Date: $\frac{5}{20/08}$

CITY OF MADISON

Registration Statement	Common Council
Please Print	PLEASE PRINT CLEARLY
705	Name VICKY Selkowe
Agenda No	Address 8964 Union St
98019	madeson w 53704
Please check the appropriate boxes:	
Support Oppose Noither Support Non Oppose	and Wish to speak Do not wish to speak Available to answer questions
Neither Support Nor Oppose	
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 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 3 minutes 3 minutes

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	elected official or employed emental body?	e who is appearing solely on behalf of your office or for your municipality or Yes No
		, STOP. You need not complete the rest of this form, except that you must sign question, go on to the next question)
If you are both	eing paid for your represe	entation, or if your appearance is part of other paid duties, please be advised
1.	Before you engage in l with the City Clerk	obbying as a lobbyist, 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.	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?	
,		ite <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Madison, for more information)
Date		Signature
		Print Name