Date: 11/16/10

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: JEFF PORTER	Address: 638	3 W. LAKESIDE ST.
	max	3 W. LAKESIDE ST.
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMI	,
Amendment No.	☐ Support	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
月のビのMAA Amendment No. <u> まに</u>	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☑ Do not wish to speak☐ Available to answer questions
Amendment No. 14	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing	g an organization or a person other th	nan yourself: ☐ Yes ☐ No

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

the name of whom you represent and go on to the next question.)

Name, addı	ress and telephone number of each person or organization you are representing:
Are you being	ng paid for your representation?
	pearing as part of your other paid duties for this person or organization? Yes No vered "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on to estion.)
	elected official or employee who is appearing solely on behalf of your office or for your or other governmental body?
	vered "yes" to the question, STOP. You need not complete the rest of this form, except that gn this form. If you answered "no" to the question, go on to the next question.)
If you are be advised that	eing paid for your representation, or if your appearance is part of other paid duties, please be t:
. 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 t at Room 103	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office 3 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date:	//	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: AY YOUNG	Address: CK	OSS PLAINS
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	IN & ONE BOX IN THIS COLUMN
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No. APITAL A	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No. BOE 1912	Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor 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 (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

Nar	ne, add	Iress and telephone number of each person or organization you are representing:
Are	you be	ing paid for your representation?
(If ye	ou ansi	pearing as part of your other paid duties for this person or organization? Yes No wered "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on to restion.)
		n elected official or employee who is appearing solely on behalf of your office or for your or other governmental body?
		wered "yes" to the question, STOP. You need not complete the rest of this form, except that ign this form. If you answered "no" to the question, go on to the next question.)
-	u are b sed tha	eing paid for your representation, or if your appearance is part of other paid duties, please be it:
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Date		Signature
		Print Name

Date:

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:	Address: 250	52 Duning ody D:
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	,
Amendment No.	☐ Support ☑ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☑ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. 11 & 12	SupportOpposeNeither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor 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 the	nan yourself: Yes

the name of whom you represent and go on to the next question.)

Nan	ne, addr	ress and telephone number of each person or organization you are representing:	
		vocal 60	
Are :	you beir	ng paid for your representation?	
(If yo		pearing as part of your other paid duties for this person or organization?	
	•	elected official or employee who is appearing solely on behalf of your office or for your other governmental body?	ur
		vered "yes" to the question, STOP. You need not complete the rest of this form, except the gn this form. If you answered "no" to the question, go on to the next question.)	at
	u are be sed that:	eing paid for your representation, or if your appearance is part of other paid duties, please b t:	е
,	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 Offic 3 of the City-County Building, Madison, for more information.)	е
Date	11/	Signature Print Name	

Date:	10/16	
	770	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Chis Gaulli	Address: $\frac{Z_{l}}{L}$	125 Revis Hills W
ENTER AMENDMENT NUMBER		
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☒ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☑ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

(SEE BACK)

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

Yes

the name of whom you represent and go on to the next question.)

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

Nan	ne, add	ress and telephone number of each person or organization you are representing:
	IAI	SE 25 (1602 5 /9/1951 #224
	Mad	isod but 53.715
Are	you bei	ng paid for your representation?
(If yo		pearing as part of your other paid duties for this person or organization? Yes No wered "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on to estion.)
	-	elected official or employee who is appearing solely on behalf of your office or for your or other governmental body?
		vered "yes" to the question, STOP. You need not complete the rest of this form, except that gn this form. If you answered "no" to the question, go on to the next question.)
-	u are bosed that	eing paid for your representation, or if your appearance is part of other paid duties, please be
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		o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office 3 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name
		· · · · · · · · · · · · · · · · · · ·

Date: ______

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:	Address:	37 AZHALOZ
		1018W 98118
ENTER AMENDMENT NUMBER C	CHECK ONE BOX IN THIS COLUMI	N & ONE BOX IN THIS COLUMN
Amendment No. 1 + 12	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.] Support] Oppose] Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing a (If you answered "no," STOP ; you no the name of whom you represent and	ed not complete the rest of this fol	han yourself: Yes No No rm. If you answered "yes," provide

REGISTRATION STATEMENT - PAGE 2 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? \(\subseteq \text{Yes} \) (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ Yes l 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, 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 3. reporting period (half year), the principal must file expense statements with the City

(Please go to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office

Clerk for the remainder of the calendar year?

at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date

Date: 11 | 16 | 2010

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

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PLEASE PRINT CLEARLY Name: WILLIAM Rob	***************************************	S. FIRST ST #2
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	ADISON, WISSTON
Amendment No. 11+12	SupportOpposeNeither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☑ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☑ Do not wish to speak☐ Available to answer questions
Amendment No/ O	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP; you the name of whom you represent a	ng an organization or a person other the need not complete the rest of this for and go on to the next question.)	han yourself: Yes No rm. If you answered "yes," provide

REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing: Are you being paid for your representation? ☐ Yes П No Are you appearing as part of your other paid duties for this person or organization? \(\simega\) Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body? 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, 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 www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: MIKE JAME OG	Address: 1/4	1 Sherman Au #6 1.son W1 53703
ENTER AMENDMENT NUMBER C	HECK ONE BOX IN THIS COLUMN	& ONE BOX IN THIS COLUMN
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ⑤ <do not="" speak<br="" to="" wish="">☐ Available to answer questions</do>
Amendment No. BOECAO	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
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Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor 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 (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

	FS(ME Cuncil 24	
Are	you be	eing paid for your representation?	0
(If y	ou ans	ppearing as part of your other paid duties for this person or organization? ☐ Yes swered "no," STOP; you need not complete the rest of this form. If you answered "yes," uestion.)	☐ No go on to
		an elected official or employee who is appearing solely on behalf of your office or ty or other governmental body?	_
		swered "yes" to the question, STOP. You need not complete the rest of this form, ex sign this form. If you answered "no" to the question, go on to the next question.)	cept that
	u are b sed tha	being paid for your representation, or if your appearance is part of other paid duties, p at:	lease be
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file a authorization with the City Clerk.	ın
	2.	Your principal is not permitted to authorize you to lobby unless you are registere with the City Clerk.	d
	3.	If your principal spends or will owe more than \$1,000 for lobbying services in an reporting period (half year), the principal must file expense statements with the Cit 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 03 of the City-County Building, Madison, for more information.)	's Office
Date		Signature	
		Print Name	

Date:	11/16/10	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:	Address: 9	47 Black Bridge
		47 Black Bridge Jaesville
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	IN & ONE BOX IN THIS COLUMN
৪০€ ০০লে৮ Amendment No. <u>Ⅱ ६ । ८</u>	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representin (If you answered "no," STOP; you the name of whom you represent a	ng an organization or a person other to need not complete the rest of this found go on to the next question.)	than yourself: ⊠Yes □ No orm. If you answered "yes," provide AFSCME

·					
Are	you bei	ng paid for your representat	tion?	☐ Ye	es 🗌 No
(If y		pearing as part of your other vered "no," STOP; you need estion.)			
		elected official or employ or other governmental body		olely on behalf of your ☐ Ye	
		vered "yes" to the question on this form. If you answere			
	u are bo	eing paid for your represent :	tation, or if your appeara	ance is part of other paid	l duties, please be
	1.	Before you engage in lo authorization with the City		you or your principal n	nust file an
	2.	Your principal is not perr with the City Clerk.	mitted to authorize you	to lobby unless you are	registered
	3.	If your principal spends of reporting period (half yea Clerk for the remainder of	r), the principal must file		
		o the City Clerk's website we of the City-County Building			the Clerk's Office
Date		Sig	gnature		
			int Name		

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: MED KESSE	VI Clif Address: 93	2 07/1 U RONA, WT 53593
ENTER AMENDMENT NUMBER		· ·
BUE OPRATING Amendment No. 10012	☑ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak ☑ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak ☑ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support ☑ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☑ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP; you in the name of whom you represent ar	g an organization or a person other the need not complete the rest of this for and go on to the next question.)	nan yourself: Yes

Nar	ne, add	dress and telephone number of each person or organization	on you are representing:
	***************************************		t .
	,		
Are	you bei	ing paid for your representation?	☐ Yes ☐ No
(If y	ou ansv	pearing as part of your other paid duties for this person or wered "no," STOP; you need not complete the rest of this restion.)	
		n elected official or employee who is appearing solely y or other governmental body?	on behalf of your office or for your ☐ Yes ☐ No
		wered "yes" to the question, STOP. You need not comp ign this form. If you answered "no" to the question, go on t	
	u are b	peing paid for your representation, or if your appearance int:	s part of other paid duties, please be
	1.	Before you engage in lobbying as a lobbyist, you cauthorization with the City Clerk.	or your principal must file an
	2.	Your principal is not permitted to authorize you to lok with the City Clerk.	by unless you are registered
	3.	If your principal spends or will owe more than \$1,000 reporting period (half year), the principal must file exp Clerk for the remainder of the calendar year?	
		to the City Clerk's website <u>www.cityofmadison.com/clerk/</u> 3 of the City-County Building, Madison, for more informati	
Date		Signature	
		Dalut Nama	

Date: // 10 10 ____

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

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PLEASE PRINT CLEARLY

Name: //////	Address. ///	Salian A Salian A Ga
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	N & ONE BOX IN THIS COLUMN
Amendment No. 1117	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor 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 \quad No (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

Nar	ne, add	ddress and telephone number of each person or organization you are	representing:	
			1	
			· ·	
Are	you bei	eing paid for your representation?	☐ Yes ☐ N	0
(If y	ou ansv	ppearing as part of your other paid duties for this person or organizations swered "no," STOP; you need not complete the rest of this form. If you nestion.)		☐ No " go on to
		an elected official or employee who is appearing solely on behalf ity or other governmental body?	of your office or	
(If you	ou ansv must sig	swered "yes" to the question, STOP. You need not complete the resign this form. If you answered "no" to the question, go on to the next	st of this form, ex question.)	cept that
lf yo advi:	u are be sed that	being paid for your representation, or if your appearance is part of ot	ther paid duties, p	lease be
-	1.	Before you engage in lobbying as a lobbyist, you or your prinauthorization with the City Clerk.	ncipal must file a	ŧn
	2.	Your principal is not permitted to authorize you to lobby unless with the City Clerk.	you are registere	ed .
	3.	If your principal spends or will owe more than \$1,000 for lobbyi reporting period (half year), the principal must file expense stater Clerk for the remainder of the calendar year?		
		o to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> 03 of the City-County Building, Madison, for more information.)	or go to the Clerk	's Office
Date		Signature		
		Print Name		· .

Date: 11 /1.6 / 10

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:	Address: P(BN 259867
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	IN & ONE BOX IN THIS COLUMN
Amendment No.	☑ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP; you	ng an organization or a person other to need not complete the rest of this fo	than yourself: ☐ Yes ☐ No orm. If you answered "yes," provide

(SEE BACK)

the name of whom you represent and go on to the next question.)

REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing: Yes No Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ Yes (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: -Before you engage in lobbying as a lobbyist, you or your principal must file an 1. authorization with the City Clerk. Your principal is not permitted to authorize you to lobby unless you are registered 2. 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

(Please go to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office

Clerk for the remainder of the calendar year?

at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date

Date:	16	20	10	
	 			_

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Tony Karwa	Address: (50)	Applegien Lane
	Mad	Applegien Lane
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	8 ONE BOX IN THIS COLUMN
Amendment No. 1 1 2 30 E	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor 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 (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

Nan	ne, add	dress and telephone number of e	ach person or organization	you are representing:
	,		· · · · · · · · · · · · · · · · · · ·	
Are	you bei	ing paid for your representation?		☐ Yes ☐ No
(If yo	ou ansv	pearing as part of your other paid wered "no," STOP; you need not restion.)		organization? Yes No orm. If you answered "yes," go on to
		n elected official or employee v y or other governmental body?	who is appearing solely o	n behalf of your office or for your ☐ Yes ☐ No
		wered "yes" to the question, ST ign this form. If you answered "no		te the rest of this form, except that the next question.)
lf yo advis	u are b sed tha	eing paid for your representation t:	n, or if your appearance is	part of other paid duties, please be
	1.	Before you engage in lobbyi authorization with the City Cle		your principal must file an
	2.	Your principal is not permitted with the City Clerk.	d to authorize you to lobb	y unless you are registered
	3.	If your principal spends or wi reporting period (half year), th Clerk for the remainder of the	ne principal must file exper	, ,
(Plea at Ro	ise go t oom 103	to the City Clerk's website <u>www.</u> 3 of the City-County Building, Ma	cityofmadison.com/clerk/in adison, for more information	dex.html or go to the Clerk's Office
Date		Signatu	ure	
		Print N	ame	

Date: 11/16/16

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Jeremy Belowsh	· Mac	150 S3716
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	N & ONE BOX IN THIS COLUMN
Amendment No. 116 12	SupportOpposeNeither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor 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

the name of whom you represent and go on to the next question.)

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2 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 (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee 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 guestion, 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

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Clerk for the remainder of the calendar year?

at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date

Date: 11/16/16

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Shawn L. Borto	Address: 50	9 Aztalan Dr.
ENTER AMENDMENT NUMBER C	HECK ONE BOX IN THIS COLUMN	& ONE BOX IN THIS COLUMN
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing a (If you answered "no," STOP; you ne	an organization or a person other the	an yourself. ☐ Yes ☐ No m. If you answered "yes," provide

the name of whom you represent and go on to the next question.)

Nar	ne, add	Scress and telephone number of each person or organization you are representing:
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Are	you be	eing paid for your representation?
(If ye	ou ans	pearing as part of your other paid duties for this person or organization? Yes No wered "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on to restion.)
Are mun	you ai	n elected official or employee who is appearing solely on behalf of your office or for your yor other governmental body?
(If you	ou ans must s	wered "yes" to the question, STOP. You need not complete the rest of this form, except that ign this form. If you answered "no" to the question, go on to the next question.)
lf yo advis	u are b sed tha	peing paid for your representation, or if your appearance is part of other paid duties, please be at:
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
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		to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office 3 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name
	,	

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Date:		1 1.	4	<u> 779</u>	_

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Dem Ne. 5	Address:	2002 Elkalme#
	<u> </u>	medison.
ENTER AMENDMENT NUMBER C	HECK ONE BOX IN THIS COLU	IMN & ONE BOX IN THIS COLUMN
Amendment No. Boe operating [Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. Bee Cap. two	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No/ ()	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing a	n organization or a person othe	r than yourself:

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

the name of whom you represent and go on to the next question.)

Nan	ne, add	dress and telephone number of each person or organizati	on you are representing:
Are	you be	eing paid for your representation?	☐ Yes ☐ No
(If yo	ou ansi	opearing as part of your other paid duties for this person of wered "no," STOP; you need not complete the rest of this uestion.)	
		n elected official or employee who is appearing solely y or other governmental body?	on behalf of your office or for your ☐ Yes ☐ No
		swered "yes" to the question, STOP. You need not compige this form. If you answered "no" to the question, go on	
-	u are b sed tha	being paid for your representation, or if your appearance at:	is part of other paid duties, please be
	1.	Before you engage in lobbying as a lobbyist, you authorization with the City Clerk.	or your principal must file an
	2.	Your principal is not permitted to authorize you to lo with the City Clerk.	bby unless you are registered
	3.	If your principal spends or will owe more than \$1,00 reporting period (half year), the principal must file expected for the remainder of the calendar year?	, , , , , , , , , , , , , , , , , , ,
(Plea at Ro	ase go oom 10	to the City Clerk's website <u>www.cityofmadison.com/clerk</u> 33 of the City-County Building, Madison, for more informat	<u>Vindex.html</u> or go to the Clerk's Office fion.)
Date		Signature	•
		Print Name	

D - 4	
Date:	
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CITY OF MADISON Registration Statement - Common Council

2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY		
Name: Som Cstolin	7 Address: We	stminster Ct.
Sam	· · · · · · · · · · · · · · · · · · ·	
	·	
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	IN & ONE BOX IN THIS COLUMN
Box oper,		
Amendment No. 11+12	Oppose	Do not wish to speak
0.0/2	Neither Support Nor Oppose	Available to answer questions
Amendment No. 14 CAP.	Support Oppose	Wish to speak Do not wish to speak Wish to speak
Amendment No.	☐ Neither Support Nor Oppose	Available to answer questions
(0)	Support	
Amendment No. ()	Oppose	Do not wish to speak
	Neither Support Nor Oppose	Available to answer questions
10	Support	☐ Wish to speak ☑ Do not wish to speak
Amendment No.	☑ Oppose☑ Neither Support Nor Oppose	Available to answer questions
	Support	☐ Wish to speak
Amendment No	Oppose	Do not wish to speak
	Neither Support Nor Oppose	Available to answer questions
	Support	Wish to speak
Amendment No.	Oppose	☐ Do not wish to speak☐ Available to answer questions
	Neither Support Nor Oppose	Wish to speak
Amendment No.	☐ Support ☐ Oppose	Do not wish to speak
American No.	Neither Support Nor Oppose	Available to answer questions
At this meeting are you representing	g an organization or a person other	than yourself: ☐ Yes ☐ No
(If you answered "no," STOP; you	need not complete the rest of this fo	orm. If you answered "yes," provide
the name of whom you represent a	nd go on to the next question.) $-$	CN 60

		ress and telepho	ne number of each person or orga	inization you are representing.	
				· ·	
Are	you bei	ng paid for your	representation?	☐ Yes ☐ No	
(If y		vered "no," STO i	f your other paid duties for this pers ; you need not complete the rest	rson or organization?	lo to
		elected official or other govern		solely on behalf of your office or for yo	ur
			e question, STOP. You need not ou answered "no" to the question, g	complete the rest of this form, except the conto the next question.)	ıat
	ou are be ised that		r representation, or if your appear	rance is part of other paid duties, please	эе
	1.		ngage in lobbying as a lobbyist, with the City Clerk.	you or your principal must file an	
	2.	Your principal with the City C		to lobby unless you are registered	
	3.	reporting perio	•	\$1,000 for lobbying services in any le expense statements with the City	
			s website <u>www.cityofmadison.com</u> , nty Building, Madison, for more info	n/ <u>clerk/index.html</u> or go to the Clerk's Offic formation.)	æ
Date)		Signature		
			Print Name		

Date: _	And the second second second second	And the second s	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0		(0
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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Amy Core ENTER AMENDMENT NUMBER	Address: 400 CHECK ONE BOX IN THIS COLUMN	8 DWGHADY Vallson WI 1 & ONE BOX IN THIS COLUMN
Amendment No. Despective	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. Poely	Support Oppose Neither Support Nor Oppose	Wish to speak Do not wish to speak Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	Wish to speak Do not wish to speak Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP; you	g an organization or a person other the need not complete the rest of this for	nan yourself: ☐ Yes

(SEE BACK)

the name of whom you represent and go on to the next question.)

REGISTRATION STATEMENT - PAGE	÷ 2					
Name, address and telephone number of each person or organization you are representing:						
	ı					
	-					
Are you being paid for your representation?	☐ Yes ☐ No					
Are you appearing as part of your other paid duties for this person or (If you answered "no," STOP ; you need not complete the rest of this the next question.)						
Are you an elected official or employee who is appearing solely of municipality or other governmental body?	on behalf of your office or for you					
(If you answered "yes" to the question, STOP. You need not complet you must sign this form. If you answered "no" to the question, go on to						
If you are being paid for your representation, or if your appearance is advised that:	part of other paid duties, please be					

- 1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
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	11/11/10		
Date	111/12/10	Signature	
		Print Name	Amy Kernin
	•		

Date:	14	/16	110	
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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Benjamin Rattiffe	Address: //[S E Wilson St. #415
Denjam. N. Jennie	*	DURN WI 53703
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLU	
Amendment No. // 3/2 (30)	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No/ O	☐ Support' Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing	ng 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," provide

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REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing: ☐ Yes Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee 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, 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

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Signature

Print Name

Date

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Kathleen Ride	Address: 4=	25 N. Baldwin
	· m	(ad15 = N
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMI	N & ONE BOX IN THIS COLUMN
Amendment No\	Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. 12	Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. 10, floor admeral	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representir	ng an organization or a person other th	han yourself: ☐ Yes ☐ No

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

the name of whom you represent and go on to the next question.)

	ne, add	ress and telephone number of each person or organization you are representing:
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Are :	you be	ng paid for your representation?
(If yo		pearing as part of your other paid duties for this person or organization? Yes Novered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to estion.)
	-	elected official or employee who is appearing solely on behalf of your office or for you or other governmental body?
		vered "yes" to the question, STOP. You need not complete the rest of this form, except tha gn this form. If you answered "no" to the question, go on to the next question.)
-	u are b sed tha	eing paid for your representation, or if your appearance is part of other paid duties, please be :
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
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		o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office Is of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

Date:	Managaran Varia		14	10
		ě		

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Joe Seife	Address: 32	1 Southing Grange HAGE Grove WI
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMI	
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No. 12	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	Wish to speakDo not wish to speakAvailable to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	Support Oppose Neither Support Nor 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

the name of whom you represent and go on to the next question.)

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," previde

REGISTRATION STATEMENT - PAGE 2 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? \(\bar{\cap}\) Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee 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, 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

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Signature

Print Name

Date

Date:	1-16-10	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

•		•
PLEASE PRINT CLEARLY Name: Amanda John	1SM Address: [22	Talon Place
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	N & ONE BOX IN THIS COLUMN
Amendment No. 1) 12	SupportOpposeNeither Support Nor Oppose	☐ Wish to speak☒ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☒ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☒ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support□ Oppose□ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor 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 \sum No (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent and go on to the next question.)

Nam	ne, addı	•	umber of each person or organ	ization you are representing:
			0 Cal (00	· · · · · · · · · · · · · · · · · · ·
Are	you bei	ng paid for your repre	sentation?	☐ Yes 💆 No
(If yo		vered "no," STOP; yo	r other paid duties for this person on need not complete the rest of	on or organization? ☐ Yes ☒ No f this form. If you answered "yes," go on to
Are muni	you an icipality	elected official or e or other government	mployee who is appearing so al body?	olely on behalf of your office or for your ☐ Yes ☐No
			estion, STOP. You need not o swered "no" to the question, go	complete the rest of this form, except that o on to the next question.)
	u are be sed that		resentation, or if your appeara	nce is part of other paid duties, please be
	1.	Before you engage authorization with the		ou or your principal must file an
	2.	Your principal is no with the City Clerk.	ot permitted to authorize you t	o lobby unless you are registered
	3.	reporting period (ha		1,000 for lobbying services in any expense statements with the City
			bsite <u>www.cityofmadison.com/c</u> uilding, Madison, for more infol	clerk/index.html or go to the Clerk's Office rmation.)
Date	11-	16-10	Signature Amaw	. /
			Print Name AMANO	La Tohnson.

Date:	(7/.	16.1	i 201	ن	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Down Miles	Address: 2	MADISON WI
1000		MADISON WI
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	IN & ONE BOX IN THIS COLUMN
Amendment No(Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☑ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	Wish to speakDo not wish to speakAvailable to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP; you	ng an organization or a person other need not complete the rest of this f	than yourself: ☐ Yes ☐ No orm. If you answered "yes," provide

the name of whom you represent and go on to the next question.)

Name, add	ress and telephone number of each person or organization ye	ou are representing:
		1
Are you bei	ng paid for your representation?	☐ Yes ☐ No
	pearing as part of your other paid duties for this person or orgovered "no," STOP; you need not complete the rest of this formestion.)	
_	elected official or employee who is appearing solely on or other governmental body?	behalf of your office or for your
	vered "yes" to the question, STOP. You need not complete gn this form. If you answered "no" to the question, go on to th	
If you are be advised that	eing paid for your representation, or if your appearance is pa ::	art of other paid duties, please be
1.	Before you engage in lobbying as a lobbyist, you or you authorization with the City Clerk.	our principal must file an
2.	Your principal is not permitted to authorize you to lobby with the City Clerk.	unless you are registered
3.	If your principal spends or will owe more than \$1,000 for reporting period (half year), the principal must file expense Clerk for the remainder of the calendar year?	
	o the City Clerk's website <u>www.cityofmadison.com/clerk/inde</u> 3 of the City-County Building, Madison, for more information.)	
Date	Signature	
	Print Name	

Date: 11 16/10

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: KEN SEIFET	Address: 600	9 TRaveler LANE LISON WF 53718
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	
Amendment No.	☒ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☑ Do not wish to speak☐ Available to answer questions
Amendment No. 12	SupportOpposeNeither Support Nor Oppose	☐ Wish to speak☑ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☑ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☒ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

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

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

Nan	ne, add	ress and telephone number of each person or organization you are representing:		
Are	you bei	ing paid for your representation?		
(If yo	ou ansv	pearing as part of your other paid duties for this person or organization? Yes No wered "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on to estion.)		
	-	elected official or employee who is appearing solely on behalf of your office or for your or other governmental body?		
		wered "yes" to the question, STOP. You need not complete the rest of this form, except that gn this form. If you answered "no" to the question, go on to the next question.)		
•	u are b	eing paid for your representation, or if your appearance is part of other paid duties, please be t:		
	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 3 of the City-County Building, Madison, for more information.)		
Date		Signature		
		Print Name		

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Role Maga	Address: N6826 ENGLISH SETTEMENT RI
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN & ONE BOX IN THIS COLUMN
Amendment No.	✓ Support ☐ Wish to speak ☐ Oppose ☑ Do not wish to speak ☐ Neither Support Nor Oppose ☐ Available to answer questions
Amendment No.	Support
Amendment No.	Support
Amendment No.	☐ Support ☐ Wish to speak ☐ Oppose ☐ Do not wish to speak ☐ Neither Support Nor Oppose ☐ Available to answer questions
Amendment No.	Support Oppose Do not wish to speak Neither Support Nor Oppose Available to answer questions
Amendment No	☐ Support ☐ Wish to speak ☐ Oppose ☐ Do not wish to speak ☐ Neither Support Nor Oppose ☐ Available to answer questions
Amendment No	☐ Support ☐ Wish to speak ☐ Oppose ☐ Do not wish to speak ☐ Neither Support Nor Oppose ☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP; you the name of whom you represent a	g an organization or a person other than yourself: Yes \ \ \ No need not complete the rest of this form. If you answered "yes," provide and go on to the next question.)

(SEE BACK)

Name, address and telephone number of each person or organization you are representing:						
-				· · · · · ·	1	<u> </u>
	4					
Are :	you bei	ng paid for your representation	on?		☐ Yes	☑No
(If yo		pearing as part of your other vered "no," STOP; you need estion.)				
	-	elected official or employe or other governmental body		ring solely on beha	alf of your off ☐ Yes	ice or for your
		vered "yes" to the question, gn this form. If you answered				m, except that
	u are b	eing paid for your representa ::	ation, or if your ap	opearance is part of	f other paid du	ties, please be
	1.	Before you engage in lol authorization with the City		oyist, you or your	principal must	file an
	2	Your principal is not perm with the City Clerk.	itted to authorize	you to lobby unle	ss you are reg	gistered
	3.	If your principal spends or reporting period (half year) Clerk for the remainder of t), the principal m	ust file expense sta		7
		o the City Clerk's website <u>w</u> 3 of the City-County Building,			<u>ml</u> or go to the	Clerk's Office
Date		16 10 Sig	nature	uf		
		Prir	nt Name	CK MARX		

Date: 11./16/10

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: David Wise	e Address:3	316 Ivy 5t. dison, Wi. 53714
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMI	· · ·
BOE operating Amendment No. 11.8 12	⊠ Support □ Oppose □ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☑ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
		ı Talva- 🖂 No
At this meeting are you representing (If you answered "no," STOP; you rethe name of whom you represent ar	need not complete the rest of this to	han yourself: ☑ Yes □ No rm. If you answered "yes," provide AFSCME LOCAL W

REGISTRATION STATEMENT - PAGE 2 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? \square Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "ves." go on to the next question.) Are you an elected official or employee 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, 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 www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

Name: Robert Pohogave Address: 4800 Buckeye Rd Wadison W & 53716			
Name: Robert Robers	Address: 4 00	o marge Ra	
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN		
Amendment No. 11 + 12	Support Oppose Neither Support Nor Oppose	☐, Wish to speak ☑ Do not wish to speak ☐ Available to answer questions	
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☑ Do not wish to speak☐ Available to answer questions	
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☑ Do not wish to speak☐ Available to answer questions	
Amendment No.	☐ Support☒ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions	
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions	
Amendment No.	SupportOpposeNeither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions	
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions	
At this meeting are you representin (If you answered "no," STOP ; you the name of whom you represent a	ng an organization or a person other to need not complete the rest of this for and go on to the next question.)	han yourself: ☐ Yes ☐ No rm. If you answered "yes," provide	

REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing: Are you being paid for your representation? ☐ Yes □ No Are you appearing as part of your other paid duties for this person or organization? (If you answered "no," STOP; you need not complete the rest of this form. If you answered "ves." go on to the next question.) Are you an elected official or employee 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, 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 www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: //e/d/ concle	Address: 2/5	MCK Jr. Blud. Vison, W1 53703
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	& ONE BOX IN THIS COLUMN
Amendment No. 11.812	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No/O	☐ Support☑ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representing (If you answered "no," STOP ; you the name of whom you represent a	ng an organization or a person other th need not complete the rest of this for and go on to the next question.)	an yourself: ⊠ Yes □ No m. If you answered "yes," provide AFSOME

REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing: Are you being paid for your representation? ☑ No ☐ Yes Are you appearing as part of your other paid duties for this person or organization? (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee 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 guestion, 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 www.cityofmadison.com/clerk/index.html or go to the Clerk's Office

at Room 103 of the City-County Building, Madison, for more information.)

Signature

Print Name

Date: 1/-16-10	
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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

Name: June Coglio	GO-LEO Address: 90	44 E. Dayton St.
		44 E. Dayton St. adison, WI 53703
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	IN & ONE BOX IN THIS COLUMN
Amendment No. 11312	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. 10	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. 8	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
At this meeting are you representin (If you answered "no," STOP; you the name of whom you represent a	g an organization or a person other need not complete the rest of this fo nd go on to the next question.)	than yourself:⊠ Yes □ No orm. If you answered "yes," provide AFSCME local (d

PLEASE PRINT CLEARLY

Name, a	dress and telephone number of each person or organization you are representing:
. Le	nal 60° .
Are you l	eing paid for your representation?
	ppearing as part of your other paid duties for this person or organization? Yes X No swered "no," STOP ; you need not complete the rest of this form. If you answered "yes," go on uestion.)
	n elected official or employee who is appearing solely on behalf of your office or for your office or your offic
•	swered "yes" to the question, STOP. You need not complete the rest of this form, except the sign this form. If you answered "no" to the question, go on to the next question.)
If you are advised t	being paid for your representation, or if your appearance is part of other paid duties, please bat:
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
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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 Offic 03 of the City-County Building, Madison, for more information.)
Date	16/10 Signature Henre Seglia
	Print Name JUNE GOG LO

Date:///5-/0	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: KARA O SAL	Address: 16	37 WSIGHT 3T
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	N & ONE BOX IN THIS COLUMN
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

(SEE BACK)

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

Yes

the name of whom you represent and go on to the next question.)

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

Nan	ne, add	lress and telephone number of each person or organization you are representing:
Are	you be	ing paid for your representation?
(If yo	ou ansi	pearing as part of your other paid duties for this person or organization? Yes No wered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to estion.)
		n elected official or employee who is appearing solely on behalf of your office or for your or other governmental body?
		wered "yes" to the question, STOP. You need not complete the rest of this form, except that ign this form. If you answered "no" to the question, go on to the next question.)
	u are b sed tha	eing paid for your representation, or if your appearance is part of other paid duties, please be t:
	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 3 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name
	•	

Data		
Date:	9	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:	Address: ఎ.	38 E.M. Africa St. 2014
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUMN	,
Amendment No. 11+12	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support☐ Oppose☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No. /O	Support Oppose Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions
Amendment No.	☐ Support ☐ Oppose ☐ Neither Support Nor Oppose	☐ Wish to speak☐ Do not wish to speak☐ Available to answer questions

(SEE BACK)

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

Yes

the name of whom you represent and go on to the next question.)

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing:

Are you be	eing paid for your representation?	☐ Yes ☐ No
	opearing as part of your other paid duties for this person or organismered "no," STOP; you need not complete the rest of this formulestion.)	
	n elected official or employee who is appearing solely on by or other governmental body?	oehalf of your office or for you ☐ Yes ☐ No
	swered "yes" to the question, STOP. You need not complete sign this form. If you answered "no" to the question, go on to the	
If you are t advised tha	being paid for your representation, or if your appearance is parat:	rt of other paid duties, please be
1.	Before you engage in lobbying as a lobbyist, you or yo authorization with the City Clerk.	our principal must file an
2.	Your principal is not permitted to authorize you to lobby unwith the City Clerk.	inless you are registered
3.	If your principal spends or will owe more than \$1,000 for reporting period (half year), the principal must file expense Clerk for the remainder of the calendar year?	
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index</u> 03 of the City-County Building, Madison, for more information.)	x.html or go to the Clerk's Office
Date	Signature	
	Dulud Maria	

Date:	1-16-10	•
		_

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name:	Address:	13 Doe Crossing Tr adjson 53704
ENTER AMENDMENT NUMBER	CHECK ONE BOX IN THIS COLUM	,
Amendment No. 10	☐ Support☒ Oppose☐ Neither Support Nor Oppose	✓ Wish to speak☐ Do not wish to speak☐ Available to answer questions
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Date		Signature		
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Date:	11/16/10	

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Courtland Manay	Address: 670	2 Village Part D.
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		to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office 3 of the City-County Building, Madison, for more information.)
Date		Signature
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Date: 10/16/2010

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY		
Name: JOHN ElliOTT		402 HOARD ST.
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(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide

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You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

PLEASE PRINT CLEARLY Name: Douglas Peterson	Address: 619	E JOHNSON ST		
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	•			Douglas Peters			

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

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

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Date: 11/16/10

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

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700	· V	adison WI 53718
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REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing: ☐ Yes □ No Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ Yes (If you answered "yes" to the guestion, 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. If your principal spends or will owe more than \$1,000 for lobbying services in any 3. 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 www.cityofmadison.com/clerk/index.html or go to the Clerk's Office

at Room 103 of the City-County Building, Madison, for more information.)

Date

Signature

Print Name

Date: 4/16/10

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

You must register before the Council considers your item. You will be allowed to speak for 5 minutes, regardless of the number of amendments you register to speak on.

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

REGISTRATION STATEMENT - PAGE 2

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Date: 11/16/2010

CITY OF MADISON Registration Statement - Common Council 2011 OPERATING BUDGET

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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," provide the name of whom you represent and go on to the next question.)

REGISTRATION STATEMENT - PAGE 2 Name, address and telephone number of each person or organization you are representing:

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Print Name

Members of the Common Council,

I will be unable to speak at tonight's Common Council budget public hearing as I have a prior commitment, but I want to express my opposition to Amendment Number 10 and to potential amendments introduced on the floor that would combine the 50% Community Bulletin Board position with the proposed 55% Programming Technician position to create a full time position. I'm a Producer/Engineer at Madison City Channel. I've worked at Madison City Channel since October, 1990.

I oppose Amendment Number 10 as I believe Andrew Statz's report, upon which the Mayor's proposal is based, to be accurate as it applies to permanent positions in a restructured Madison City Channel organization. I don't see the need for two full-time supervisors in the organization, and the report indicates as much. This report was generated after interviews with all permanent City Channel employees, including both management and non management staff. At least one part-time non-permanent employee also provided input, and Andrew observed various types of productions. I don't believe anyone has refuted the assumptions, analysis, or conclusions contained in his very thorough and well crafted report, and I believe the recommendations therein should be followed.

It has also come to my attention that Madison City Channel Station Manager Brad Clark has proposed combining the 50% Community Bulletin Board position with the proposed 55% Programming Technician position to create a full time position, and that an amendment to that effect may be introduced on the floor. Brad's proposals do not seem to be based on any kind of analysis, but appear to be entirely personal, rewarding a current supervisor while punishing a current represented employee. I note that Brad now suggests the new position would be Comp Group 20, Range 11, as opposed to Comp Group 20, Range 10 as he indicated earlier. This would prevent Tanya Anderson, the represented employee who currently holds the Community Bulletin Board position, from moving into the newly created position via recall rights. Even though Jennifer Campbell, the Programming Supervisor whose position is eliminated in the Mayor's budget proposal, would have to apply for the position, based on Brad's statements in his October 13th memo to the Mayor, I believe that it is likely his intention to award this position to her, and that there would be no way for another candidate to get a fair shake.

Further, I don't think it's a good idea to combine these two positions. One of them is a graphic designer job. It's about content creation and is much more similar to the producer/director positions. Since the clerical and administrative duties were removed from the other job, it has become a technical position. It's all about digital asset management and ideally requires someone with significant database skills, media file management skills, and media file encoding and transcoding skills. The position is more similar to the engineering position that I occupy, and I would anticipate that person working closely with me. I don't think it's a good idea to combine those positions as it makes it difficult to find someone with both skill sets. The production duties are eventually being removed from the engineering position for the same reason. I happen to have both skill sets, but if I were to leave it would be difficult to find a qualified candidate. I feel Brad's proposal would create a similar situation, and would be a step backward in terms of creating positions that make sense and for which qualified candidates can be found.

I think Andrew Statz's report is excellent, and that the Mayor's proposal solves some longstanding problems in the organization, while it saves some money without the need to cut services. I see no reason to support any amendments that would change this plan.

Thank you,

Boyce Johnson

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I am submitting this in writing as I will be busy directing the coverage of another City Channel production at the Overture Center during the Common Council meeting. (In the event the Wisconsin Academy presentation is done before the public hearing is over on Tuesday night, I will come and be available to answer questions at that time.) I wish to express my support for the Mayor's proposed operating budget and restructuring with respects to Madison City Channel. I am against proposed Amendment #10 to the operating budget as well as any other amendments to City Channel's budget or operations that differs greatly from the recommendations given in Andrew Statz's report.

I have been an employee at Madison City Channel for over 21 years, and believe that the job study and report put together by Andrew Statz to be the most in-depth analysis of City Channel operations since I have been there. At all of the meetings I have attended I have yet to hear anyone differ with the assumptions, facts, analysis or findings of Mr. Statz's report. I understand that with the proposed changes to City Channels structure and staffing that some positions would be eliminated and that those currently holding those positions are not happy, nor would I expect them to be. But I have not heard of any concrete detailed alternatives that offer constructive solutions to City Channel's operating budget issues. Thus far the only solutions I have heard are to keep positions and therefore the total cost to taxpayers, or to remove other positions that are responsible for production and services in order to keep management.

I want to emphasize that the additional cost of \$67,143 associated with amendment #10 is artificially low because in the 2011 proposed operating budget the Production Supervisor position would not be removed until April of 2011. While passing this amendment would only add \$67-thousand to the 2011 operating budget, the actual cost of this position is around \$90-thousand per year. Unless the intent is to keep this position through the end of 2011 only, then the actual implications are an increase to City Channel's regular operating budget by more than what is stated in that amendment. Additionally there is no information in this amendment regarding how this would impact the proposed merger with the Information Technology, the planned restructuring of City Channel's positions and the job duties of the new Media Team Supervisor position.

With respect to other changes, I have heard about the potential of an additional amendment that would eliminate what would be called the Community Bulletin Board Technician position in order to create a single full time Programming Coordinator position. (Under the Mayor's budget, the Programming Coordinator position would be at 55%.) Doing so would effectively eliminate the community bulletin board service provided by City Channel. You have all no doubt heard City Channel being referred to as 'award winning.' In the past several years this has all been due to the ongoing services provided by Tanya Anderson on the community bulletin board. If this rumored proposal were indeed passed, that would mean not just the elimination of this service, but the loss of an award winning employee.

Finally let me state some displeasure with the manner that some of the fact finding and problem solving regarding City Channel has played out. The Ad-hoc committee that

looked at City Channel received a detailed report from non-management staff with regards to some of the documentation and recommendations presented by City Channel management. Most of you have not seen this report. This is because the committee voted to not include it in its final report at the request of City Channel management. I do not think having amendment #10 before the board of estimates was done in order to minimize the time that non-management would have to give of feedback. It is for this reason that I also wish to speak against any other last minute amendments. Once again, I wish I could be there tonight to speak and answer questions, but I am working elsewhere for City Channel.

In short, I believe that Andrew Statz's report is the most thought out and detailed analysis that has been produced regarding City Channel's current operations and more importantly, it's future. I ask that you not make any changes to the Mayor's proposed budget because of this.

-Christopher Richter 11/15/10

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