



# **AVAILABLE TO ANSWER QUESTIONS FORM**

Registra	tion Statement -	Common Cou	uncil		
J		COMMITTEE			
		PLEASE P	RINT CLEARLY	. 1	
	8	Name	Ilan Inac	utens.	erg
Agenda No	7	Address	33 East N	rien St	#500
			madeson	1	
Please check	one:	AND	Please che	ck:	
Support Support			Availa	ble to answ	/er
Oppose			questic		
Neither !	Support Nor Op	pose	,		
(If you answered "no	you representing an orga o," STOP; you need no t and go on to the next q	t complete the rest of t	•	☐ Yes   wered "yes," pr	☐ No rovide the name
Name, address and to	elephone number of eac	h person or organizati	on you are represent	ting:	
***************************************					
Are you being paid f	or your representation?			☐ Yes	No.
	s part of your other paid o, "STOP; you need not			☐ Yes /[ wered "yes," go	No o on to the next
Speaking Limits:		nmon Council)5 m 3 m			

Are you an	elected of	fficial or	employee	who is	appearing	solely or	behalf	of your	office of	or for you	rymunicipa	lity or
other gover	rnmental b	ody?							Ε	Yes	No)	
J	٠	•									7	
	•			arean .	T7 7					1	,  ,	

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

If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:

- 1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
- 2. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
- 3. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?

(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)

Date 2 28 12

Signature

Print Name





# **AVAILABLE TO ANSWER QUESTIONS FORM**

Registration Statement	Common C	Council
· · · · · · · · · · · · · · · · · · ·	PLEASE	E PRINT CLEARLY
9	Name	KANDOU MILBRATH
Agenda No	Address	RDG PLANNING & DESIGN
		OMAKS NE
Please check one:	AND	Please check:
Support		Available to answer
Oppose		questions
Neither Support Nor Opp	oose	
At this meeting are you representing an organ (If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next qu	complete the rest	on other than yourself:  Yes  No of this form. If you answered "yes," provide the name
Name, address and telephone number of each	person or organiz	zation you are representing:
ST Par ()NIVE	FSITY (	CATHOLIC CENTER
723 STATE S	, ,	
11111111111	- 1 /	15 40 47 7 5 4 7 7
Was 150		
Are you being paid for your representation?		Yes No
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not a question.)		son or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Comm		
Information Hearing Other Items		

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?					
	(If you answered "yes" to the question, <b>STOP</b> . 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 that:	If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:				
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?				
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)					
Date 2/28/12 Signature Print Name PANDUL MILBRATH					





# **AVAILABLE TO ANSWER QUESTIONS FORM**

Registra	tion Statement -	Common Council
<u></u>		PLEASE PRINT CLEARLY (LAND-GRAF) Name MARK LANDGRAF
	$\circ$	Name MARK LANDGRAF
Agenda No	4	Address 5964 Executive Dr
		MA/150N, W& 57719
Please check	one:	AND Please check:
Support		Available to answer
Oppose		questions
	Support Nor Op	ppose
(If you answered "n		anization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide the name question.)
Name, address and t	elephone number of eac	ch person or organization you are representing:
	411111111111111111111111111111111111111	
-		
Are you being paid f	or your representation?	☐ Yes ☐ No
		I duties for this person or organization? Yes No set complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:	- ·	nmon Council)5 minutes

•	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?  Yes Yes				
	red "yes" to the question, <b>STOP.</b> 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 bei that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised				
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?				
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)				
Date 2/2	8/12 Signature Mall				
	Print Name MARIC LANGUAF				





# Date: \_\_\_\_\_\_\_ \_\_\_AVAILABLE TO ANSWER QUESTIONS FORM

Registration Statement	Common Council COMMITTEE
	PLEASE PRINT CLEARLY
Agenda No.	Name ROBERT SUIDLEY Address 2211 RONCOL Set
Please check one:	AND Please check:
Support	<b>Available to answer</b>
Oppose	questions
Neither Support Nor Opp	pose
At this meeting are you representing an organ (If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next que Name, address and telephone number of each	complete the rest of this form. If you answered "yes," provide the name uestion.)
BWZ DOCKITE	TR 2211 PARMONTOR MIDRIETOR
831.290	2)
ST PULS CHAYOUL	- CUURCH 723 STATE ST
Are you being paid for your representation?	Yes No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mon Council) 5 minutes 3 minutes 3 minutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?				
	(If you answered "yes" to the question, <b>STOP.</b> 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 beithat:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised			
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.			
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?			
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)			
Date 2 28	Signature Print Name Print Name			



Date: 2/28/2012

### DO NOT WISH TO SPEAK FORM

Registration Statemen	nt - <u>Common Co</u>	uncil
Please Print		PRINT NAME CLEARLY
Agenda No.	EXPLICATION OF THE PROPERTY OF	Jeorge Andrew Conway 726 W. Main St. Apt 202 ladison, WI 53715
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose		
<b>☐</b> Neither Support Nor	Oppose	
At this meeting are you representing an (If you answered "no," STOP; you need of who you represent and go on to the notation.  Name, address and telephone number of	ed not complete the rest of next question.)	this form. If you answered "yes," provide the name
Are you being paid for your representat	tion?	☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," <b>STOP</b> ; you nee question.)	-	n or organization? Yes No This form. If you answered "yes," go on to the next
Information Hea	(Common Council)5 m aring3 m 3 m	ninutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?			
If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign his form. If you answered "no" to the question, go on to the next question.)			
If you are being paid for your reprethat:	esentation, or if your appearance is part of other paid duties, please be advised		
1. Before you engage in with the City Clerk.	lobbying as a lobbyist, you or your principal must file an authorization		
2. Your principal is not City Clerk.	t permitted to authorize you to lobby unless you are registered with the		
	nds or will owe more than \$1,000 for lobbying services in any reporting he principal must file expense statements with the City Clerk for the indar year?		
(Please go to the City Clerk's we Room 103 of the City-County Buildin	bsite <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ag, Madison, for more information.)		
Date 2/28/12	Signature J Checker Convey		
	Print Name G. In Green Conway		



Date: 1/28/12

### DO NOT WISH TO SPEAK FORM

### **CITY OF MADISON**

Registra	tion Statement -	Common Co	ouncil	
Please Print		PLEASE I	PRINT NAME CLEARLY	
Agenda No	q	Name	Blake A. Maly 129 W bosham St	
Please check	one:	AND	Please check:	
Support			Do not wish to speak	
Oppose				
Neither !	Support Nor Op	pose		
(If you answered "no of who you represen	t and go on to the next q	complete the rest of uestion.)	other than yourself: Yes No f this form. If you answered "yes," provide the tion you are representing:	г пате
Are you appearing as	for your representation?  s part of your other paid  o, "STOP; you need not		Yes No  n or organization? Yes Ano  this form. If you answered "yes," go on to the	ne next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 n	minutes	

(SEE BACK)

*	ther governmental body?				
	red "yes" to the question, <b>STOP.</b> 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 be that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised				
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?				
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)				
Date	Signature				
	Print Name				



Date:  $\frac{2/28/17}{}$ 

### DO NOT WISH TO SPEAK FORM

Registra	tion Statement -	COMMITTEE	ouncil		
Please Print		PI FASE	PRINT NAME CLE	ARI V	
Agenda No	9	Name _ Address _	Nicholas I. 129 W. Gor	Stabo	
Please check of	one:	AND	Please chec	ek:	
Support O			Do not	wish to sp	eak
□ Oppose □ Neither \$	Support Nor Op	pose			
(If you answered "no	you representing an orga o," <b>STOP;</b> you need no t and go on to the next q	t complete the rest o			No ovide the name
Name, address and to	elephone number of eac	h person or organiza	ation you are representi	ng:	
Are you being paid f	or your representation?	·		Yes [	∑ No
	s part of your other paid o, "STOP; you need no.				$\sum$ No on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	3	minutes		

Are you an el other governr	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?			
100	red "yes" to the question, <b>STOP.</b> 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 be that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised			
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.			
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?			
,	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)			
Date	Signature			
	Print Name			



Date: 3 28/12

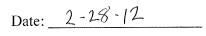
### DO NOT WISH TO SPEAK FORM

### **CITY OF MADISON**

Registratio	n Statement -	COMMITTEE	ouncil		
Please Print	·	PI FASE	PRINT NAME CLE	:ADI V	
			and the same of th		
$\mathcal{C}$		Name _	NICOF	ass Mi	· · · · · · · · · · · · · · · · · · ·
Agenda No		Address _	129 W. 6	30 (haun	St
Please check one	2.0	AND	Please che	ck:	
Support			Do not	t wish to s	peak
Oppose					
Neither Su	pport Nor Op	pose			
At this meeting are you (If you answered "no," of who you represent an Name, address and telep	<b>STOP;</b> you need not d go on to the next q	complete the rest of uestion.)	f this form. If you answ		No provide the name
Are you being paid for y	•			☐ Yes	
Are you appearing as par (If you answered "no," I question.)				☐ Yes wered "yes," {	No go on to the next
In	ublic Hearing (Cominformation Hearing)	3 r	ninutes		

(SEE BACK)

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
	ered "yes" to the question, <b>STOP.</b> 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 both	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date	Signature
	Print Name





# DO NOT WISH TO SPEAK FORM

Registration Statement -	COMMITTEE	ouncil	
Please Print	00,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PRINT NAME CLEA	\RLY
Agenda No	_	Sarah Thompson 114 State St. APT Madison, WI S	- 2
Please check one:	AND	Please chec	k:
<b>Support</b>	Economica de desente el cresculor de la companya de la repubblica de la companya de la companya de la companya	Do not	wish to speak
Oppose			
Neither Support Nor Op	pose		
At this meeting are you representing an orgalist (If you answered "no," STOP; you need not of who you represent and go on to the next of Name, address and telephone number of each	ot complete the rest of question.)	f this form. If you answ	ered "yes," provide the name
Are you being paid for your representation?	,		Yes No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need no question.)	d duties for this person of complete the rest of	on or organization? of this form. If you answ	☐ Yes
Information Hearing	mmon Council)5 g3	minutes	

Are you an e other government	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?				
	ered "yes" to the question, <b>STOP.</b> 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 be that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised				
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?				
	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)				
Date 2	2-28-12 Signature Sulf Hongs Print Name GARAH T. Thompson				



Date: <u>02/28/20</u>12

### DO NOT WISH TO SPEAK FORM

Registra	ation Statement -	Common C	ouncil		Marin angara na ay ann ay dan an da an ann an da an
Please Print	·		PRINT NAME CLE	ΔΡΙΥ	
Agenda No	9	Name	Alexandva 920 Sprin Madison	Longo	et Apt.
Please check	one:	AND	Please chec	ck:	
Support	t		Do not	t wish to s	speak
Oppose					
Neither	Support Nor Op	pose			
(If you answered "n of who you represen	you representing an organo," STOP; you need not and go on to the next question telephone number of each	t complete the rest of uestion.)	f this form. If you answ		No provide the name
Are you appearing a	for your representation? s part of your other paid o," STOP; you need not			☐ Yes ☐ Yes wered "yes,"	No □ No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3	minutes		

-		cted official or employed ental body?	e who is appea	aring solely on behalf of your of	fice or for you	ur municipality or
( ) )		ed "yes" to the question, u answered "no" to the q		eed not complete the rest of this ; n to the next question.)	form, except t	hat you must sign
If you a that:	ire bein	ng paid for your represer	ntation, or if y	your appearance is part of other	paid duties,	please be advised
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
:	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
;		If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?				
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)						
Date	02/	28/2012	Signature	Alexandlos	Blow	tgo
			Print Name	Alexandral	0/190	



Date:	<u> </u>	1281	12	
-------	----------	------	----	--

### DO NOT WISH TO SPEAK FORM

### **CITY OF MADISON**

Registration Statement -	Common C	ouncil
Please Print	PLEASE	PRINT NAME CLEARLY
Agenda No	Name _ Address _	Jayson Miller 179 W Garham Medison, WI 53703
Please check one:	AND	Please check:
Support  Oppose		Do not wish to speak
Neither Support Nor Op	pose	
At this meeting are you representing an orga (If you answered "no," <b>STOP</b> ; you need no of who you represent and go on to the next Q. Name, address and telephone number of each	t complete the rest of question.)	of this form. If you answered "yes," provide the name
Are you being paid for your representation?	•	☐ Yes ☐ No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need not question.)	<del>-</del>	on or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Com- Information Hearing) Other Items	3	minutes

(SEE BACK)

-	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?  Yes No			
	wered "yes" to the question, <b>STOP.</b> 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 t	being paid for your representation, or if your appearance is part of other paid duties, please be advised			
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.			
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?			
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)			
Date	Signature			
	Print Name			



Date: 2-/28/12

### DO NOT WISH TO SPEAK FORM

Registration Sta	atement - Common COMMITTEE	Council
Please Print	PLEAS	SE PRINT NAME CLEARLY
Agenda No.	Name ————————————————————————————————————	Ning Mallery
Please check one:	AND	Please check:
<b>Support</b>	•	Do not wish to speak
Oppose		
Neither Suppor	t Nor Oppose	
At this meeting are you represe (If you answered "no," STOP, of who you represent and go of Name, address and telephone r	; you need not complete the re n to the next question.)	st of this form. If you answered "yes," provide the name
Are you being paid for your rep	presentation?	☐ Yes ☐ No
Are you appearing as part of you (If you answered "no," STOP; question.)	<del>-</del>	erson or organization?  Yes No St of this form. If you answered "yes," go on to the next
Informa	Hearing (Common Council) ation Hearing	3 minutes

•	you an elected official or employee who is appearing solely on behalf of your office or for your municipality or governmental body?  Yes No							
		ed "yes" to the question, u answered "no" to the c		eed not complete the rest of this form, except that you must sign n to the next question.)				
If you that:	are beir	g paid for your represe	ntation, or if y	your appearance is part of other paid duties, please be advised				
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.						
	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.						
	3.		principal mus	nore than \$1,000 for lobbying services in any reporting at file expense statements with the City Clerk for the				
		the City Clerk's websi e City-County Building,		madison.com/clerk/index.html or go to the Clerk's Office at nore information.)				
Date _	2/	08/12	Signature	Ming Moday				
			Print Name	Nina Mallory				



### DO NOT WISH TO SPEAK FORM

### **CITY OF MADISON**

Registra	ntion Statement -	Common Co	ouncil		
Please Print		PLEASE I	PRINT NAME CLEA	<b>ARLY</b>	
Agenda No		NameAddress	NICK Rehk 129 W Gos Mordison W	2e, G Tham St 11 53	703
Please check	one:	AND	Please chec	k:	
<b>Support</b>	·		Do not	wish to s	peak
Oppose					
At this meeting are (If you answered "n	Support Nor Op  you representing an orga to, "STOP; you need not at and go on to the next q	nization or a person complete the rest of		☐ Yes ered "yes," p	No No provide the name
Name, address and t	telephone number of each	n person or organiza	tion you are representing	ıg:	
Are you being paid	for your representation?			Yes	☐ No
, ii	s part of your other paid o," STOP; you need not		O	☐ Yes eered "yes," g	No on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 n	ninutes		

(SEE BACK)

		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?						
		ed "yes" to the question, <b>STOP.</b> 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 a that:	re bein	ng paid for your representation, or if your appearance is part of other paid duties, please be advised						
		Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.						
2	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.						
:		If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?						
		the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ne City-County Building, Madison, for more information.)						
Date	<u>Q-2</u>	Signature Rehlers  Print Name Nick Rehlers						



Date: 02/28/12

### DO NOT WISH TO SPEAK FORM

Registra	tion Statement -	Common Co	uncil	
Please Print		DIEASE D	PRINT NAME CLEA	DI V
Agenda No	9	Name	Erin Simo II E Gorham Madison, W	r)
Please check	one:	AND	Please check	
Support	·		Do not v	vish to speak
Oppose				
Neither !	Support Nor Op	pose		
(If you answered "no of who you represen	you representing an orga o," STOP; you need not and go on to the next quelephone number of each	complete the rest of uestion.)	this form. If you answer	Yes No red "yes," provide the name
Are you being paid f	or your representation?			☐ Yes ☐ No
	s part of your other paid o, "STOP; you need not			Yes No red "yes," go on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 m	inutes	

•	re you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?						
	red "yes" to the question, <b>STOP.</b> 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 beinthat:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised						
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.						
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.						
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?						
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)							
Date $62$	Signature Print Name ERIN SIMON						



Date: 2 28/12

### DO NOT WISH TO SPEAK FORM

Registra	tion Statement -	COMMITTEE	<u>ouncil</u>
Please Print		PLEASE	PRINT NAME CLEARLY
Agenda No	9	Name _ Address _	Jane: Voelker 439 E Campus Mail #600 Madison, WI 53703
Please check of	one:	AND	Please check:
Support Oppose			Do not wish to speak
At this meeting are y (If you answered "no	Support Nor Op  ou representing an orga o, "STOP; you need now t and go on to the next q	nnization or a person t complete the rest of	other than yourself:
Name, address and to	elephone number of eac	h person or organiza	ation you are representing:
Are you being paid for	or your representation?		Yes No
	part of your other paid o," <b>STOP;</b> you need not	_	on or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3	minutes

•	an elected official or employee who is appearing solely on behalf of your office or for your municipality or vernmental body?							
	ed "yes" to the question, u answered "no" to the q			-	is form, excep	ot that you must sign		
If you are bein that:	g paid for your represer	ntation, or if	your appearance i	s part of oth	er paid dutie	s, please be advised		
	Before you engage in lowith the City Clerk.	bbying as a l	obbyist, you or yo	ur principal	must file an a	authorization		
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.							
	If your principal spends period (half year), the premainder of the calendar	principal mu	*	, ,				
Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)								
Date 2/2	8/12	Signature	Jone		2			
<i>l</i>	P	Print Name	VJane	(_ (_ )	10e 1k	<u>er</u>		



Date:  $\sqrt{2-37-12}$ 

### DO NOT WISH TO SPEAK FORM

Registration Statement -	COMMITTEE	ouncil
Please Print	PLFASE	PRINT NAME CLEARLY
Agenda No	Name	Amanda Detny 104 S. Brooks St. #404 Madison, WI 53715
Please check one:	AND	Please check:
<b>Support</b>		Do not wish to speak
Oppose		
Neither Support Nor Opp	pose	
At this meeting are you representing an orga (If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next q Name, address and telephone number of each	complete the rest of uestion.)	of this form. If you answered "yes," provide the name
St. Paul's University Catholic (	Tenter	(608) 258-3140
723 State Street		
Madison, WI 53703		
Are you being paid for your representation?		☐ Yes ☑ No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)		on or organization?
Speaking Limits: Public Hearing (Com- Information Hearing. Other Items	3	minutes

•	elected official or employee who is appearmental body?	ring solely on behalf of your office or for your municipality or Yes No					
	ered "yes" to the question, <b>STOP.</b> You ne you answered "no" to the question, go on	eed not complete the rest of this form, except that you must sign to the next question.)					
If you are bei hat:	eing paid for your representation, or if y	our appearance is part of other paid duties, please be advised					
1.	Before you engage in lobbying as a lo with the City Clerk.	bbyist, you or your principal must file an authorization					
2.	Your principal is not permitted to aut City Clerk.	horize you to lobby unless you are registered with the					
3.		nore than \$1,000 for lobbying services in any reporting t file expense statements with the City Clerk for the					
Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)							
Date $A - A$	77-12 Signature	Smanola & Detry					
	Print Name	Amanda Detry  Amanda Detry					



Date:  $\frac{2/28/70.2}{}$ 

### DO NOT WISH TO SPEAK FORM

### **CITY OF MADISON**

Registra	tion Statement -	Common C	ouncil		
Please Print		PLEASE	PRINT NAME CLE	EARLY	
Agenda No.	9	NameAddress	Crystal E 111 E Gor Marison,	ham St	# 2
Please check	one:	AND	Please che	ck:	
<ul><li>Support</li><li>□ Oppose</li><li>□ Neither</li></ul>	Support Nor Op	pose	Do no	t wish to sp	eak
(If you answered "n of who you represen	you representing an orga o," STOP; you need not t and go on to the next q elephone number of eac	t complete the rest of the complete the rest of the complete the rest of the complete the complete the complete the complete the complete the complete the rest of the complete the complete the complete the rest of the complete	of this form. If you ans	swered "yes," pr	☑ No ovide the name
Are you being paid t	for your representation?			Yes [	☐ No
	s part of your other paid o," <b>STOP;</b> you need not	<del>-</del>	_	Yes [ swered "yes," go	No on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3	minutes		

(SEE BACK)

•		cted official or employee ental body?	e who is appear	ring solely on behalf of	your office or for you  Yes	r municipality or	
100		ed "yes" to the question, u answered "no" to the q		_	of this form, except to	hat you must sign	
If you that:	are beir	ng paid for your represer	ntation, or if yo	our appearance is part o	of other paid duties, p	blease be advised	
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.					
	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.					
	3.	If your principal spends period (half year), the remainder of the calendary	principal must				
		the City Clerk's websit e City-County Building,			<u>.html</u> or go to the (	Clerk's Office at	
Date _	2-1	8/2012	Signature Print Name	Col B=> Crystal	Burhana		
			1 11110 1 101110			· · · ·	



Date: 2 28/12

## DO NOT WISH TO SPEAK FORM

Registration Statement	t - Common Council COMMITTEE		
Please Print	PLEASE	PRINT NAME CLEARI	LY
Agenda No.	NameAddress	Nicole Campus 439 E. Campus Madison, WI	
Please check one:	AND	Please check:	
Support		Do not w	ish to speak
Oppose			
Neither Support Nor O	ppose		
At this meeting are you representing an or (If you answered "no," STOP; you need no f who you represent and go on to the next.  Name, address and telephone number of each	not complete the rest of t question.)	f this form. If you answere	Yes No No d "yes," provide the name
Are you being paid for your representation?			]Yes ☑No
Are you appearing as part of your other part (If you answered "no," STOP; you need n question.)			Yes No d "yes," go on to the next
Information Hearin	mmon Council) 5 1 g 3 1	ninutes	

Are you an el other governn		e who is appear	ring solely on behalf of your office or for your municipality or  Yes No	
	red "yes" to the question, ou answered "no" to the c		ted not complete the rest of this form, except that you must sign to the next question.)	
If you are be	ing paid for your represe	ntation, or if ye	our appearance is part of other paid duties, please be advised	
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.			
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?			
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)				
Date <u>2/28/12</u>		Signature	Mid an	
(	l.	Print Name	Nicole Came	



Date: 2/28/17	_
---------------	---

Registrati	on Statement -	Common Co	ouncil		
Please Print		PLEASE	PRINT NAME CLI	EARLY	
Agenda No			Lindsen He Moduson WI	•	Apt 601
Please check or	ne:	AND	Please che	eck:	
Support	!		Do no	ot wish to s	peak
Oppose					
Neither S	upport Nor Op	pose			
(If you answered "no, of who you represent	ou representing an orga "STOP; you need not and go on to the next q ephone number of eac	t complete the rest of question.)	f this form. If you an		No provide the name
Are you being paid fo	r your representation?			Yes	No
Are you appearing as (If you answered "no, question.)	part of your other paid " STOP; you need no	duties for this person to complete the rest of	on or organization? of this form. If you an	Yes yswered "yes," ;	No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	3	minutes		

Are you an el other governn	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?				
	red "yes" to the question, <b>STOP.</b> 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 beithat:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised				
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?				
	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)				
Date <u>2/28</u>	Signature finder Hoppinger  Print Name Lindsey Hoppinger				



Date:	2-28-12

Registrat	ion Statement -	COMMITTEE	ouncii		MANAGEMENT AND
Please Print		PLEASE	PRINT NAME CLI	EARLY	
Agenda No	9		Ash Scarbron 129 W. Gorham Madisan W	St	
Please check o	ne:	AND	Please che	eck:	
<b>Support</b>			Do no	ot wish to s	speak
Oppose					
Neither S	upport Nor Op	pose			
(If you answered "no of who you represent	ou representing an orga "" STOP; you need not and go on to the next q	t complete the rest question.)	of this form. If you an.	swered "yes,"	X  No provide the name
Are you being paid fo	r your representation?			Yes	⊠ No
	part of your other paid " STOP; you need no.	-	_	☐ Yes swered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	3	minutes		

		cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?				
		ed "yes" to the question, <b>STOP.</b> 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 a that:	ıre bein	ng paid for your representation, or if your appearance is part of other paid duties, please be advised				
		Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
	3. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?					
		the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ne City-County Building, Madison, for more information.)				
Date 2-28-12 Signature Ash M. Scarbrough  Print Name Ash M. Scarbrough						



Registrati	on Statement -	Common (	Council			ı
Please Print		PLEASI	E PRINT NA	AME CLEARL	.Y	
Agenda No				vard Place	WI 5370	)3
Please check or	ie:	AND	Ple	ase check:		
Support Oppose				Do not wi	sh to speak	
At this meeting are yo (If you answered "no, of who you represent a Name, address and tel	" <b>STOP;</b> you need no. and go on to the next q	nnization or a pers t complete the res question.)	t of this form.	If you answere	☐ Yes  ☑ No d "yes," provide ti	'ie name
Are you being paid for Are you appearing as (If you answered "no, question.)	part of your other paid			lance lance	☐ Yes     No ☐ Yes     No d "yes," go on to	the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items		.3 minutes			

		cted official or employed ental body?	e who is appear	ing solely on behalf of your office or for your municipality or  Yes No		
		ed "yes" to the question, u answered "no" to the o		ed not complete the rest of this form, except that you must sign to the next question.)		
If you that:	are beir	ng paid for your represen	ntation, or if yo	our appearance is part of other paid duties, please be advised		
	1.	Before you engage in lowith the City Clerk.	obbying as a lob	obyist, you or your principal must file an authorization		
	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
	3.		principal must	ore than \$1,000 for lobbying services in any reporting file expense statements with the City Clerk for the		
		the City Clerk's websi e City-County Building,		nadison.com/clerk/index.html or go to the Clerk's Office at ore information.)		
Date _	Date 2/28/12 Signature Drive Obser  Print Name Iring Olson					
			Print Name	Iring Olson		



Date: 100 28 12

## DO NOT WISH TO SPEAK FORM

Registration S	tatement - Common Council
Please Print  Agenda No.	PLEASE PRINT NAME CLEARLY  Name ERC MIECSEN  Address 199 W. GORHAM
Please check one:  Support Oppose Neither Suppo	AND Please check:  Do not wish to speak  rt Nor Oppose
(If you answered "no," <b>STO</b> of who you represent and go  Name, address and telephone	senting an organization or a person other than yourself:  P; you need not complete the rest of this form. If you answered "yes," provide the name on to the next question.)  number of each person or organization you are representing:  Part Catholic Center
(If you answered "no," STO question.)  Speaking Limits: Public Inform	representation?  Yes No  your other paid duties for this person or organization?  Yes No  P; you need not complete the rest of this form. If you answered "yes," go on to the next  Hearing (Common Council)5 minutes  nation Hearing

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?  Yes No
	vered "yes" to the question, <b>STOP.</b> 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 b that:	being paid for your representation, or if your appearance is part of other paid duties, please be advised
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date: 220-/~

# DO NOT WISH TO SPEAK FORM

Registration Stat	tement - Common Council	
Please Print	PLEASE PRINT NAME CLEARL	Υ
Agenda No.	Name Address Address Address	i Ofk U6Mm TJ 549
Please check one:	AND Please check:	,
Support	Do not wis	sh to speak
Oppose		
Neither Support	Nor Oppose	
(If you answered "no," <b>STOP</b> ; y of who you represent and go on	nting an organization or a person other than yourself:  you need not complete the rest of this form. If you answered to the next question.)  Imber of each person or organization you are representing:	Yes No I "yes," provide the name
Are you being paid for your repr	resentation?	] Yes
	or other paid duties for this person or organization?	] Yes \( \sum \)No
Informati	earing (Common Council)5 minutes ion Hearing	

	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?		
	red "yes" to the question, <b>STOP.</b> 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 be that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised		
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.		
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.		
3.	. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?		
	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Date:	and a second	)	8	1	7

Registration Statement	- Common Committee	ouncil
Please Print		
	PLEASE	PRINT NAME CLEARLY
f 3	Name _	Trisha Robakauski
Agenda No.	· Address	3101 Stevens Street #4
		Madison WI 53705
Please check one:	AND	Please check:
Support		Do not wish to speak
Oppose		
Neither Support Nor O	ppose	
At this meeting are you representing an or (If you answered "no," STOP; you need to of who you represent and go on to the next	not complete the rest of	n other than yourself: Yes No of this form. If you answered "yes," provide the nam
Name, address and telephone number of e	ach person or organiza	ation you are representing:
St. Pauls University Catholic	Center	
723 State Street		
Madiso- WI 53703		
Are you being paid for your representation	n?	☐ Yes ☐ No
Are you appearing as part of your other pa (If you answered "no," STOP; you need need need to question.)		on or organization?  Yes No of this form. If you answered "yes," go on to the nex
Information Hearin	ommon Council) 5 ag	minutes

Are you an eleother governm		e who is appear	ing solely on behalf of your of	fice or for you	
	red "yes" to the question, ou answered "no" to the o		ed not complete the rest of this to the next question.)	form, except t	hat you must sign
If you are bei that:	ng paid for your represe	ntation, or if yo	ur appearance is part of other	paid duties, 1	please be advised
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?				
	the City Clerk's websi he City-County Building,		adison.com/clerk/index.html o ore information.)	r go to the (	Clerk's Office at
Date <u>2-28</u>	12	Signature	Lin Kalle. Trush Roberton sket		
		Print Name	Trush Robertonsket		



Date:	2	128
		7

Registration	on Statement	Common Co	uncil		
Please Print		PLEASE F	PRINT NAME CLE	ARLY	
Agenda No			jendra Eull LE Gilman	34.	
Please check on	e:	AND	Please chec	ek:	
Support Oppose			Do not	t wish to s	speak
	ipport Nor Op	pose			
At this meeting are you (If you answered "no," of who you represent at Name, address and tele	STOP; you need not and go on to the next question of each	complete the rest of uestion.)	this form. If you answ		☐ No provide the name
Are you being paid for	your representation?			☐ Yes	No
Are you appearing as p (If you answered "no," question.)				☐ Yes wered "yes,"	No go on to the next
	Public Hearing (Com Information Hearing. Other Items	3 r	ninutes		

•	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?			
	ered "yes" to the question you answered "no" to the		eed not complete the rest of this form, except that you must sign to the next question.)	
If you are be that:	ing paid for your repres	entation, or if y	our appearance is part of other paid duties, please be advised	
1.	Before you engage in with the City Clerk.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.		
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?			
	o the City Clerk's web. the City-County Building		madison.com/clerk/index.html or go to the Clerk's Office at more information.)	
Date 1	28/12	Signature	Mundra Evel	
		Print Name	herara tull	

Date: 2-28-11



# DO NOT WISH TO SPEAK FORM

Registrati	on Statement	COMMITTEE	ouncil		
Please Print  Agenda No.		PLEASE  Name  Address	PRINT NAME CLE  Northan Simu  129 W. Gorh  Madison, WII	110115	3
Please check or	ie:	AND	Please chec	ek:	
Support			Do not	t wish to s	peak
Oppose					
Neither S	upport Nor Opp	ose			
(If you answered "no, of who you represent o	u representing an orgar " <b>STOP;</b> you need not and go on to the next qu ephone number of each	complete the rest on the complete the rest on the complete the complet	of this form. If you ans		No provide the name
Are you being paid for	r your representation?			Yes	No
	part of your other paid on "STOP; you need not			☐ Yes wered "yes," {	∑No go on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3	minutes		

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?		
	gered "yes" to the question, <b>STOP.</b> 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 b that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised		
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.		
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.		
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?		
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at fithe City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Date: 02/73/12

## DO NOT WISH TO SPEAK FORM

Registration	Statement	COMMITTEE	ouncil		
Please Print		PLEASE	PRINT NAME CLE	ARLY	
Agenda No		Name	Teyla Alex Ve		
Please check one	:	AND	Please chec	ck:	
Support	_		Do not	t wish to s	speak
	<ul><li>□ Oppose</li><li>□ Neither Support Nor Oppose</li></ul>				
At this meeting are you re (If you answered "no," So of who you represent and Name, address and teleph	TOP; you need not cle go on to the next que	complete the rest o estion.)	f this form. If you ansv		☑ No provide the name
Are you being paid for yo	our representation?		1107	Yes	□No
Are you appearing as par (If you answered "no," S question.)	•	-	_	☐ Yes wered "yes,"	☐ No go on to the next
In	ublic Hearing (Comm formation Hearing ther Items	3	minutes		

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?		
	ered "yes" to the question, <b>STOP.</b> 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 b that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised		
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.		
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.		
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?		
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		