Date: _	, i	<u> </u>	
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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:	Lrupp Address: 14	Madish was 53.704.
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	IN & ONE BOX IN THIS COLUMN
Amendment No. Bott	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions☐ Wish to speak
Amendment No.	SupportOpposeNeither Support Nor Oppose	Do not wish to speak Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you represe	nting an organization or a person othe	er than yourself: Yes No

(SEE BACK)

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

the name of whom you represent and go on to the next question.)

Na	ıme, ad	REGISTRATION STATEMENT - PAGE 2 Idress and telephone number of each person or organization you are representing:
		Local (1)
Are	you be	eing paid for your representation?
(n)	rou aris	ppearing as part of your other paid duties for this person or organization? ☐ Yes ☐ No swered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on t uestion.)
Are mui	you a nicipalit	n elected official or employee who is appearing solely on behalf of your office or for you ty or other governmental body?
(If y you	ou ans must s	swered "yes" to the question, STOP. You need not complete the rest of this form, except the sign this form. If you answered "no" to the question, go on to the next question.)
if yo advi	ou are b sed tha	being paid for your representation, or if your appearance is part of other paid duties, please be at:
,	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
٠	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?
Plea at Ro	ase go i oom 10.	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office 33 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

	11/16/2010	
Date:	11/1 1000	_

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: den C	Address: $\frac{329}{MA}$	N. PALDON J 0150n N= 53703
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	
Amendment No.	SupportOpposeNeither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No/ ○	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: \(\subseteq \text{Yes} \) \(\subseteq \subseteq \text{No} \) (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

Name, a	REGISTRATION STATEMENT - PAGE 2 ddress and telephone number of each person or organization you are representing:
Are you b	peing paid for your representation?
Are you a (If you an the next o	ppearing as part of your other paid duties for this person or organization? Yes No swered "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on to usestion.)
Are you municipal	an elected official or employee who is appearing solely on behalf of your office or for you ity or other governmental body?
(If you an you must	swered "yes" to the question, STOP. You need not complete the rest of this form, except tha sign this form. If you answered "no" to the question, go on to the next question.)
If you are advised th	being paid for your representation, or if your appearance is part of other paid duties, please be at:
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
(Please go at Room 1	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office 03 of the City-County Building, Madison, for more information.)
Date	Signature
	Drint Nama

Date: 16 2610

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

Name: BILLY ARIMO	Address: 72°	S CHAPMAN ST
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	Do not wish to speak Available to answer questions Wish to speak
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	Do not wish to speak Available to answer questions Wish to speak
Amendment No.	SupportOpposeNeither Support Nor Oppose	Do not wish to speak Available to answer questions Wish to speak
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	Do not wish to speak Available to answer questions

At this meeting are you representing an organization or a person other than yourself: Yes \sum \text{No} \text{No} (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

<u> </u>	dress and telephone number of each person or organization you are representing:
-	ASCME
Are you be	eing paid for your representation?
Are you ap (If you ans the next qu	pearing as part of your other paid duties for this person or organization? Yes Wored "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on to
Are you armunicipality	n elected official or employee who is appearing solely on behalf of your office or for you y or other governmental body?
(If you ans you must si	wered "yes" to the question, STOP. You need not complete the rest of this form, except that ign this form. If you answered "no" to the question, go on to the next question.)
If you are b advised tha	peing paid for your representation, or if your appearance is part of other paid duties, please be it:
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
′Please go t at Room 103	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office 3 of the City-County Building, Madison, for more information.
Date /	Signature

Print Name _

B. LARIMURE

WILLIAM

		}	
Date: _	11	16	2010

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Karen Brown-L	. M	25 Chapman St. Ladison, WI 537!
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose ☐ Support	Do not wish to speak Available to answer questions Wish to speak
Amendment No.	Oppose Neither Support Nor Oppose Support	☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No.	☐ Oppose ☐ Neither Support Nor Oppose	☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	Do not wish to speakAvailable to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

-			:
Are	you be	ing paid for your representation?	☐ Yes ② No
(n y)	ou ans	pearing as part of your other paid duties for this person or orgwered "no," STOP; you need not complete the rest of this for estion.)	ganization?
Are mur	you ar nicipality	n elected official or employee who is appearing solely on y or other governmental body?	behalf of your office or for your
(If y you	ou ans must si	wered "yes" to the question, STOP. You need not complete ign this form. If you answered "no" to the question, go on to th	the rest of this form, except that ne next question.)
lf yo advi	u are b sed tha	eing paid for your representation, or if your appearance is patt:	art of other paid duties, please be
	1.	Before you engage in lobbying as a lobbyist, you or you authorization with the City Clerk.	our principal must file an
	2.	Your principal is not permitted to authorize you to lobby with the City Clerk.	unless you are registered
	3.	If your principal spends or will owe more than \$1,000 for reporting period (half year), the principal must file expense Clerk for the remainder of the calendar year?	lobbying services in any statements with the City
Plea it Rc	se go t om 103	o the City Clerk's website <u>www.cityofmadison.com/clerk/inde</u> 3 of the City-County Building, Madison, for more information.)	ex.html or go to the Clerk's Office

Print Name

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:		09 ODANA <u>NO</u> WAD 150 N W 5371/
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No/_	Support Oppose Neither Support Nor Oppose	Do not wish to speak Available to answer questions Wish to speak
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

(SEE BACK)

At this meeting are you representing an organization or a person other than yourself:

Yes

the name of whom you represent and go on to the next question.)

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

		:
Are you b	eing paid for your representation?	☐ Yes ☐ No
Are you a (If you an the next q	ppearing as part of your other paid duties for this p swered "no," STOP; you need not complete the res question.)	erson or organization? ☐ Yes ☐ No st of this form. If you answered "yes," go on t
Are you a municipali	an elected official or employee who is appearing ity or other governmental body?	solely on behalf of your office or for you
(If you an:	surored "year" to the months at a star	t constitution of the second second
you must s	swered "yes" to the question, STOP. You need no sign this form. If you answered "no" to the question,	of complete the rest of this form, except that go on to the next question.)
you must s	being paid for your representation, or if your appearance.	go on to the next question.)
If you are	being paid for your representation, or if your appearance.	go on to the next question.) arance is part of other paid duties, please be
If you are advised th	being paid for your representation, or if your appea at: Before you engage in lobbying as a lobbyish authorization with the City Clerk.	go on to the next question.) arance is part of other paid duties, please be , you or your principal must file an
If you are advised th	being paid for your representation, or if your appearat: Before you engage in lobbying as a lobbyist authorization with the City Clerk. Your principal is not permitted to authorize yo	go on to the next question.) arance is part of other paid duties, please be you or your principal must file an u to lobby unless you are registered \$1,000 for lobbying services in any
If you are advised th 1. 2. 7.	being paid for your representation, or if your appearat: Before you engage in lobbying as a lobbyist authorization with the City Clerk. Your principal is not permitted to authorize yo with the City Clerk. If your principal spends or will owe more than reporting period (half year), the principal must	go on to the next question.) arance is part of other paid duties, please be you or your principal must file an u to lobby unless you are registered \$1,000 for lobbying services in any file expense statements with the City

Date:	//	-16	-1	0
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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

mmutes, rogal are		•
PLEASE PRINT CLEARLY Name: Briony Jean	Foy Address: 64	105 Landfall Dr. Madison 53705
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	N & ONE BOX IN THIS COLUMN
Amendment No. 16	Support Oppose Neither Support Nor Oppose	 ☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you represent (If you answered "no," STOP; you the name of whom you represent 11/15/2010-Registration Form OPER Bud 2011.doc	ting an organization or a person other ou need not complete the rest of this to t and go on to the next question.) (SEE BACK)	than yourself: Yes No form. If you answered "yes," provide as an artist and. a member of the dison At 3 Commission

REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing: EMMISCI ON 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.) Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body? (If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.) If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that: Before you engage in lobbying as a lobbyist, you or your principal must file an 1. authorization with the City Clerk. 2. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk. If your principal spends or will owe more than \$1,000 for lobbying services in any 3. reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year? (Please go to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office

at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date:	1/	/16	/10	
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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Soun Solon	Address: 544	5 Wale Mindota Dr.
part pour	· My	5 lake Mendota Dr. edison, WI 53705
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	
Amendment No/_	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP; you	ng an organization or a person other the need not complete the rest of this for	nan yourself: ☐ Yes

(SEE BACK)

the name of whom you represent and go on to the next question.)

			<u> </u>		· · · · · · · · · · · · · · · · · · ·
					<u> </u>
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Are you be	ing paid for your repr	resentation?		☐ Yes [⊠ No
	wered "no," STOP; y			ganization? ☐ Yes m. If you answered "	
	n elected official or y or other governmer		ppearing solely on	behalf of your offic	e or for you ☐ No
	wered "yes" to the q ign this form. If you a			e the rest of this form he next question.)	n, except the
If you are b advised tha		epresentation, or if yo	our appearance is p	art of other paid dutie	es, please b
1.	Before you engage authorization with		ı lobbyist, you or y	our principal must f	ïle an
2.	Your principal is with the City Clerk		horize you to lobby	unless you are regis	stered
3.	reporting period (h		oal must file expens	or lobbying services i se statements with th	
	to the City Clerk's we			ex.html or go to the 0	Clerk's Office
	3 of the City-County	Building, Madison, fo	or more information.)	

Print Name _

1

Date: Nov 16/2010

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: TONY RAJO	Address: 23	de Center Are
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	
Amendment No. 16	✓ Support☐ Oppose☐ Neither Support Nor Oppose	Wish to speak Do not wish to speak Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	Do not wish to speak Available to answer questions Wish to speak
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Do not wish to speak ☐ Available to answer questions ☐ Wish to speak
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	Do not wish to speak Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: Yes M No (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

	ress and telephone number of each person or organization you are representing:
Are you bei	ng paid for your representation?
Are you app (If you answ the next que	pearing as part of your other paid duties for this person or organization? Yes Notered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on estion.)
Are you an municipality	elected official or employee who is appearing solely on behalf of your office or for your other governmental body?
(If you answ you must sig	vered "yes" to the question, STOP. You need not complete the rest of this form, except th gn this form. If you answered "no" to the question, go on to the next question.)
lf you are be advised that	eing paid for your representation, or if your appearance is part of other paid duties, please b
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
Please go to t Room 103	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office of the City-County Building, Madison, for more information.)
Pate MO	1 (6/2010 Signature 7 mg RAN
	Print Name
	Tony Myn
Account	I just wont to speak on Amendment #16
	anodort #1/6

Date:	Date:	1	-	6	-	0
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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: KYU TITE ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	
Amendment No.	Support Oppose Neither Support Nor Oppose	✓ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	□ Support □ Oppose □ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	Wish to speakDo not wish to speakAvailable to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

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 whom you represent and go on to the next question.)

			•		
	·			·	
Are y	ou bei	ing paid for your repre	esentation?	Ye	s X.No
(It yo	u ansv	pearing as part of you wered "no," STOP; yo estion.)	ur other paid duties for this pe ou need not complete the res	erson or organization? [] t of this form. If you answe	Yes No red "yes," go on to
Are y muni	ou an	n elected official or e vor other government	employee who is appearing al body?	solely on behalf of your	
(If yo you n	u ansv nust sig	vered "yes" to the qu gn this form. If you an	uestion, STOP. You need nonswered "no" to the question,	t complete the rest of this go on to the next question.	form, except that
f you advis	are be	eing paid for your rep t:	presentation, or if your appea	rance is part of other paid	duties, please be
	1.	Before you engag authorization with t	e in lobbying as a lobbyist he City Clerk.	, you or your principal m	ust file an
	2.	Your principal is no with the City Clerk.	ot permitted to authorize you	ı to lobby unless you are	registered
	3.	reporting period (ha	ends or will owe more than alf year), the principal must f nder of the calendar year?	\$1,000 for lobbying service ile expense statements with	ces in any th the City
Pleas t Roc	se go to om 103	o the City Clerk's wel 3 of the City-County B	bsite <u>www.cityofmadison.con</u> uilding, Madison, for more in	n/clerk/index.html or go to formation.)	the Clerk's Office
ate .	-	0 -0	Signature	\ 7A	
			Print Name	la Pfister	
			1 ;		