Date: 10-02-07

CITY OF MADISON

Registration Statem	ent - Common Council	
Please Print 07220	PLEASE PRINT CLEARLY Name REMARY LEE	
Agenda No. 25	Address MW WISON #108 MANISON 53703	
Please check the appropriate boxes:	DO NOT TAKE OFF CONSENT AGENDA and Adwish to speak	
Support	and Wish to speak	
Oppose	Do not wish to speak	
Neither Support Nor	Oppose Available to answer questions	
(If you answered "no," STOP; you	an organization or a person other than yourself: Yes need not complete the rest of this form. If you answered "yes," provide the name	
of who you represent and go on to t		
Name, address and telephone number of each person or organization you are representing:		
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Are you being paid for your represe	ntation? Yes No	
	her paid duties for this person or organization? Yes No need not complete the rest of this form. If you answered "yes," go on to the next	
	문의 경기를 가는 경기를 가져왔다. 그 사람은 그는 그는 것이 되었다. 그는 것이 되었다는 것은 것이 되었다. 근 것은 그는 것은 것이 하는 것은	
	ng (Common Council) 5 minutes Hearing 3 minutes	

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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?	
	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	