	는 사람들은 사람들은 기계를 받는 것이다. 보고 있다. 기계를 보고 있는 것이다.	Date: _ b -	17-08
	CITY OF MADISON		
Registration Statement	Common Council COMMITTEE		
Please Print 10477	PLEASE PRINT CLEARLY		
Agenda No. #2 thru 20 Class/A operators proposed	Name ROSEMARY L Address III W WILSON MADISON 53	19 2	
Please check the appropriate boxes:			
Support Oppose Neither Support Nor Oppose	and Wish to spe Do not wish Available to		stions
At this meeting are you representing an organ (If you answered "no," STOP ; you need not of who you represent and go on to the next q	complete the rest of this form. If you ans	☐ Yes wered "yes,"	`. <i>T</i> `
Name, address and telephone number of each	h person or organization you are represent	ing:	
Are you being paid for your representation?	<u> </u>	Yes	□No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question)		☐ Yes wered "yes,'	☐ No ' go on to the next

Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes

Speaking Limits:

REGISTRATION STATEMENT - PAGE 2

Are you an elected official other governmental body		ing solely on behalf of your office or for your municipality or Yes No
	the question, STOP. You nee I "no" to the question, go on t	ed not complete the rest of this form, except that you must sign to the next question)
If you are being paid for that:	your representation, or if yo	ur appearance is part of other paid duties, please be advised
Before yo with the C		byist, you or your principal must file an authorization
2. Your prin City Clerk	-	orize you to lobby unless you are registered with the
period (ha		ore than \$1,000 for lobbying services in any reporting file expense statements with the City Clerk for the
, –	Clerk's website <u>www.cityofm</u> inty Building, Madison, for me	adison.com/clerk/index.html or go to the Clerk's Office at ore information.)
Date	Signature	
	Print Name	

		190	
Date:	(o -	17-08	

CITY OF MADISON

Registration Statement	Common Council COMMITTEE	
Please Print	PLEASE PRINT NAME CLEARLY	
Agenda No. 2	Name Scott B. THORNTON Address 1104 JENIFER ST	
Please check the appropriate box:	Please check the appropriate box:	
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 organ (If you answered "no," STOP; you need not of who you represent and go on to the next qu	complete the rest of this form. If you answered "yes," provide the name	
Name, address and telephone number of each	n person or organization you are representing:	
Are you being paid for your representation?	☐ Yes ☐ No	
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next	
Information Hearing	mon Council) 5 minutes 3 minutes 3 minutes	

REGISTRATION STATEMENT - PAGE 2

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