

#18631

Date: 6-15-10

CITY OF MADISON

Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print

PLEASE PRINT NAME CLEARLY

Agenda No. 81

Name: Alexander Michael / R. Christy
Address: 2 E. Maple St, Madison 53703

Please check the appropriate box:

Please check the appropriate box:

- Support (checked)
Oppose
Neither Support Nor Oppose

AND

- Wish to speak (checked)
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:

John Schardt
c/o Green Cab
625 Bird St

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

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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 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 6/15/10

Signature 

Print Name _____



Date: 6-15-10

AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

PLEASE PRINT CLEARLY

Agenda No. 81

Name MIKE SCHMIDT

Address 2205 SUGAR RIVER

Please check one:

AND

Please check:

Support

Oppose

Neither Support Nor Oppose

Available to answer questions

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Date 5-15-10

Signature 
Print Name Michael Schmitt



Date: 6/15/10

AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registration Statement - Common Council
COMMITTEE

PLEASE PRINT CLEARLY

Name Amanda Schmidt

Address 2265 Sugar River Rd.
Verona, WI 53593

Agenda No. 81

Please check one:

AND

Please check:

Support

Oppose

Neither Support Nor Oppose

Available to answer questions

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Date 4/15/10

Signature Amanda Schmidt
Print Name Amanda Schmidt



Date: 6-15-10

DO NOT WISH TO SPEAK FORM

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

Please Print

PLEASE PRINT NAME CLEARLY

Agenda No. <u>81</u>

Name Jordan Casto
 Address 1909 LaSierra Way
Madison, WI 53716

Please check the appropriate box:

Please check the appropriate box:

Support

AND

Do not wish to speak

Oppose

Neither Support Nor Oppose

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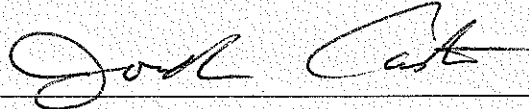
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Date 6-15-10

Signature



Print Name

Jordan Costa



Date: 6-15-10

DO NOT WISH TO SPEAK FORM

CITY OF MADISON

Registration Statement - Common Council
COMMITTEE

Please Print

Agenda No. <u>81</u> <u>Green Cab Co</u>

PLEASE PRINT NAME CLEARLY

Name ROSEMARY LEE

Address 111 W WILSON
53703

Please check the appropriate box:

Please check the appropriate box:

Support

AND

Do not wish to speak

Oppose

Neither Support Nor Oppose

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