No wered "yes," go on to the next
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3 r	ninutes	

Are you an e	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, 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 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



Date:	
Date:	VIII ON THE STATE OF THE STATE

CITY OF MADISON

Registration Statement -	Common Council COMMITTEE
Please Print	
	PLEASE PRINT NAME CLEARLY
7	Name JAMES BIGHAM Address 660 Kniczubodz St
Agenda No.	
	<u>us</u>
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor Opp	nose
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 this form. If you answered "yes," provide the name uestion.)
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.)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	non Council)5 minutes 3 minutes 3 minutes

(SEE BACK)

	lected 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, 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, 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 1 Room 103 of	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



Registrat	ion Statement - ₋	COMMITTEE	ouncil		
Please Print		PI FASF	PRINT NAME CLE	EARLY	
		•			
	2	Name	LAVE L	MERIAN	
Agenda No		Address _	608 Knic	kerbocker St.	<u>. </u>
	·			53711	
Please check o	ne:	AND	Please che	ck:	
Support	(oppose the pas propose	project)	Do no	t wish to speak	
Oppose					
Neither S	Support Nor Op	pose			
(If you answered "no of who you represent	ou representing an organ, "STOP; you need not and go on to the next question of each	complete the rest of uestion.)	of this form. If you ans	☐ Yes ☑ No wered "yes," provide the nam	ne
		,			
Are you being paid for	or your representation?			Yes No	
Are you appearing as (If you answered "no question.)	part of your other paid," STOP; you need not	duties for this perso	on or organization? of this form. If you ans	Yes No No wered "yes," go on to the ne	xt
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3	minutes		

	n elected official or employee who is appearing solely on behalf of your office or for your municipality or rnmental body?
	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign If you answered "no" to the question, go on to the next question.)
If you are 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	Signature
	Print Name



Registrati	on Statement -	Common Committee	ouncil		
Please Print		PLEASE	PRINT NAME CLE	ARLY	
Agenda No		NameAddress	Teri Casa 608 Enicke Madison, L	ady sbockers)I 53711	t.
Please check or	ne:	AND	Please che	ck:	
Support		poper years a second as a second and a second as a	Do no	t wish to spea	ak
Oppose					
Neither S	upport Nor Op	pose			
At this meeting are yo (If you answered "no, of who you represent of Name, address and tel	" STOP; you need no and go on to the next of	ot complete the rest of question.)	f this form. If you ans	wered "yes," provi	No ide the name
	See Line Annual Control of the Contr				
Are you being paid for Are you appearing as j	part of your other paid	d duties for this perso	n or organization?	☐ Yes ☐	No No
(If you answered "no, question.)	" STOP; you need no	ot complete the rest o	f this form. If you ans	wered "yes," go o	n to the next
Speaking Limits:	Information Hearing	mmon Council)5 g3	minutes		

	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body? Yes No
	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 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



Date:	8	1	1	-	18	

Registrat	ion Statement -	Common Co	uncil		
Please Print			PRINT NAME CLEA	RLY	
Agenda No		Name Address	DUB SW1	rinen W Cakeside: 537	15
Please check o	ne:	AND	Please checl	«:	
Support			Do not	wish to speak	
Oppose					
Neither S	Support Nor Op	pose			
(If you answered "no of who you represent	and go on to the next q	t complete the rest of nuestion.)	other than yourself: I this form. If you answe tion you are representing		name
				,	
Are you being paid for	or your representation?			☐ Yes ☐ No	
Are you appearing as (If you answered "no question.)	part of your other paid," STOP; you need not	duties for this perso t complete the rest of	n or organization? f this form. If you answ	Yes No No ered "yes," go on to th	ne next
Speaking Limits:	Public Hearing (Com Information Hearing) Other Items	3 1	minutes		

		cted official or employee ental body?	who is appeari	ng solely on be	chalf of you	r office or	r for you Yes	r municipality or
(If you this for	answere m. If yo	ed "yes" to the question, we answered "no" to the q	STOP. You nee uestion, go on t	d not complete to the next quest	the rest of i tion.)	this form,	except th	aat you must sign
If you that:	are beir	ng paid for your represen	tation, or if yo	ur appearance	is part of or	ther 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.							orization
	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 Room 1	go to 103 of th	the City Clerk's websit ne City-County Building, I	e <u>www.cityofm</u> Madison, for mo	adison.com/clei ore information	rk/index.htm	<u>nl</u> or go	to the C	Clerk's Office at
Date _	8 2 "	7-13	Signature	200			- Aller San Control of the Control o	7
			Print Name	D	EB	SUT	INE	<u>- N</u>



Date: 8 4 2013

DO NOT WISH TO SPEAK FORM

Registrati	on Statement -	COMMITTEE	ouncii.		
Please Print		PLEASE	PRINT NAME CLE	EARLY	je.
Agenda No		Name _ Address _	Kim Ver 55/7 Li Madism	geront ale Men	dota D 53705
Please check or	ne:	AND	Please che	eck:	
Support	the appen	l j	Do no	t wish to spea	ak
Oppose Oppose					
Neither S	upport Nor Op	pose			
At this meeting are you (If you answered "no, of who you represent to Name, address and tel	" STOP; you need no and go on to the next o	t complete the rest (question.)	of this form. If you and		No ide the name
Are you being paid fo				Yes	No
Are you appearing as (If you answered "no, question.)	part of your other paid " STOP; you need no	I duties for this pers t complete the rest	on or organization? of this form. If you an		No on to the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items	3	minutes		

		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, 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 that:	are bei	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.						
(Pleas Room	se go to 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	8/4	56/13 Signature Stim Jergersty						
		Print Name // // // // Print Name						



Date:	
-------	--

Registrat	ion Statement	Common Col	uncil	
Please Print		2	RINT NAME CLEARI	L Y
Agenda No		Address 5	MAREW C 511 Lake Madison W	\\
Please check o	ne:	AND	Please check:	
Support	support the a	Pala	Do not wi	ish to speak
Oppose				
Neither S	upport Nor Opp	oose		
(If you answered "no, of who you represent	and go on to the next qu	complete the rest of i estion.)	ther than yourself: [this form. If you answered on you are representing:	☐ Yes No d "yes," provide the name
Are you being paid fo	r your representation?		Г	Yes No
• • • • • • • • • • • • • • • • • • • •	part of your other paid d " STOP; you need not c	*	_	Yes No "yes," go on to the next
Speaking Limits:	Public Hearing (Comm Information Hearing 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 other governmental body?	/ or
(If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must s this form. If you answered "no" to the question, go on to the next question.)	ign
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advithat:	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.	
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office Room 103 of the City-County Building, Madison, for more information.)	at
Date Signature and be coh L	-



Date:	
-------	--

Registration Statement -	Common Co	uncil	· · · · · · · · · · · · · · · · · · ·
Please Print Agenda No. # Z Appeal	PLEASE F Name Address	PRINT NAME CLEARLY Melissa Stil 414 Glenwa	y Sh wi
Please check one:	AND	Please check:	5-3711
Support Oppose Neither Support Nor Op	pose	Do not wish	to speak
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 of question.)	this form. If you answered "y	Yes ANo ves," provide the name
Are you being paid for your representation? Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)		or organization?	 -
Speaking Limits: Public Hearing (Com Information Hearing. Other Items	3 m	inutes	

		112010110111011			
	elected official or em nmental body?	ployee who is appear	ing solely on behalf of yo	ur office or for yo	ur municipality or
(If you answ this form. If	vered "yes" to the que you answered "no" t	estion, STOP. You need the question, go on t	ed not complete the rest of to the next question.)	this form, except	that you must sign
If you are b that:	peing paid for your re	epresentation, or if yo	ur appearance is part of	other paid duties,	please be advised
1.	Before you engag with the City Cler		byist, you or your princip	al must file an au	thorization
2.	Your principal is City Clerk.	not permitted to auth	orize you to lobby unless	you are registere	d with the
3.		ust file expense state ardless of the amount s	ements with the City Cle spent on lobbying.	rk for the remain	der of the
(Please go Room 103 o	to the City Clerk's f the City-County Bui	website <u>www.cityofm</u> lding, Madison, for m	<u>adison.com/clerk/index.hi</u> ore information.)	t <u>ml</u> or go to the	Clerk's Office at
Date	8/0/2	Signature	MMA	1/10	aggradus de la distribución de la companya de la co
	,	Print Name	Meli	xa Stilez	M

Date: 8-6-13



AVAILABLE TO ANSWER QUESTIONS FORM

Registra	tion Statement -	Common Co	uncil		
Agenda No.		PLEASE P Name Address	PRINT CLEARLY SUSAN 2604 AK MADISO	EUA PBOR N 5	5 NR #/3 37//
Please check of	one:	AND	Please chec	ek:	
Support Oppose	THE APPE	AL	Availal question	ole to answo	er
	Support Nor Op	ppose			
(If you answered "n of who you represen	you representing an orgo," STOP; you need not and go on to the next and go on the n	ot complete the rest of question.)	this form. If you ansv		No ovide the name
Are you being paid f	for your representation?	?		☐ Yes 🧎	No
Are you appearing a (If you answered "na question.)	s part of your other paid o, "STOP; you need no	d duties for this persor ot complete the rest of	or organization? this form. If you ans		X.No on to the next
Speaking Limits:	Information Hearing	mmon Council)5 n g3 n	ninutes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign If you answered "no" to the question, go on to the next question.)
If you are 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 _	-613 Signature Susan Chas

Date: S/G/I3



AVAILABLE TO ANSWER QUESTIONS FORM

Registration	on Statement -	Common Cour	ıcil	
Agenda No. #	2	Name	INT CLEARLY Fred Po SSO W. Adison	USE HILL DR UI
Please check on	e:	AND	Please check	•
Support✓ Oppose			Available question	e to answer
	ipport Nor Op	pose		
(If you answered "no," of who you represent a	' STOP; you need no nd go on to the next o	anization or a person oth to to the rest of thi question.) The person or organization	is form. If you answe	☐ Yes ☐ No red "yes," provide the name g:
Are you being paid for Are you appearing as p (If you answered "no," question.)	art of your other paic	d duties for this person of	r organization? is form. If you answe	☐ Yes ☒ No ☐ Yes ☒ No erred "yes," go on to the next
Speaking Limits:	Information Hearing	nmon Council)5 min 53 min 3 min	autes	

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? Yes No
	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.	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





AVAILABLE TO ANSWER QUESTIONS FORM

Registrat	ion Statement -	COMMITTEE	Council		
Agenda No.		PLEAS Name Addres	SE PRINT CLEA FATALEE SE GO 5 F MARIE	rly g Mad nickerbe oon 6.	15011 Ocker S 3711
Please check o	one:	AND	Please	check:	
SupportSpose				ailable to ans	wer
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 the next of each	t complete the re question.)	st of this form. If yo	ou answered "yes," _[No provide the name
Are you being paid for	or your representation?			☐ Yes	No No
Are you appearing as (If you answered "no question.)	part of your other paid o," STOP; you need no	I duties for this pe t complete the re	erson or organizationst of this form. If yo	on?	No go on to the next
Speaking Limits:	Public Hearing (Con Information Hearing				

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? Yes X No
	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 <i>08/1</i>	16/13 Signature Allen Male On
7	Print Name XA4/PPN WAGISON





AVAILABLE TO ANSWER QUESTIONS FORM

Registra	tion Statement	Common Cou	uncil		
Agenda No			RINT CLEARLY Thomas A. K) !ce	
Please check of	one:	AND	Please chec	ek:	
Support			Availal	ole to ansv	wer
Oppose			questio	ns	
Neither S	Support Nor Opp	pose			
(If you answered "no of who you represen	you representing an organg, "STOP; you need not and go on to the next quelephone number of each	complete the rest of t uestion.)	his form. If you answ	vered "yes," p	⊠ No provide the name
Are you being paid f	or your representation?			Yes Yes	⋈ No
	s part of your other paid of your need not			☐ Yes vered "yes," g	No go on to the next
Speaking Limits:	Public Hearing (Communication Hearing	*			

		lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body? Yes Your municipality or nental 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 that:	are bei	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.			
(Pleas Room	e go to 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 _	8-	6-2013 Signature Honos Chree Print Name Thouas A- Rice			