

Date: 3/12/09

**City of Madison  
Registration Statement – Equal Opportunities Commission**

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

Please Print

Agenda No. #4 (Leg. 12596)

Name Thuy pham - Remmele

Address Alder, District 20

Please check the appropriate boxes:

☒ **Support**

- ☒ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

☒ **Oppose**

- ☒ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: ☐ Yes ☐ No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

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

Sponsor of Curfew Amendment

Are you being paid for your representation?

☐ Yes ☒ No

Are you appearing as part of your other paid duties for this person or organization?

☐ Yes ☒ No

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

Speaking Limits: Public Hearing ..... 5 minutes  
Information Hearing ..... 5 minutes  
Other Items ..... 3 minutes

(See Back)

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

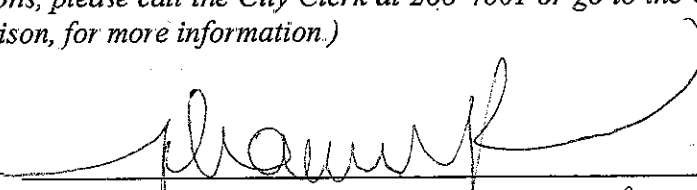
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)

Date

3/12/09

Signature

Print Name

  
Terry Han-Kemmerle

Date: 3/12/09

**City of Madison  
Registration Statement – Equal Opportunities Commission**

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Please Print

Agenda No. #4 (Leg. 12596)

Name

Stacy Harbaugh

Address

122 State St. #201

Please check the appropriate boxes:

☐

**Support**

- ☐ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions



**Oppose**

- ☐ Wish to speak  
☐ Do not wish to speak  
☒ Available to answer questions

At this meeting are you representing an organization or a person other than yourself:

☒ Yes

☐ No

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

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

ACLU of Wisconsin

122 State St. #201

Are you being paid for your representation?

☒ Yes

☐ No

Are you appearing as part of your other paid duties for this person or organization?

☒ Yes

☐ No

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

Speaking Limits: Public Hearing ..... 5 minutes  
Information Hearing ..... 5 minutes  
Other Items ..... 3 minutes

(See Back)

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

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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: 3/12/09

**City of Madison**  
**Registration Statement – Equal Opportunities Commission**

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Agenda No. #4 (Leg. 12596)

Name Marisha Ash

Address 6 Katherine Ct.

Please check the appropriate boxes:

☐

**Support**

- ☐ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

☒

**Oppose**

- ☐ Wish to speak  
☐ Do not wish to speak  
☒ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: ☒ Yes ☒ No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

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

~~XXXXXXXXXXXX~~

Are you being paid for your representation?

☐ Yes ☒ No

Are you appearing as part of your other paid duties for this person or organization?

☐ Yes ☒ No

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

Speaking Limits: Public Hearing ..... 5 minutes  
Information Hearing ..... 5 minutes  
Other Items ..... 3 minutes

(See Back)

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 3/12/09

Signature Marisha Ash

Print Name Marisha Ash

Date: 3/12/09

**City of Madison**  
**Registration Statement – Equal Opportunities Commission**

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Agenda No. #4 (Leg. 12596)

Name Robin Berenson  
Address 145 JACKSON ST.

Please check the appropriate boxes:

☐

**Support**

- ☐ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

☒

**Oppose**

- ☐ Wish to speak  
☒ Do not wish to speak  
☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: ☐ Yes ☐ No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," 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 Limits: Public Hearing ..... 5 minutes  
Information Hearing ..... 5 minutes  
Other Items ..... 3 minutes

(See Back)

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 3/12/09

Signature Robin Berenson  
Print Name Robin Berenson



Date: 3/12/09

**City of Madison  
Registration Statement – Equal Opportunities Commission**

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Please Print

Agenda No. #4 (Leg. 12596)

Name

Terry Moen

Address

1129 Gilbert Rd

Madison WI 53711

Please check the appropriate boxes:

☐

**Support**

☐ Wish to speak

☐ Do not wish to speak

☐ Available to answer questions

☒

**Oppose**

☒ Wish to speak

☐ Do not wish to speak

☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself:

☐ Yes

☒ No

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

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

Chair PSRB but opinions not that of

PSRB only myself

Are you being paid for your representation?

☐ Yes

☐ No

Are you appearing as part of your other paid duties for this person or organization?

☐ Yes

☐ No

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

Speaking Limits:

Public Hearing ..... 5 minutes

Information Hearing ..... 5 minutes

Other Items ..... 3 minutes

(See Back)

Registration Statement - Page 2

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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: 3/12/09

**City of Madison  
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Agenda No. #4 (Leg. 12596)

Name MARY O'Donnell  
Address 215 Martin Luther King Jr Blvd  
Rm 225 Madison

Please check the appropriate boxes:

☐ **Support**  
☐ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

☒ **Oppose**  
☒ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: ☐ Yes ☐ No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

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

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Are you being paid for your representation?

☒ Yes ☐ No

Are you appearing as part of your other paid duties for this person or organization?

☒ Yes ☐ No

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

Speaking Limits: Public Hearing ..... 5 minutes  
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Other Items ..... 3 minutes

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Registration Statement - Page 2

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

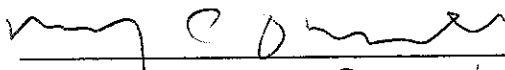
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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? ☒ Yes ☐ No
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(If you answered "no" to any of the last three questions, please call 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 3/12/09

Signature



Print Name

Mary C. O'Donnell

Date: 3/12/09

**City of Madison**  
**Registration Statement – Equal Opportunities Commission**

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Agenda No. #4 (Leg. 12596)

Name Walter Verburg

Address 1614 Wendy Ln.  
Madison, WI

Please check the appropriate boxes:

☐ **Support**  
☐ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

☒ **Oppose**  
☒ Wish to speak  
☐ Do not wish to speak  
☒ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: ☐ Yes ☒ No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," 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.)

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Date \_\_\_\_\_

Signature \_\_\_\_\_

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

Date: 3/12/09

**City of Madison  
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Agenda No. #4 (Leg. 12596)

Name

BILL CLUGAN

Address

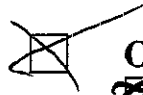
1715 MARLBOROUGH

Please check the appropriate boxes:

☐

**Support**

- ☐ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions



**Oppose**

- ☒ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: ☐ Yes ☐ No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

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

COMMUNITY SERVICES COMMISSION

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.)

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Date \_\_\_\_\_

Signature \_\_\_\_\_

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



Date: 3/12/09

**City of Madison**  
**Registration Statement – Equal Opportunities Commission**

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Please Print

Agenda No. #4 (Leg. 12596)

Name Matt Veldman  
Address 5738 Kromke Dr  
Madison WI

Please check the appropriate boxes:

☐ **Support**  
☐ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

☒ **Oppose**  
☒ Wish to speak  
☐ Do not wish to speak  
☐ Available to answer questions

At this meeting are you representing an organization or a person other than yourself: ☐ Yes ☒ No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

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

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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.)

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Date \_\_\_\_\_

Signature \_\_\_\_\_

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