Date:	0	12	8	
- 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	-			

CITY OF MADISON

Registration Statement	Common Co	ouncil
Please Print Agenda No.	PLEASE Name Address	PRINT NAME CLEARLY Steve Pullara 7001 Bluffpoint
Please check the appropriate box: Support Oppose Neither Support Nor Oppose	AND	Please check the appropriate box: 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	of this form If you answered "yes," provide the name
Name, address and telephone number of each	person or organiza	ation you are representing:
Are you being paid for your representation? Are you appearing as part of your other paid (If you answered "no," STOP; you need not question)	duties for this perso complete the rest of	Yes No On or organization? Yes No of this form If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Communication Hearing Other Items Speaking Please Flease Carol Weber (S)	orler	minutes minutes

Are you an other govern	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form If	ered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question.)
If you are b that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
(Please go Room 103 o Date	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.) 10 7
	Print Name Steve Pullara

		CITY OF MADIS	ON	
Registrat		Common Cou	ncil	
Please Print				
			RINT NAME CLEA	
		Name	Ryan In 6626 C	inissen
Agenda No.		Address	6626 (ar Hon Dr
	797			
Please check the app	propriate box:		Please check the	appropriate box:
Support		AND	Wish to speak	
Oppose		AND	Do not wish to Available to a	o speak nswer questions
Neither St	ipport Nor Oppose			
	ou representing an organiz			Yes No
(If you answered "no of who you represent)," STOP; you need not co and go on to the next que	omplete the rest of the stion)	his form. If you answe	red "yes," provide the name
	elephone number of each p		The state of the s	
Spr	echen East	Neushba	nhood As	58 <i>0</i> C,
Are you being paid fo	or your representation?			Yes No
Are you appearing as	part of your other paid du	ities for this person	or organization?	Yes No
				ered "yes," go on to the next
Speaking Limits:	Public Hearing (Commo	on Council)5 mi	nutes	
	Information Hearing	3 mi	inutes	
	Other Items			
	Speulci	onde	1 + 6	
	fleas	e go d	n #6 Junielly	

	하는 연원으로 하는 회사 회사 회사의 회사의 시작 문항 생활하고 있는 것은 하는 경험 경험 사람들이 함께 가는 경험을 받는 것은 것이다.
Are you an electory	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
(If you answer this form If yo	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)
If you are beinthat:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk
2	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)
Date <u>10</u> /	1-7/08 Signature ()
	Print Name Zyan Jennissen

	Date: $\frac{90/2}{}$
	CITY OF MADISON
Registration Statement	Common Council COMMITTEE
Please Print Agenda No. 2/1.	PLEASE PRINT CLEARLY Name Brian Hayes Address 7013 Bluff Fourt Dr.
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppose	and 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	person or organization you are representing:
Are you being paid for your representation?	☐ Yes ☐ ¥Yo
Are you appearing as part of your other paid of (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

re you an elected official or employee who is appearing solely on behalf of your office or for your municipality or her governmental body?
you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign is form. If you answered "no" to the question, go on to the next question.)
you are being paid for your representation, or if your appearance is part of other paid duties, please be advised at:
1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
lease go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at from 103 of the City-County Building, Madison, for more information.)
ate Signature
Print Name

Date: 10-7-02

CITY OF MADISON

Registration Statement	- Common Council COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. 4/	Name Carol Weber Address 6913 Bluff Point 7 Madison W.
Please check the appropriate box:	Please check the appropriate box:
☐ Support☐ Oppose☑ Neither Support Nor Oppo	AND Wish to speak Do not wish to speak Available to answer questions
	ganization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide the name t question)
Name, address and telephone number of ea	ach person or organization you are representing:
Are you being paid for your representation	n? ☐ Yes ☑No
	aid duties for this person or organization? Yes XNo not complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	ommon Council) 5 minutes ng

Are you an oother govern	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form If	ered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question)
If you are b that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
1,	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk
2	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
(Please go Room 103 oj	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information)
Date	10.2-08 Signature Carol Weber
	Print Name Carol Lebeser

Date: # Oct 2008

CITY OF MADISON

Please Print PLEASE PRINT NAME CLEARLY Name Seven FV can Address 29.3 Kape Please Check the appropriate box: Wish to speak Do not wish to speak Available to answer questions At this meeting are you representing an organization or a person other than yourself: Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question) 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? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council)	Registration State		
Please check the appropriate box: Support		COMMITTEE	
Agenda No. 4/ Address 2563 Kaper 126 Please check the appropriate box: Support	Please Print	DI EASE DOINT NAI	AE CLEADIV
Address 2993 Kape(22 Maddress 2993 Kape(22			
Please check the appropriate box: Support			
Please check the appropriate box: Support	Agenda No. 7/	- Address 2993	Kaper 12d
Support Oppose Neither Support Nor Oppose At this meeting are you representing an organization or a person other than yourself: If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question.) Name, address and telephone number of each person or organization you are representing: Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing	1179		
Support Oppose Neither Support Nor Oppose At this meeting are you representing an organization or a person other than yourself: If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question.) Name, address and telephone number of each person or organization you are representing: Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing			
Do not wish to speak Available to answer questions	Please check the appropriate b	ox: Please	check the appropriate box:
Neither Support Nor Oppose At this meeting are you representing an organization or a person other than yourself: (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question.) Name, address and telephone number of each person or organization you are representing: Are you being paid for your representation? Yes No Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes	☐ Support		
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 who you represent and go on to the next question.) 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? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes	Oppose		
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question.) Name, address and telephone number of each person or organization you are representing: Simple Section Moderate Section Section	Neither Support No	or Oppose	attable 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 who you represent and go on to the next question.) Name, address and telephone number of each person or organization you are representing: Simple Section Western Section Section	At this meeting are you represen	ting an organization of a person other than w	ourself: Ves I No
Name, address and telephone number of each person or organization you are representing: Simple Section Modes William William			
Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Are you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes	of who you represent and go on	o the next question)	
Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Are you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes	Name, address and telephone nu	mber of each person or organization you are	representing:
Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes	Jin Weber		
Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes	6613 BLIFFE	and Madison WIT	57718
Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes		7111	
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.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes			
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes	Are you being paid for your repr	esentation?	Yes 🗆 No
Information Hearing 3 minutes	(If you answered "no," STOP;		
A TRIBUIES	Informat		

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

				Date:	
		CITY OF MA	DISON		
Registra	tion Statement -	Common (Council		
		COMMITTEE			
Please Print					
		PLEASI	E PRINT NAME CL	EARLY	
		Name	JAMES N		
Agenda No.		Address	6913 BLud	if Bint	DR
	11799		Madison, l		
Please check the ap	opropriate box:		Please check	the appropria	ate box:
☐ Support			Wish to sp	oeak	
Oppose		AND	■ · · · · 	sh to speak	
Neither S	upport Nor Oppos	se	— ∐ Avanable	to answer que	Stions
(If you answered "n of who you represen	you representing an organo," STOP; you need not at and go on to the next of	ot complete the resi question)	of this form. If you an	swered "yes,"	☐ No ' provide the name
Are you being paid	for your representation?			☐ Yes	No
Are you appearing a (If you answered "n question)	s part of your other paid o, "STOP; you need no	d duties for this per ot complete the res	son or organization? of this form. If you ar	Yes iswered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Cor Information Hearing Other Items.	gaaitame incinasaanoise rasiiseisisen os	3 minutes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answe this form. If y	ered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question.)
If you are be that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information)
Date <u>/</u>	7/08 Signature James N. Weber
I_{\perp}	Print Name JAMES N. Weber

CITY OF MADISON Registration Statement -**Common Council** COMMITTEE Please Print PLEASE PRINT NAME CLEARLY Agenda No. Address Please check the appropriate box: Please check the appropriate box: Support A Wish to speak AND Do not wish to speak Available to answer questions **Neither Support Nor Oppose** At this meeting are you representing an organization or a person other than yourself: (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question) Name, address and telephone number of each person or organization you are representing: Are you being paid for your representation? 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) Speaking Limits: Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes Other Items 3 minutes

Are you an el other governn	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
(If you answer this form. If yo	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question)
If you are bei that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information)
Date	O/7/08 Signature Matthewsly Print Name ROW TRACTEMBERG
1.	