City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY 29 Agenda No. Address Please check the appropriate boxes: 01880 01881 01985 Referendum Hardship Exemption Repealing smoking ban Support Oppose Neither support nor oppose I wish to speak Available for information only At this meeting are you representing an organization or a person other than yourself: (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," 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? (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 Limit:4 minutes (See Back) REGISTRANT #

REGISTRANT # ____

	ou an el nmental l	lected official who is appearing solely on behalf of your office or for your municipality or other body?
		ed "yes" to the question, STOP . You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question)
If you that:	are beir	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	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 the principal is registered with the City Clerk? Yes No
	3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you Office	answer at Room	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's a 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

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Agenda No. 29		Land Landson and All	1 1 2 4
Agenda No. 29	Addı	ess 325, b	tan wack St
		Madison	4 53703
Please check the appropriate boxes:			
	T		
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	X		
Oppose	<i>ā</i> :		
Neither support nor oppose	-	,	
I wish to speak		<u> </u>	
Available for information only			
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Are you being paid for your representati	on?		☐ Yes No
Are you appearing as part of your other if you answered "no," STOP; you need question.)	paid duties for this d not complete the	s person or organization? rest of this form. If you ar	☐ Yes ☐ No nswered "yes," go on to the ne
Speaking Limit:		4 minutes	
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Are you ar	elected official who is appearing solely on behalf of your office or for your municipality or other al body?
	vered "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.)
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Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

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Agenda No. 29	Nam Addi	e Pathy Bo ess 3650 S Milwauka	rkowski Sunset Dr Je, W153220
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose	X		
Neither support nor oppose I wish to speak Available for information only			
Name, address and telephone number of	each person or or Nevican +	ganization you are represe TEALT ASSU	enting:
Are you being paid for your representation	on?		☐ Yes No
Are you appearing as part of your other part (If you answered "no," STOP; you need question.)			Yes No No Inswered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
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	ou an e nmental	lected official who is a body?	appearing solely or	n behalf of you	office or for	your muni	cipality or other No
		red "yes" to the question ou answered "no" to the				m, except th	aat you must sign
If you that:	are bei	ng paid for your represe	entation, or if your	appearance is p	part of other par	id duties, do	you understand
	1.,	Before you engage in with the City Clerk?	lobbying as a lobby	rist, you or your	principal must	file an auth	orization No
	2	Your principal is not with the City Clerk?	permitted to author	tize you to lobb	by unless the p	rincipal is r	egistered No
	3	If your principal spend period (calendar quart the remaining quarters	er), the principal m	ust file expense	lobbying servi	ices in any i th the City (Yes	reporting Clerk for No
		red "no" to any of the long the long the City-County				66-4601 or	go to the Clerk's
Date _	9	120/05	Signature Print Name	PBO	Wendw rkowsk,		

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

REGISTRANT # _____

Agenda No. 29	Nam Add	and the same of th	22) veg Cl-,
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X		
Oppose			
Neither support nor oppose			
I wish to speak			×
Available for information only			
Name, address and telephone number of Are you being paid for your representation		Same and	☐ Yes No
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	ou an o nmental		official who is	appearing solel	y on behalf of yo	our office or fo		lity or other No
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	3.	period	(calendar qua	nds or will owe rater), the principars of the calendar	more than \$500 for all must file expensions year?	or lobbying serv se statements w	ith the City Cler	orting k for No
(If yoı Office	u answe at Rooi	red "no' n 103 of	' to any of the the City-Coun	last three questic ty Building, Madi	ons, please call the ison, for more info	e City Clerk at 2 rmation.)	266-4601 or go t	o the Clerk's
Date ₋	9.	20	05	Signature	MA	12		A Million In .
				Print Name	JTAM_	CARN	J	
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City of Madison Registration Statement - Common Council

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		Malson, W	5370 S
Please check the appropriate boxes:	•		
	01000	01001	01985
	01880	01881	
Support	Referendum	Hardship Exemption	Repealing smoking ban
Support Oppose	- 		V
Neither support nor oppose			
I wish to speak			
Available for information only			g
Available for information only			A-2-1
Are you being paid for your representat	tion?		Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)			Yes No nswered "yes," go on to the next
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Are you		lected official who is body?	appearing solely	on behalf of yo	our office or fo	r your muni Yes	cipality or other No
		ed "yes" to the questi ou answered "no" to t		_		rm, except th	nat you must sign
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	1.	Before you engage is with the City Clerk?	n lobbying as a lol	obyist, you or you	r principal mus	t file an auth	orization No
	2.	Your principal is no with the City Clerk?	t permitted to aut	horize you to lob	by unless the p	orincipal is re	egistered No
	3.	If your principal spe period (calendar qua the remaining quarter	rter), the principal	must file expens			
		ed "no" to any of the 103 of the City-Coun				66-4601 or g	go to the Clerk's
Date			Signature	#54 time	gapan Mary		
			Print Name				
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City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

REGISTRANT #

Name Cuck Liftweler Address SLUKKEN COURT NAME COURT NA	Please check the appropriate boxes: Support Oppose	01880 Referendum	01881		
Please check the appropriate boxes: 01880	Please check the appropriate boxes: Support Oppose	01880 Referendum	01881		
Please check the appropriate boxes: 01880	Please check the appropriate boxes: Support Oppose	01880 Referendum	01881		
Please check the appropriate boxes: 01880	Support Oppose	01880 Referendum	01881		
Please check the appropriate boxes: 01880	Support Oppose	01880 Referendum	01881		
O1880 Referendum Hardship Exemption Repealing smoking ban	Support Oppose	Referendum	Į.	0	
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Oppose Neither support nor oppose I wish to speak Available for information only 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," go on to the next nuestion.) Name, address and telephone number of each person or organization you are representing: Yes No 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	Oppose		Hardship Exemption	Repealing	smoking ban
Neither support nor oppose I wish to speak Available for information only 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," go on to the next uestion.) Itame, address and telephone number of each person or organization you are representing: The you being paid for your representation? Yes No The you appearing as part of your other paid duties for this person or organization? Yes No		VE>		ONLU IF	The TAVERA
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Are you appearing as part of your other paid duties for this person or organization? Yes No	· · · · · · · · · · · · · · · · · · ·				
	re you being paid for your representation	?		Yes	No
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Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

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Name Matthew Eisele Address 1157 Fast Miffling Madison WI 53703 880 01881 01983 endum Hardship Exemption Repealing smooth and the state of this form. If you answered "yes," go son or organization you are representing:	5 oking ban
Madison DISST 03 880 01881 01985 Endum Hardship Exemption Repealing smooth on or a person other than yourself: Yes plete the rest of this form. If you answered "yes," go son or organization you are representing:	5 oking ban
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4 minutes	
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	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? Yes No						
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(If you Office o	answere at Room	ed "no" to any of the last to a 103 of the City-County Bui	hree questions, j ilding, Madison,	please call the for more info	City Clerk at . rmation.)	266-4601 or s	go to the Clerk's
Date _		S	ignature	· · ·			
		P	rint Name	****			

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Agenda No. 29	Nam Add	ress 132 E Litera	
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		11. 12 W 2-3	
Please check the appropriate boxes:			
Trease check the appropriate boxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	\(\sigma_i\)		7
Oppose		7	
Neither support nor oppose			
I wish to speak			
Available for information only			
Are you being paid for your representa	ution?		☐ Yes ☐ No
Are you being paid for your represent	moir:		
Are you appearing as part of your othe (If you answered "no," STOP; you ne question.)			Yes No swered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
	(See]	Back)	
REGISTRANT #	·	·	
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		red "yes" to the question, STOP . You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)	
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(If you Office	answe at Room	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)	
Date _		Signature	•
		Print Name	
	:		
			_

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY 29 Agenda No. Please check the appropriate boxes: 01880 01985 01881 Repealing smoking ban Referendum Hardship Exemption Support Oppose Neither support nor oppose I wish to speak Available for information only At this meeting are you representing an organization or a person other than yourself: Y Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question..) Name, address and telephone number of each person or organization you are representing: 18 VCC Stockt 33 Harding St 242-7860 Yes Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Yes (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 Limit:4 minutes (See Back) REGISTRANT

REGISTRANT # ____

	ou an e mental	lected official who is appearing solely on behalf of your office or for your municipality or other body?
(If you this for	answer m. If yo	ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign on answered "no" to the question, go on to the next question.)
If you that:	are bein	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
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Date _		Signature
		Print Name

REGISTRANT #

City of Madison Registration Statement - Common Council

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	PRINT NAME CLEARLY		
Agenda No. 29	Nam	e <u>fâtricia</u>	K. Wolden Troy Dr.
Agenda No. 27	Addı	Modizar	1100 Or
		111111111111	,001, 00 104
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			`
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
name, address and telephone number of a section. Sous Anchor	each person or or	ganization you are repres	senting:
Are you being paid for your representation	n?		☐ Yes No
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)	aid duties for this not complete the	s person or organization? rest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:	*************	4 minutes	
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REGISTRANT #			

	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?					
		red "yes" to the question, ou answered "no" to the c			t of this form, e	xcept that you must sign
If you that:	are bein	ng paid for your represer	ntation, or if yo	our appearance is part o	f other paid du	ities, do you understand
	1.	Before you engage in lowith the City Clerk?	obbying as a lol	obyist, you or your prin		an authorization Yes No
	2.	Your principal is not p with the City Clerk?	ermitted to aut	horize you to lobby un		pal is registered Yes
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?				
(If you Office	answer at Room	ed "no" to any of the las a 103 of the City-County I	st three question Building, Madis	ns, please call the City son, for more informatio	Clerk at 266-4 on.)	601 or go to the Clerk's
Date	9-2	0-05	Signature	fatricis	a) K.a	JHd-
			Print Name	Patricia	K. U	Valder
			*******			***********

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	5-1	itoclet ing st Gel 53714	
Please check the appropriate boxe	s:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban	
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Oppose				
Neither support nor oppose				
I wish to speak				
Available for information only				
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Are you being paid for your representation? 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 Limit:		4 minutes		
REGISTRANT #	(See)	Back)		

	ou an e nmental		ho is appearing sole	ly on behalf of yo	our office or for	your munic	ipality or other No
			uestion, STOP. You n ' to the question, go o			rm, except tha	at you must sign
If you that:	are bei	ng paid for your	representation, or if y	our appearance is	part of other pa	id duties, do	you understand
	1	Before you enga	age in lobbying as a le erk?	obbyist, you or you	ır principal must	file an autho	rization □ No
	2.	Your principal i	is not permitted to au	nthorize you to lob	by unless the p	rincipal is re	gistered No
	3	period (calendar	I spends or will owe quarter), the principarters of the calendar	al must file expens	• •	•	
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Date _			Signature				1
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City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support	The state of the s	1		
Oppose			***	
Neither support nor oppose				
I wish to speak				
Available for information only				
Name, address and telephone number of BPW'S PWC++6R-3Y	OY)	gamzanon you are represe	nung.	
Are you being paid for your representa	tion?		☐ Yes ☐ No	
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	r paid duties for this ed not complete the	s person or organization? rest of this form. If you a	Yes No	
Speaking Limit:		4 minutes		
	(\$00.	Rack)		
REGISTRANT #				
		REGIS '	TRANT #	

	ou an e mental	lected official who is body?	appearing solel	y on behalf of yo	ur office or fo	your munic	ipality or other
		red "yes" to the question ou answered "no" to the				orm, except the	at you must sign
If you that:	are beir	ng paid for your repres	entation, or if y	our appearance is	part of other pa	aid duties, do	you understand
	1.	Before you engage in with the City Clerk?	lobbying as a lo	bbyist, you or you	r principal mus	t file an autho	rization ∐ No
	2.	Your principal is not with the City Clerk?	permitted to au	thorize you to lob	by unless the p	orincipal is re	gistered □ No
	3	If your principal spen period (calendar quart the remaining quarters	er), the principa	il must file expens	r lobbying serv e statements w	rices in any reith the City C	eporting lerk for No
(If you Office o	answer at Room	red "no" to any of the l n 103 of the City-County	ast three questic Building, Madi	ons, please call the ison, for more info	City Clerk at 2 mation)	266-4601 or g	o to the Clerk's
Date _	9/	20/05	Signature	Bond	23.	Stor	
	/	•	Print Name	31240AOA	L, 3+	Eucut	2N)

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	· Leann Bl	uske	
Agenda No. 29	Addı	ess 707 W.M	ain State	
3	1144	AAA AAAA	WI 53715	
		IVWALISHA,	WI 03 113	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support	X		×	
Oppose		<u></u>		
Neither support nor oppose	-			
I wish to speak				
Available for information only				
Are you being paid for your representa	tion?		Yes No	
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	r paid duties for this ed not complete the	s person or organization? rest of this form. If you	Yes No answered "yes," go on to the next	
Speaking Limit:	*****************	4 minutes		
	(Spe	Back)		
REGISTRANT #				
·				
		REGIS	TRANT#	

		elected official who is appearing solely on behalf of your office or for your municipality or other 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 that:	are be	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
	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 the principal is registered with the City Clerk? Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	· SARAPHINA	IH BENAVIDES ISHNIGTON AVE #48
Agenda No. 29	Addı	ress 380 W. WA	SHALL LOT AVE A 418
		MADISON.	
		INTADISON	W/ 33/3
Please check the appropriate boxes:			
Trease check the appropriate boxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	X	X	×
Oppose			
Neither support nor oppose			
I wish to speak			
I I WISH to Speak			
Available for information only At this meeting are you representing an (If you answered "no," STOP; you nee question.)	d not complete the	rest of this form. If you ar	nswered "yes," go on to the next
Available for information only At this meeting are you representing an (If you answered "no," STOP; you nee question.)	d not complete the	rest of this form. If you ar	nswered "yes," go on to the next
Available for information only At this meeting are you representing an (If you answered "no," STOP; you nee question.) Name, address and telephone number of	d not complete the	rest of this form. If you ar	nswered "yes," go on to the next
Available for information only At this meeting are you representing an (If you answered "no," STOP; you nee question.) Name, address and telephone number of the you being paid for your representation. Are you appearing as part of your other (If you answered "no," STOP; you nee	f each person or or or ion?	ganization you are represent	nting: Yes No
Available for information only At this meeting are you representing an (If you answered "no," STOP; you nee question.) Name, address and telephone number of the your being paid for your representate. Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	f each person or or or ion? paid duties for this d not complete the	ganization you are represent	nting: Yes No
Available for information only At this meeting are you representing an (If you answered "no," STOP; you nee question.) Name, address and telephone number of the your being paid for your representation. Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	f each person or or or ion? paid duties for this d not complete the	ganization you are represent ganization you are represent of organization? rest of this form. If you are rest of this form. If you are rest4 minutes	nswered "yes," go on to the next
	f each person or or or ion? paid duties for this d not complete the	ganization you are represent ganization you are represent ganization? s person or organization? rest of this form. If you are	nting: Yes No

	ou an o	lected official who is appearing solely on behalf of your office or for your municipality or other body?	
		ed "yes" to the question, STOP . You need not complete the rest of this form, except that you must sign on answered "no" to the question, go on to the next question.)	
If you that:	are be	ng paid for your representation, or if your appearance is part of other paid duties, do you understand	
	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 the principal is registered with the City Clerk?	
	3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?	
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's a 103 of the City-County Building, Madison, for more information.)	
Date _	<u>.</u>	Signature	
		Print Name	
	~		4 1

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Subeck
MINION ROLTHA
01985
Repealing smoking ban
☐ Yes ☐ No
?

	ou an nmenta		is appearing solely on	behalf of your o	office or for y [our municipality of Yes \(\begin{array}{c}\) No	r other
			estion, STOP . You need no the question, go on to t			, except that you mu	ist sign
If you that:	are be	ing paid for your re	presentation, or if your a	appearance is part	of other paid	duties, do you unde	erstand
	1	Before you engag with the City Cler	e in lobbying as a lobbyi k?	st, you or your pr		le an authorization Yes No	
	2.	Your principal is with the City Cler	not permitted to authori	ze you to lobby	unless the prir	cipal is registered Ves No	-
	3.	period (calendar o	spends or will owe more quarter), the principal mu rters of the calendar year	ist file expense st			
			the last three questions, pounty Building, Madison,			-4601 or go to the (Clerk's
Date _			Signature				
		,	Print Name				
					9		
					· · · · - · · - · · - · · - · · - · · - · · - · · - · · - · · - · · - · · - · · - · · · - ·		

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addı	ess 134 Laken Madeson	elsen Jood Gardens , WI 53704
Please check the appropriate boxes:			,
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Oppose			
Neither support not oppose			
I wish to speak			
Available for information only At this meeting are you representing an of (If you answered "no," STOP; you need question.)	l not complete the	e rest of this form. If you a	inswered "yes," go on to the next
At this meeting are you representing an of (If you answered "no," STOP; you need question.) Name, address and telephone number of Are you being paid for your representation. Are you appearing as part of your other part (If you answered "no," STOP; you need to the property of the part of your answered "no," STOP; you need to the part of your other part of your answered "no," STOP; you need to the part of your other part of your answered "no," STOP; you need to the part of your other part of your answered "no," STOP; you need to the part of your other part of your answered "no," STOP; you need to the part of your other part of your other part of your answered "no," STOP; you need to the part of your other part of your other part of your other part of your answered "no," STOP; you need to the your other part of your oth	each person or or one	ganization you are representation?	enting: Yes No
At this meeting are you representing an of (If you answered "no," STOP; you need question.) Name, address and telephone number of Are you being paid for your representation.	each person or or one on? on? onder duties for this is not complete the	ganization you are representation? s person or organization? rest of this form. If you a	enting: Yes No

-	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
		red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)
If you that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	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 the principal is registered with the City Clerk? Yes No
	3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's In 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Jacques	lyn Strahl
Agenda No. 29	Addı	ress 5240 h	tarbor Ct.
		Patison	11/7-5320r
Please check the appropriate boxes:		- Mary Joseph	
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	V/astres	4. 1	
Oppose			
Neither support nor oppose			
I wish to speak			*
Available for information only			/ -
Name, address and telephone number of	of each person or or	ganization you are represe	nting:
Are you being paid for your representat	tion?		☐ Yes ☑ No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	r paid duties for thi ed not complete the	s person or organization? erest of this form. If you ar	Yes No nswered "yes," go on to the next
Speaking Limit:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4 minutes	
DECISTRANT # 83	(See	Back)	

Are you an	body?
1 2 ./	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)
If you are b that:	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
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 the principal is registered with the City Clerk? Yes No
3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date	Signature
`	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e EMILY KETTU	
Agenda No. 29	Add	ress 1107 E.M.P.	in #4
		MADISON, WI	· ·
		1-11-11-11-11-11-11-11-11-11-11-11-11-1	
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	×	× ×	×
Oppose	f		
Neither support nor oppose			
I wish to speak			*
Available for information only			
(If you answered "no," STOP; you need question.) Name, address and telephone number of 5 AND DLT PAR 301 No.	each person or or	ganization you are represen	nting:
Are you being paid for your representation. Are you appearing as part of your other part	oaid duties for thi	s person or organization?	Yes No
(If you answered "no," STOP; you need question.) Speaking Limit:	not complete the		swerea yes, go on to the next
REGISTRANT # 82		Back)	

Are you a governme	body? Solely on behalf of your office of for your municipality of other lands?
	ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question.)
If you are that:	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	000 200	1258-1 B
Please check the appropriate boxes:			
Support	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Oppose Neither support nor oppose I wish to speak Available for information only			> /
At this meeting are you representing an (If you answered "no," STOP; you need question.) Name, address and telephone number of	d not complete the	e rest of this form. If you a	inswered "yes," go on to the next
Are you being paid for your representation Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this	s person or organization? erest of this form. If you a	Yes No Yes No nswered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
REGISTRANT # 66	(See	Back)	

***		elected official who is appearal body?	aring solely	on behalf of you	r office or for	your muni	cipality or o	ther
		vered "yes" to the question, SI you answered "no" to the que,				m, except ti	hat you must	sign
If you that:	are be	eing paid for your representat	ion, or if yo	ur appearance is p	art of other pai	d duties, de	you unders	tand
	1	Before you engage in lobby with the City Clerk?	ying as a lob	byist, you or your	principal must	file an auth	orization No	
·	2	Your principal is not perm with the City Clerk?	uitted to auth	norize you to lobb	y unless the pr	incipal is r	registered No	
	3.	If your principal spends or period (calendar quarter), t the remaining quarters of the	he principal	must file expense				
		vered "no" to any of the last th om 103 of the City-County Buil				66-4601 or	go to the Cle	rk's
Date _		Si	gnature	***			· · · · · · · · · · · · · · · · · · ·	
		Pı	int Name					

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e NAMHEW So	BOCNSICI
Agenda No. 29	Addı	ress 641 W. N	MAN 50 # 310
		MADISON	W 53703
· · · · · · · · · · · · · · · · · · ·		1 2 2 2 2 2	
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	X		
Oppose			
Neither support nor oppose			
I wish to speak		X	<u> </u>
Available for information only		'	
At this meeting are you representing an o (If you answered "no," STOP; you need question) Name, address and telephone number of entire the Cashad Restaution 19 E MAIN 5570	not complete the each person or or RANT	e rest of this form. If you	answered "yes," go on to the next
Are you being paid for your representation	n?		☐ Yes 💆 No
Are you appearing as part of your other p. (If you answered "no," STOP; you need question.)	aid duties for this not complete the	s person or organization? rest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
_	(See	Back)	
REGISTRANT # 65	•		

Are you a	elected official who is appearing solely on behalf of your office or for your municipality or other tal body?
	wered "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 that:	being paid for your representation, or if your appearance is part of other paid duties, do you understand
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 the principal is registered with the City Clerk?
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	vered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's com 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY				
	Name BRIAN HALTINNER Address 117A E. MAIN STI MADISON, WI 53703			
Agenda No. 29	Add	ress 1174 F. M	AND STI	
	Add	1000 <u> </u>	. 501-	
		MADISON, W	1 53/03	
Please check the appropriate boxes:			1	
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support			V	
Oppose				
Neither support nor oppose				
I wish to speak		V	V	
Available for information only				
(If you answered "no," STOP; you no question) Name, address and telephone number				
Are you being paid for your represent	ation?		☐ Yes ☐ No	
Are you being paid for your represent	auton;	,		
Are you appearing as part of your other (If you answered "no," STOP; you no question)	er paid duties for thi eed not complete the	s person or organization? e rest of this form. If you	Yes No answered "yes," go on to the next	
Speaking Limit:		4 minutes		
. •	(See	Back)		
REGISTRANT # 63	_			

Are you governm		lected official who is appearing solely on behalf of your office or for your municipality or other body?				
(If you a this form	nswere i. If you	ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question)				
If you an that:	re bein	ng paid for your representation, or if your appearance is part of other paid duties, do you understand				
1	L	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No				
		Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No				
3		If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?				
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)						
Date	9/	Signature A BRIAN AMERICAN SIGNATURE BRIAN SIGNATUR				

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

FRINT NAME CLEARLY			AVIE CLEARUI
	Nam	e Tasaca	Semover
Agenda No. 29		\ \land	an St studi
Agenua No. 29	Addı	ress 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	W 31. #FD
		Manse	N 53102
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	X	X	X
Oppose			
Neither support nor oppose			
I wish to speak			X
Available for information only			
(If you answered "no," STOP; you nee question.) Name, address and telephone number of			
Are you being paid for your representat	ion?		☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for thi d not complete the	s person or organization? erest of this form. If you	☐ Yes ☐ No answered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT# 61	(See	Back)	

	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? Yes No					
		red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)				
If you that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand				
	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 the principal is registered with the City Clerk?				
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?				
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)				
Date _	9.	Signature Print Name Signature Print Name Signature Print Name				

City of Madison Registration Statement - Common Council

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	PRINT NAME CLEARLY			
Agenda No. 29	Nam Addi		RELLY HARRES SE Grove Pa WL 537/6	
Please check the appropriate boxes:			-	
Support	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban	
Oppose Neither support nor oppose				
I wish to speak Available for information only				
At this meeting are you representing an of (If you answered "no," STOP; you need question.) Are you being paid for your representation. Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	not complete the each person or	ganization you are repressing the property of this form. If you do not rest of this form. If you do not rest of this form. If you do	enting: Yes No	
Speaking Limit:	*************	4 minutes		
REGISTRANT #	(See	Back)		

REGISTRANT # ___

Are you governm		elected official who is appearing solely on behalf of your office or for your municipal body?	ality or other
		ered "yes" to the question, STOP. You need not complete the rest of this form, except that you answered "no" to the question, go on to the next question.)	you must sign
If you a that:	re beir	ing paid for your representation, or if your appearance is part of other paid duties, do you	ou understand
:	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorize with the City Clerk?	zation] No
2	2	Your principal is not permitted to authorize you to lobby unless the principal is regis with the City Clerk?	stered] No
3	3	If your principal spends or will owe more than \$500 for lobbying services in any report period (calendar quarter), the principal must file expense statements with the City Clear the remaining quarters of the calendar year?	orting ik for] No
		ared "no" to any of the last three questions, please call the City Clerk at 266-4601 or go t m 103 of the City-County Building, Madison, for more information.)	to the Clerk's
Date 4	120	0/05 Signature Patricic Harrison	
	* * * * * * *		

City of Madison Registration Statement - Common Council

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AKL I	AVIE CLEA	PRINTIN				
3719	ell de Ros Wis	JPASAINA SS DRIB MA	Nam Addr	agenda No. 29		
				lease check the appropriate boxes:		
01985	0	01881	01880			
ng smoking ban	-	Hardship Exemption	Referendum			
				Support		
<u>·</u>	~			Oppose		
· · ·				Neither support nor oppose		
			t.	I wish to speak		
				Available for information only		
No No	Yes		?	Are you being paid for your representation?		
	☐ Yes inswered "yes,"			re you appearing as part of your other part you answered "no," STOP; you need testion.)		
		4 minutes	•••••	peaking Limit:		
		ack)	(See E	EGISTRANT#		
T #						

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	u an el mental	lected official who is appearing solely on behalf of your office or for your municipality or other body?
		ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question.)
If you that:	are beir	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you Office d	answere it Room	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		IRININA	WIE CEEARCE I		
	Nam	Name <u>Caleb Pourchot</u> Address <u>406 SHEARWATER ST.</u>			
Agenda No. 29	Address YOG SHEARWATER ST.				
		MANGONILI	MADSON, WI S3714		
		- indisoro; a	. 22.13		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support	X				
Oppose		X	<u> </u>		
Neither support nor oppose					
I wish to speak					
Available for information only	<u> </u>				
Are you being paid for your representation	on?		☐ Yes ☐ No		
Are you being paid for your representation	0112				
Are you appearing as part of your other if (If you answered "no," STOP; you need question.)	paid duties for this I not complete the	s person or organization? rest of this form. If you ar	☐ Yes ☐ No nswered "yes," go on to the next		
Speaking Limit:	***************************************	4 minutes			
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REGISTRANT #					
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	ou an o		ho is appearing solely of	on behalf of your offic	e or for your mun	icipality or other
		,	uestion, STOP. You need to the question, go on to	-	f this form, except i	hat you must sign
If you that:	are bei	ing paid for your	representation, or if your	r appearance is part of	other paid duties, d	o you understand
	1	Before you enga with the City Cl	nge in lobbying as a lobb erk?	yist, you or your princi	pal must file an aut	norization No
	2.	Your principal with the City Cl	is not permitted to author erk?	orize you to lobby unle	ss the principal is Yes	registered No
	3.	period (calendar	I spends or will owe mo quarter), the principal r parters of the calendar ye	nust file expense staten		
			f the last three questions County Building, Madiso			go to the Clerk's
Date _			Signature _			
			Print Name			#
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	****	*****				

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		FRINT NAME CLEARLY			
	Nam	Name Kein Klepper Address 444 West Main Apt 303 Mydison Wil 53703			
Agenda No. 29	Addı				
3	1144				
		MANINA	W £ 33/03		
Please check the appropriate boxes:					
Trease cheek the appropriate coxes.					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support	X				
Oppose		X	X		
Neither support nor oppose					
I wish to speak					
Available for information only					
			☐ Yes ☐ No		
Are you being paid for your represe	ntation?		Lies Lino		
Are you appearing as part of your of (If you answered "no," STOP; you question)	ther paid duties for thin need not complete the	s person or organization? erest of this form. If you a	Yes No No nswered "yes," go on to the next		
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	ou an e imental	elected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
		red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)
If you that:	are bein	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	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 the principal is registered with the City Clerk?
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's a 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name
with this such your will to		

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NA	AME CLEARLY		
	Nam	Name VITO CERNIGUER			
Agenda No. 29	Name VITO CERNIGUER Address 7437 SAWMILL RO MAOTION, WI 53717				
		T. (MO. 2)			
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support	X		X		
Oppose		X	***		
Neither support nor oppose		(
I wish to speak					
Available for information only					
	· ·				
Are you being paid for your representation?			☐ Yes X No		
Are you appearing as part of your other (If you answered "no," STOP; you need question.)					
Speaking Limit:	*****************	4 minutes			
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REGISTRANT #					
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Are you governm		lected official who is appearing solely on behalf of your office or for your municipality or othe body?	r		
(If you at	(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.)				
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1		Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No			
2	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?			
3	,	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?			
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information)					
Date	9	25-5 Signature 114 114	_		
		Print Name VTTO CMNIGLIA			