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Date:	6	/7/	25	
		. /		

## City of Madison Registration Statement - Common Council

01005

You must register before the Council considers your item.

<u>Please Print</u>		PRINT NAME CLEARLY		
Agenda No.	17	Name Address	JANE NOROBY 1809 Maplecrest Drive MADISON, WI 53593	
Please check the a	ppropriate boxes:			
Do not Availa  At this meeting are (If you answered 'question.)	o speak t wish to speak ble to answer questions you representing an organize	mplete the rest of th	is form. If you answered "yes," go on to the next	
Are you being paid	for your representation?		☐ Yes ☐ No	
Are you appearing (If you answered ") question)	as part of your other paid dut no," <b>STOP;</b> you need not con	ies for this person or nplete the rest of the	r organization? Yes No is form. If you answered "yes," go on to the next	
Speaking Limits:	Public Hearing Information Hearing	5 min		

## 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?				
(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 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?			
2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?			
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?			
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)				
Date	Signature			
	Print Name			