30377



Date: <u>1-7-14</u>

WISH TO SPEAK FORM

Registration		COMMITTEE	ouncil		·		
Please Print Agenda No.			EPRINT NA John 2526 Malls	ME CLEAR 5401 Van House In Wa	LY 2016 2 Aug	(01 9 0] 3705	
Please check one:		AND	Plea	se check:			
	<u> </u>		d	Wish to	Speak		
Oppose							
Neither Sup	port Nor Oppos	se					
At this meeting are you re (If you answered "no," So of who you represent and Name, address and telephone	TOP; you need not con go on to the next quest	nplete the rest ion.)	of this form.	If you answer		No provide the	name
Are you being paid for yo	ur representation?				Yes	No No	
Are you appearing as part (If you answered "no," S' question.)					☐ Yes ed "yes,"	No go on to th	ie next
Int	blic Hearing (Commor formation Hearing her 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	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.	3. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?		
(Please go 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		



Date: _	1-7-14	

WISH TO SPEAK FORM

Registration Statement	t - Common Co	uncil
Please Print	•	
	PLEASE I Name	PRINT NAME CLEARLY
Agenda No.	- Address	338 Hammarsley Ava
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor (Oppose	
At this meeting are you representing an of (If you answered "no," STOP; you need of who you represent and go on to the new Name, address and telephone number of	not complete the rest of xt question.)	this form. If you answered "yes," provide the name
Are you being paid for your representation	on?	☐ Yes ☐ No
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)		n or organization? Yes No f this form. If you answered "yes," go on to the next
Information Hear	Common Council)5 1 ing3 1	ninutes

	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.	3. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?	
(Please go 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	

Date:	
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AVAILABLE TO ANSWER QUESTIONS FORM

Registration Statement -	Common Council COMMITTEE
	PLEASE PRINT CLEARLY
Agenda No. 62	Name Jason Valerius Address 232 W Sunsey C4
Please check one:	AND Please check:
∑ Support	Available to answer
Oppose	questions
Neither Support Nor Op	ppose
At this meeting are you representing an organism (If you answered "no," STOP; you need no of who you represent and go on to the next of	t complete the rest of this form. If you answered "yes," provide the name
	ch person or organization you are representing: Int Northborkood Plan Steering Commit
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 or organization? Yes No to complete the rest of this form. If you answered "yes," go on to the next
i O	nmon 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 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	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:	1	7.	/	4	



AVAILABLE TO ANSWER QUESTIONS FORM

Registration Statement -	Common Council COMMITTEE
	PLEASE PRINT CLEARLY
Agenda No. <u>(, 2</u>	Name DOBERT HAMAN Address 502 2101E ST MADISON WI
Please check one:	AND Please check:
Support	Available to answer
Oppose	questions
Neither Support Nor Op	ppose
of who you represent and go on to the next of	t complete the rest of this form. If you answered "yes," provide the name
ROCKY BLUF	F NEITHBORNOOD ASSON
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 complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	nmon Council)5 minutes 3 minutes

Are you an elected other governments	d official or employee who is appearing solely on behalf of your office or for your municipality or al body? Yes No	
(If you answered ' this form. If you a	"yes" to the question, STOP. You need not complete the rest of this form, except that you must sign is never that you must sign is to the question, go on to the next question.)	
If you are being p	paid for your representation, or if your appearance is part of other paid duties, please be advised	
and the second s	efore you engage in lobbying as a lobbyist, you or your principal must file an authorization th the City Clerk.	
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.	
3. Yo	our principal must file expense statements with the City Clerk for the remainder of the lendar year regardless of the amount spent on lobbying.	
(Please go to the Room 103 of the C	e City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at City-County Building, Madison, for more information.)	
Date	Signature	
	Print Name	