제살을 하는 사람들 되었다는 때문은 하였다.		Date:
	CITY OF MADIS	SON
	Common Co.	
Registration Statement -	Common Col	
Please Print		
Hease I Till	PLEASE P	RINT NAME CLEARLY
	Name	LAN MENZEI
Agenda No /Z		010 7
	Address	ElB Hogles und
		Sn Havre, W' 53596
Please check the appropriate box:		Please check the appropriate box:
Support Oppose	AND	Wish to speak Do not wish to speak
Neither Support Nor Oppo	se	Available to answer questions
At this meeting are you representing an org (If you answered "no," STOP; you need no f who you represent and go on to the next Name, address and telephone number of each contact which was a state of the state of t	ot complete the rest of question) such person or organizat	this form. If you answered "yes," provide the name
<u>5</u> +		
837 730	9	
Are you being paid for your representation	?	☐ Yes ☐ No
Are you appearing as part of your other pa (If you answered "no," STOP; you need requestion.)		n or organization? Yes No Yhis form. If you answered "yes," go on to the next
Information Hearing	ommon Council) 5 r ag 3 r 3 r	minutes

Are you an elected official other governmental body?	or employee who is appearing solely on behalf of your office or for your municipality or Yes No
(If you answered "yes" to i this form If you answered	he question, STOP. You need not complete the rest of this form, except that you must sign 'no" to the question, go on to the next question.)
If you are being paid for y that:	our representation, or if your appearance is part of other paid duties, please be advised
1 Before you with the Cit	engage in lobbying as a lobbyist, you or your principal must file an authorization y Clerk
2. Your princ City Clerk.	pal is not permitted to authorize you to lobby unless you are registered with the
period (hal	cipal spends or will owe more than \$1,000 for lobbying services in any reporting year), the principal must file expense statements with the City Clerk for the f the calendar year?
	erk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ty Building, Madison, for more information)
Date	Signature
	Print Name

Date: 12.15.09

	CITY OF MADISON
Registration Statement	Common Council
Please Print 5M25	PLEASE PRINT CLEARLY Saul 6/92es
Agenda No. 113	Name Sattater Address 23 20 Rauley Av 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
At this meeting are you representing an orga (If you answered "no," STOP ; you need not of who you represent and go on to the next q	t complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	h person or organization you are representing:
869	Progregs way
Sun	Prsir 1e WZ
Are you being paid for your representation?	Yes Ves
Are you appearing as part of your other paid (If you answered "no," STOP ; you need no question)	I duties for this person or organization? Yes No t complete the rest of this form. If you answered "yes," go on to the next
	nmon Council) 5 minutes 3 minutes 3 minutes

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:	
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.	
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 <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information)	
Date $\sqrt{2.75.09}$ Signature	· .
Print Name 2016 Gazer	

•			Ι	Date:	
		CITY OF MADIS	SON	·	
Registrat	ion Statement -	Common Col	uncil		. · · · · · · · · · · · · · · · · · · ·
Please Print		PLEASE P	RINT NAME CLEA	ARLY	
Agenda No	113	NameAddress		MEJIZE(
Please check the ap	propriate box:		Please check th	e appropriate	box:
At this meeting are y	apport Nor Opposou representing an organor, "STOP; you need no	anization or a person of	other than yourself:	to speak answer question	☐ No
of who you represent	elephone number of each	question)			
	Prairie Las	<u>d</u>		· · · · · · · · · · · · · · · · · · ·	
	SP				
	857 7369				
, 01	or your representation?			☐ Yes	No V
Are you appearing as (If you answered "no question.)	s part of your other paid o, " STOP; you need no	d duties for this person ot complete the rest of	n or organization? this form. If you ans	☐ Yes wered "yes," g	⚠ No 30 on to the next
Speaking Limits:	Information Hearing	mmon Council) 5 r g3 r 3 r	ninutes		

	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?
	-	to 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

Date:	12-	15-200	29	

CITY OF MADISON

Registration Statement	COMMITTEE
Please Print	PLEASE PRINT CLEARLY
100	Name Peter Conrad
Agenda No. 12///3	Address Z.E. M.FF(:~
	Madison, WI
Please check the appropriate boxes:	
Support	and Wish to speak
Oppose	☐ Do not wish to speak ☐ Available to answer questions
Neither Support Nor Oppose	
At this meeting are you representing an organ	nization 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 q	uestion)
Name, address and telephone number of each	n person or organization you are representing:
Disalud Taxina	
Prairie Land Towing	
868 Prospess Wary	
SUR Prairie WI	
	57) yr
Are you being paid for your representation?	Yes No
Are you appearing as part of your other paid	duties for this person or organization?
	complete the rest of this form If you answered "yes," go on to the next
question)	
	mon Council) 5 minutes
Information Hearing	mon Council) 5 minutes 3 minutes 3 minutes

re you an elected official or employee who is appearing solely on behalf of your office or for your municipality or her governmental body?
f you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign is form. If you answered "no" to the question, go on to the next question.)
you are being paid for your representation, or if your appearance is part of other paid duties, please be advised at:
1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
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 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 <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at coom 103 of the City-County Building, Madison, for more information.)
ate 12-15-2009 Signature ALD
Print Name Pekr J. Conrad

Date: 12/15/09

CITY OF MADISON

	OMMITTEE	iCII		
Please Print	PLEASE PRIN	T CLEARLY		
Agenda No. 12	Name Address	Saul 2320 Madi	Coule Son	<u>5</u> 4
Please check the appropriate boxes: Support Oppose Neither Support Nor Oppose	and	☐ Wish to sp ☐ Do not wis ☐ Available		ions
At this meeting are you representing an organizat (If you answered "no," STOP ; you need not come of who you represent and go on to the next question. Name, address and telephone number of each per	iplete the rest of th	is form If you an		☐ No provide the name
Prairie Land 869 Progra		7		
Sa Prai		7		
Are you being paid for your representation? Are you appearing as part of your other paid duti (If you answered "no," STOP; you need not con question)	es for this person on the person of the pers	or organization? his form. If you an	∠ Yes ☐ Yes iswered "yes,"	∐No ☑No go on to the next
Speaking Limits: Public Hearing (Common Information Hearing Other Items	3 mi	nutes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	ered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question.)
If you are bothat:	eing 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?
Room 103 oj	to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at fithe City-County Building, Madison, for more information.) 2. 15 05 Signature
	Print Name Carl 6/6201