

Date: 1-3-06

CITY OF MADISON

Registration Statement - COMMON COUNCIL
COMMITTEE

Please Print

PLEASE PRINT CLEARLY

Agenda No. # 5

Name ROSEMARY LEE

Address 11 W WILSON ST # 108

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- 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 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 No

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:

Public Hearing (Common Council)	5 minutes
Information Hearing	3 minutes
Other Items	3 minutes

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2

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 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:

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(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.)

Date _____ Signature _____
Print Name _____

Date: January 3, 2006

CITY OF MADISON

Registration Statement - COMMON COUNCIL
COMMITTEE

Please Print

Agenda No. <u>5</u> (<u>02190</u>) <u>Official Map Change (Broom)</u>
--

PLEASE PRINT CLEARLY

Name Tom Neujahr

Address 168 North Prospect Avenue
Madison, WI 53726

Please check the appropriate boxes:

- | | | |
|--|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose <u>the inclusion of Blocher 55 and 56</u> | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neither Support Nor Oppose | | <input type="checkbox"/> Available to answer questions |

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:
Five House Jt Venture I and II (Fred Mohs, Terry McCaughey, Nathan Brand,
Brad Brinkowski and Tom Neujahr)

Are you being paid for your representation? Yes No

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: Public Hearing (Common Council)..... 5 minutes
 Information Hearing..... 3 minutes
 Other Items..... 3 minutes

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Date _____

Signature _____

Print Name _____

Date: 1/3/06

CITY OF MADISON

Registration Statement - COMMON COUNCIL
COMMITTEE

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Agenda No. 5

PLEASE PRINT CLEARLY

Name Jonathan Cooper
Address 208 S. Henry St.
Madison 53703

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- 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 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 No

Are you appearing as part of your other paid duties for this person or organization? Yes No
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Information Hearing.....	3 minutes
Other Items.....	3 minutes

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2

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

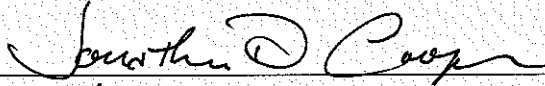
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Date 1/3/06

Signature 

Print Name Jonathan D. Cooper

Date: 1-3-06

CITY OF MADISON

Registration Statement - COMMON COUNCIL
COMMITTEE

Please Print

PLEASE PRINT CLEARLY

Agenda No. 5

Name Jane M. Richard
Address 208 S. Henry
53703

Please check the appropriate boxes:

- Support**
 Oppose
 Neither Support Nor Oppose

- and 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 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.)

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Date 1-3-06

Signature Jane M. Richard
Print Name Jane M. Richard

Date: 1/3

CITY OF MADISON

Registration Statement - COMMON COUNCIL
COMMITTEE

Please Print

PLEASE PRINT CLEARLY

Agenda No. 5

Name JERRY PASCO
Address 4109 EUCLIA AVE.
MADISON,

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- Wish to speak
 - Do not wish to speak
 - Available to answer questions

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