

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

<b>Agenda No.</b>	<b>29</b>
-------------------	-----------

Name Russell Novkov  
Address 4817 Sheboygan Ave 508#  
Madison WI 53705-2917

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>		
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No.	29
------------	----

Name Elizabeth Ament-Pudloski  
 Address 132 S. Hancock St  
Madison 53703

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			

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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

**Registration Statement - Page 2**

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

**Agenda No.     29**

Name Patty Barkowski  
Address 3650 S Sunset Dr  
Milwaukee, WI 53220

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			

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 question.)*

Name, address and telephone number of each person or organization you are representing:  
American Heart Assn

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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 9/20/05

Signature P Borkowski

Print Name P Borkowski

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No.     29
-------------------

Name     MATT KARN  
Address 1330 Dewey Ct.

Please check the appropriate boxes:

	<del>01880 Referendum</del>	<del>01881 Hardship Exemption</del>	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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.)*

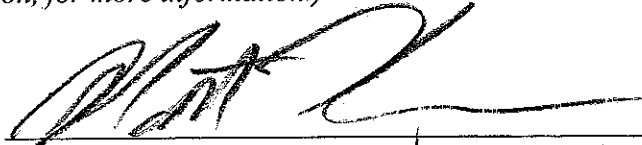
If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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?  Yes  No

*(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 9.20.05

Signature



Print Name

MATT KARN



City of Madison  
Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY

Agenda No. 29

Name Eric Hochkammer  
Address 311 N. Hancock St #330  
Madison, WI 53703

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 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:  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.)

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 Limit: .....4 minutes

(See Back)

REGISTRANT # \_\_\_\_\_

REGISTRANT # \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

<p><b>Agenda No.      29</b></p>
----------------------------------

Name Chuck Litweller  
 Address 5 LUKKEN COURT  
MADISON WI 53704

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<u>YES</u>		<u>ONLY IF THE TAVERNS</u>
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 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 Limit:** ..... 4 minutes

*IN THE EXPENSE TO THE CITY + THE UNIVERSITY OF POLICING HALLOWEEN ABOVE  
 THE AVERAGE COST OF POLICING ON HOME FOOTBALL SATURDAYS FOR THE PREVIOUS  
 YEAR (LESS ANY MONEY COLLECTED IN FINES)*

**REGISTRANT #** \_\_\_\_\_

**REGISTRANT #** \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

<b>Agenda No.      29</b>
---------------------------

Name Matthew Eisele  
 Address 1107 East Mifflin  
Madison, WI 53703

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X	X	X
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 question.)*

Name, address and telephone number of each person or organization you are representing:  
Sandlot / North 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No.	29
------------	----

Name DANIEL G GLENN JR  
 Address 132 E Wilson  
MADISON WI

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Oppose		<input checked="" type="checkbox"/>	
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_



### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No. <b>29</b>
----------------------

Name

Ryan Stoflet

Address

4701 Hayes RD #209

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 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:  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.)*

Name, address and telephone number of each person or organization you are representing:  
Bruce Stoflet 33 Harding St 242-7960 Anchor Inn

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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No. <b>29</b>
----------------------

Name     Patricia K. Wolden  
Address 1325 Troy Dr.  
Madison, WI. 53704

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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 question.)*

Name, address and telephone number of each person or organization you are representing:  
Bru's Anchor Inn

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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 9-20-05

Signature

Patricia K. Walden

Print Name

Patricia K. Walden

City of Madison  
Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY

Agenda No. 29

Name Bruce Stoltz  
Address 33 Harding St  
Mad WI 53714

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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 question.)

Name, address and telephone number of each person or organization you are representing:  
BRU'S Anchor Inn 1970 Atwood Ave Madison

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 Limit: .....4 minutes

(See Back)

REGISTRANT # \_\_\_\_\_

REGISTRANT # \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No. **29**

Name BRENDA STEVENSON  
Address 1309 N SHERRMAN AVE  
MADISON WA 98104

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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 question.)*

Name, address and telephone number of each person or organization you are representing:

Bonus Anchor Inn

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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 9/20/05

Signature Brenda L. Stewart  
Print Name BRENDA L. STEWART



**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

**Agenda No. 29**

Name Lecann Blaske  
Address 707 W. Main St. #1  
Madison, WI 53715

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X		X
Oppose		X	
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date: September 20, 2005

### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No.	29
------------	----

Name SARAPHIAH BENAVIDES  
 Address 300 W. WASHINGTON AVE # 418  
MADISON, WI 53703

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X	X	X
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

**Agenda No. 29**

Name Lisa Subeck  
Address 818 S. Gammann Rd. #4  
Madison, WI 53719

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Oppose			<input checked="" type="checkbox"/>
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

City of Madison  
Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY

Agenda No.	29
------------	----

Name Zerik Nielsen  
 Address 134 Lakewood Gardens Le  
Madison, WI 53704

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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 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 Limit: .....4 minutes

(See Back)

REGISTRANT # \_\_\_\_\_

REGISTRANT # \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_



**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No. <b>29</b>
----------------------

Name Jacquelyn Strahl  
 Address 5240 Harbor Ct.  
Madison, WI 53201

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/> <i>lastresort</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Oppose			
Neither support nor oppose			
I wish to speak			<input checked="" type="checkbox"/>
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # 83**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

- 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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

**PRINT NAME CLEARLY**

Agenda No.      29
--------------------

Name EMILY KETU  
 Address 1107 E. MIDFLIN #4  
MADISON, WI 53703

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X	X	X
Oppose			
Neither support nor oppose			
I wish to speak			X
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 question.)

Name, address and telephone number of each person or organization you are representing:  
SANDOLT BAR 301 NORTH ST. MADISON, WI 53704

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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # 82**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

City of Madison  
Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY

Agenda No. 29

Name Carol Thompson  
Address PO Box 25915  
Madison

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 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:  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.)

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 Limit: .....4 minutes

(See Back)

REGISTRANT # 66

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

- 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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

**PRINT NAME CLEARLY**

Agenda No.	29
------------	----

Name MATHEW SOBOCINSKI

Address 641 W. MAIN ST # 310  
MADISON, WI 53703

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		X	X
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 question.)

Name, address and telephone number of each person or organization you are representing:

THE CASBAH RESTAURANT  
119 E. MAIN ST  
MADISON, WI 53703

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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # 65**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_



Date: September 20, 2005

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No. **29**

Name BRIAN HALTINER  
Address 117A E. MAIN ST.  
MADISON, WI 53703

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Oppose			
Neither support nor oppose			
I wish to speak	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # 63**

Registration Statement - Page 2

Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

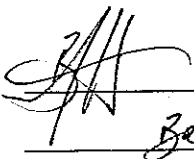
(If you answered "yes" to the question, **STOP**. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)

If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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?  Yes  No

(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 9/20/5

Signature   
Print Name Brian Hactinnet

Date: September 20, 2005

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No. **29**

Name Jessica Seemeyer  
Address 1 E. Gilman St. #401  
Madison 53703

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X	X	X
Oppose			
Neither support nor oppose			
I wish to speak			X
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 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 Limit: .....4 minutes**

(See Back)

REGISTRANT # 61

Registration Statement - Page 2

Are you an elected official 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.)*

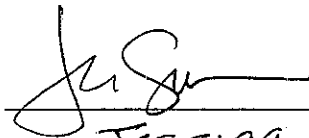
If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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?  Yes  No

*(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 9-20-05

Signature



Print Name

Jessica Seemeyer

### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No.	29
------------	----

Name TRISH KELLY HARRISON  
 Address 521 Cottage Grove Rd  
Madison, WI 53716

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Oppose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neither support nor oppose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I wish to speak	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Available for information only	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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 question.)*

Name, address and telephone number of each person or organization you are representing:  
Winnie's LLC  
521 Cottage Grove Rd, Madison

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 Limit: .....4 minutes**

(See Back)

REGISTRANT # 92

REGISTRANT # \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

(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 9/20/05

Signature   
Print Name Patricia Harrison

### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

**Agenda No. 29**

Name JP Aspinwall  
Address 2913 Maple Run Dr  
Madison WI 53719

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Oppose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neither support nor oppose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I wish to speak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Available for information only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT # \_\_\_\_\_**

**REGISTRANT # \_\_\_\_\_**

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_



### City of Madison Registration Statement - Common Council

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No.	29
------------	----

Name Caleb Pourchot  
 Address 406 SHEARWATER ST.  
MADISON, WI 53714

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X		
Oppose		X	X
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT #** \_\_\_\_\_

**REGISTRANT #** \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

**City of Madison  
Registration Statement - Common Council**

*You must register before the Council considers your item.*

**PRINT NAME CLEARLY**

Agenda No.     29
-------------------

Name Kevin Klepper  
 Address 444 West Main Apt 303  
Madison WI 53703

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	<input checked="" type="checkbox"/>		
Oppose		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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 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 Limit: .....4 minutes**

(See Back)

**REGISTRANT #** \_\_\_\_\_

**REGISTRANT #** \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

City of Madison  
Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY

Agenda No. 29

Name VITO CERNEGLIA  
Address 7437 SAWMILL RD  
MADISON, WI 53717

Please check the appropriate boxes:

	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	X		X
Oppose		X	
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 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 Limit: .....4 minutes

(See Back)

REGISTRANT # \_\_\_\_\_

REGISTRANT # \_\_\_\_\_

Registration Statement - Page 2

Are you an elected official 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, do you understand that:

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?  Yes  No

*(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 9-20-5

Signature   
Print Name VERO CERVAENTES