City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	e JOE SCH ess 5009 M	PESA Rd.
		MONON	TANK TANK
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose		*	
Neither support nor oppose			
I wish to speak			
Available for information only			
(If you answered "no," STOP; you need question.) Name, address and telephone number of e			
Are you being paid for your representation	n?		Yes No
Are you appearing as part of your other part (If you answered "no," STOP; you need question)	aid duties for thi not complete the	s person or organization? erest of this form. If you o	Yes No answered "yes," go on to the next
Speaking Limit:	***********	4 minutes	
REGISTRANT # 97	(See	Back)	

Are you an governmenta	elected official who is appearing solely body?	on behalf of your office or for	your mun Yes	No No
	ered "yes" to the question, STOP. You nee you answered "no" to the question, go on t		m, except t	hat you must sign
If you are be that:	ing paid for your representation, or if you	ir appearance is part of other par	id duties, d	o you understand
1.	Before you engage in lobbying as a lob with the City Clerk?	byist, you or your principal must	file an autl	norization
2	Your principal is not permitted to auth with the City Clerk?	torize you to lobby unless the p	rincipal is	registered No
3.	If your principal spends or will owe meriod (calendar quarter), the principal the remaining quarters of the calendar years.	must file expense statements with	th the City Yes	reporting Clerk for No
	red "no" to any of the last three question m 103 of the City-County Building, Madiso		66-4601 or	go to the Clerk's
Date	Signature			
	Print Name			

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Jusan Wall	de-
Agenda No. 29	Addı	ress 311 E Jol	nuser St #306
-		Madison	Nusca St #306 WI 53703 1575
	_1		
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	1101010110111	X	X
Oppose			
Neither support nor oppose	Χ		
I wish to speak			<u> </u>
Available for information only			
(If you answered "no," STOP; you need question.) Name, address and telephone number of a	each person or or	ganization you are repres	
Are you being paid for your representation Are you appearing as part of your other p (If you answered "no," STOP; you need question)	aid duties for this	s person or organization? erest of this form. If you o	☐ Yes ☐ No ☐ Yes ☐ No answered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
. B.	(See	Back)	
REGISTRANT # 86			

Are you an egovernmental	elected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
	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 beithat:	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

20	Nam	=	lyn Strahl
Agenda No. 29	Addı	ess <u>5290 F</u>	Tarbor CI.
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	/ lastres		
Oppose	10.11		
Neither support nor oppose			
I wish to speak			*
Available for information only			
question) Name, address and telephone number o	f each person or or	ganization you are represe	nting:
Are you being paid for your representat	ion?		Yes No
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	paid duties for this ed not complete the	s person or organization? rest of this form. If you as	Yes No No nswered "yes," go on to the next
Speaking Limit:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4 minutes	
REGISTRANT # 83	(See	Back)	

Are you ar governmen	tal body?
	wered "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 1 that:	being paid for your representation, or if your appearance is part of other paid duties, do you understand
1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	wered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's bom 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		· Ven	
	Nam	ress 1107 E. MIPF	
Agenda No. 29	Add	ress NUTE-WILL	in #4
		MADISON, WI	
		Int Day, 4 as	
Please check the appropriate boxes:			
The state of the s			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	<u> </u>	Y	×
Oppose			
Neither support nor oppose			
I wish to speak			*
Available for information only			
At this meeting are you representing an (If you answered "no," STOP; you nee question.) Name, address and telephone number of SAND DUT PAR 301 No.	d not complete the	e rest of this form. If you as	nswered "yes, go on to the next enting:
Are you being paid for your representat	ion?		☐ Yes No
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	paid duties for thi d not complete the	s person or organization? e rest of this form. If you ar	Yes No nswered "yes," go on to the next
Speaking Limit:	*****************	4 minutes	
	(See	Back)	
REGISTRANT # 82	(300	" '	

Are you an elected official ward governmental body?	ho is appearing solely on behalf of you	our office or for your municipality or other Yes No
	uestion, STOP. You need not complete i ' to the question, go on to the next quest	the rest of this form, except that you must sign ion.)
If you are being paid for your that:	representation, or if your appearance is	s part of other paid duties, do you understand
1 Before you engage with the City Cl	age in lobbying as a lobbyist, you or you	ur principal must file an authorization Yes No
2. Your principal is with the City Cle	is not permitted to authorize you to lo	bby unless the principal is registered Yes No
period (calendar	I spends or will owe more than \$500 for quarter), the principal must file expensionaters of the calendar year?	
	f the last three questions, please call the County Building, Madison, for more info	e City Clerk at 266-4601 or go to the Clerk's ormation.)
Date	Signature	
	Print Name	

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	-	PRINT N	AME CLEARLY
	Nam	e <u>Sabi</u>	Atteyin
Agenda No. 29	Addr	ess H). (5ammo
		Made	37 W/37
Please check the appropriate boxes:		, 0 5000	
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	-2		·
Oppose	,,		
Neither support nor oppose	· · · · · · · · · · · · · · · · · · ·		
I wish to speak			
Available for information only			
At this meeting are you representing an o (If you answered "no," STOP; you need question.) Name, address and telephone number of	not complete the	erest of this form. If you	answered "yes," go on to the next
Are you being paid for your representation	on?		☐ Yes ☐ No
Are you appearing as part of your other p (If you answered "no," STOP; you need question)	aid duties for this not complete the	s person or organization? rest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 73	(See	Back)	

Are you an governmenta	body? lected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
	ed "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 be that:	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	000 3	7050n
Please check the appropriate boxes:			
Support Oppose	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Neither support nor oppose I wish to speak Available for information only			> /
At this meeting are you representing an (If you answered "no," STOP; you nee question.) Name, address and telephone number of	d not complete the	e rest of this form If you a	inswered "yes," go on to the next
Are you being paid for your representate Are you appearing as part of your other	paid duties for this	s person or organization?	☐ Yes☐ No☐ Yes☐ No
(If you answered "no," STOP; you need question)	d not complete the	e rest of this form. If you a	inswered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
REGISTRANT # 66	(See	Back)	

Are you governm		body? Selected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
1 5 .		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 ar that:	re beir	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
1	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
2	2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
3	3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

3 4 6

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT	AME CLEARLY
	Nam	ress 117A E. M	INNEL
Agenda No. 29	AIN STI		
G		MADISON, W	1 531,2
the second secon		TANDION, M	1 0 5/0 5
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			V
Oppose			
Neither support nor oppose			
I wish to speak	V	V	V
Available for information only			
(If you answered "no," STOP; you nee question.) Name, address and telephone number of			
Are you being paid for your representate Are you appearing as part of your other (If you answered "no," STOP; you need	paid duties for thi	s person or organization?	Yes No Yes No answered "yes," go on to the next
question.)	-		
Speaking Limit:	••••••	4 minutes	
REGISTRANT # 63	(See	Back)	

	ou an on nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
		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 that:	are be	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
	2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _	9/	Signature State Seran HALTINNEL-

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY Agenda No. 29 Address Please check the appropriate boxes: 01985 01881 01880 Repealing smoking ban Hardship Exemption Referendum Support Oppose Neither support nor oppose I wish to speak Available for information only 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," go on to the next question.) Name, address and telephone number of each person or organization you are representing: \prod No Yes 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 Limit:4 minutes

(See Back)

REGISTRANT # 61

Are you an egovernmental	elected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
	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 beithat:	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's n 103 of the City-County Building, Madison, for more information.)
Date	20 05 Signature Frint Name FSSICA Seeweys

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		IMINITY	AME CDEATCH
	Nam	e Nicholas	T SAGANSKI
Agenda No. 29			GORHAM ST. #1
	Addi		
		MADISON	, wi 53703
Please check the appropriate boxes:			
Trease effect the appropriate boxes.			
	01880	01881	01985
·	Referendum	Hardship Exemption	Repealing smoking ban
Support		×	<u> </u>
Oppose	X		
Neither support nor oppose			
I wish to speak			X
Available for information only			
(If you answered "no," STOP; you need question.) Name, address and telephone number of			
Are you being paid for your representation			☐ Yes ☐ No
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)	aid duties for this not complete the	s person or organization? rest of this form. If you a	Yes No answered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 47	(See	Back)	

Are you an egovernmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
	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 beithat:	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	_		
	Nam	e PAUL E	GRINDROD
Agenda No. 29	Addr	ess ADDI ES	CH LANE
		M A DISOW	GRINDROD CH LANE WI 53704
Please check the appropriate boxes:			
	01000	01881	01985
	01880 Referendum	Hardship Exemption	Repealing smoking ban
Compart	Referendum	X X	X X
Support Oppose		/	
Neither support nor oppose			
I wish to speak			X
Available for information only			
Name, address and telephone number of e	ach person or or	ganization you are repre	senting:
Are you being paid for your representation	1?	*	☐ Yes No
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question)	aid duties for this not complete the	s person or organization? rest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 24	(See	Back)	

	ou an e mental	lected official who is appearing solely on behalf of your office or for your municipality or other body?
		ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)
If you that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
	2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year? Yes No
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date _	9/2	Print Name PAUL E. GRINDROD
	1	Print Name PAUL E. GRINDROD

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Some of the second seco	1 Brown	Susan S 2202 u Madiso	Name Addr	Agenda No. 29
, 2587				Please check the appropriate boxes:
1985 z.smoking ban	0198 Repealing.sm	01881 Hardship Exemption	01880 Referendum	
<i>y</i>		Z	1(01010114444	Support
				
		11/1 1/18		Oppose
				Neither support nor oppose
				I wish to speak
			<u></u>	Available for information only
, No	∏ Yes 「		17	Are you being paid for your representat
<u> </u>	<u> </u>		1.	Are you being pare for your representati
☐ No " go on to the next	Yes [swered "yes," go	person or organization? est of this form. If you are	aid duties for this not complete the	Are you appearing as part of your other If you answered "no," STOP; you need question.)
		4 minutes		Speaking Limit:
		anlz)	(See I	
		ack)	(266.1	REGISTRANT #

Are you an e governmental	lected official who is appearing solely on behalf of your office or for your municipality or other body?
(If you answer this form. If yo	ed "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 being that:	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you answer Office at Roon	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY

REGISTRANT #

Agenda No. 29	Nam Addı		any ct.
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support			
Oppose)	
Neither support nor oppose			
I wish to speak			
Available for information only			
Name, address and telephone number of e		gamzanon jou are represe	☐ Yes No
Are you appearing as part of your other pa (If you answered "no," STOP; you need question)	aid duties for thi	s person or organization? e rest of this form. If you a	Yes No- nswered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
	(See	Back)	
REGISTRANT #	•		

	ou an e mental		fficial who is	s appearing sole!	y on behalf of y	our office o	for your mun	nicipality or other
				on, STOP . You n he question, go or			is form, except i	that you must sign
If you that:	are bei	ng paid 1	for your repre	esentation, or if y	our appearance i	s part of othe	er paid duties, d	o you understand
	1		you engage in e City Clerk?	n lobbying as a lo	bbyist, you or yo	our principal:	must file an aut	horization No
	2.	-	orincipal is no e City Clerk?	t permitted to au	thorize you to le	obby unless t	he principal is Yes	registered No
	3	period	(calendar qua	ends or will owe rter), the principa rs of the calendar	al must file expe			
				last three questic ty Building, Mad			at 266-4601 or	go to the Clerk's
Date _	9.	20	05	Signature		T'		
				Print Name	MATT	KAR	<u> </u>	·

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		U () 4	nojem,	
	Nam	Name Kane Govert Address 641 W. Main St. 107		
Agenda No. 29	Addı	ress 641W. Main	5T. 10t	
			e de la companya della companya della companya de la companya della companya dell	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose		Contract of the contract of th		
Neither support nor oppose				
I wish to speak				
Available for information only				
Are you being paid for your represent	tation?		Yes No	
Are you appearing as part of your oth (If you answered "no," STOP; you n question)	er paid duties for thi eed not complete the	s person or organization? e rest of this form. If you ar	Yes No iswered "yes," go on to the next	
Speaking Limit:	•••••	4 minutes		
	(See	Back)		
REGISTRANT #	`			
REGISTION	_			
	-			

-	ou an e imental	lected official who is appearing solely on behalf of your office or for your municipality or other body?
		red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign on answered "no" to the question, go on to the next question.)
If you that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
	3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
, , ,		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date _		Signature Hall Hall Frint Name Kane Gaulet

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e <u>Jasm</u> I	Zilan
Agenda No. 29	Addı	ess 2417 E.	12 tn 81.
		Malison	NJ 53704
			V /
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose			
Neither support nor oppose			
I wish to speak	-		
Available for information only			1
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.) Name, address and telephone number of each person or organization you are representing:			
Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? 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 Limit:4 minutes			
REGISTRANT # (See Back)			

Registration Statement - 1 age 2
Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
(If you answered "yes" to the question, STOP . You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question)
If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:
Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)
Date 9/20/05 Signature Print Name Devidue

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	[V	V
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only	<u> </u>	1	
At this meeting are you representing an of (If you answered "no," STOP; you need question.) Name, address and telephone number of	not complete the	rest of this form. If you ar	nswered "yes," go on to the next
(If you answered "no," STOP; you need question.) Name, address and telephone number of	each person or or	rest of this form. If you ar	nswered "yes," gb on to the next
(If you answered "no," STOP; you need question.)	each person or or	rest of this form. If you ar	nswered "yes," go on to the next
(If you answered "no," STOP; you need question.) Name, address and telephone number of	each person or or one	ganization you are represent sperson or organization?	nting: ☐ Yes
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	ou an e ımental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
		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 that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you Office	answer at Room	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

REGISTRANT #

- 7		
Nam		Sentz 1 1-11
Addı	ress <u>J.6 /1. 5;</u>	room St. Apr. (
	Madison, L	11 sta
01880	01881	01985
Referendum	Hardship Exemption	Repealing smoking ban
		<u> Sopport</u>
		44-94-94-94-94-94-94-94-94-94-94-94-94-9
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oaid duties for this	norman or organization?	
l not complete the	rest of this form. If you an	Yes No No swered "yes," go on to the next
	e rest of this form. If you an	
••••••	e rest of this form If you an	
	01880 Referendum organization or a planet complete the each person or or on?	Referendum Hardship Exemption organization or a person other than yourself: I not complete the rest of this form. If you are each person or organization you are represen

	ou an onemental	elected official who is appearing solely on behalf of your office or for your municipality or other \Bullet Yes \Bullet No
		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 that:	ı are be	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
	3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If yoı Office	i answe at Rooi	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

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		*	
	Nam	e <u>Eric</u> Hochk	anne
Agenda No. 29	A da	ress 311 N. Hanco	JI SL # 330
	Addi	do 1	2003
		rwson, wi	33703
Please check the appropriate boxes:			
Flease check the appropriate boxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing sproking ban
Support		V	
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
Are you being paid for your representat	tion?	•	Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	r paid duties for this ed not complete the	s person or organization? rest of this form. If you a	☐ Yes ☐ No nswered "yes," go on to the next
Speaking Limit:	****************	4 minutes	
	(See	Back)	
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		REGIS'	TRANT#

	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
		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 that:	ı are bei	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's n 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name
		•

City of Madison Registration Statement - Common Council

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		·			
	Nam	e Matthew E	Eisele		
Agenda No. 29	Add	Name Matthew Eisele Address 1107 East Mifflia Madison WI 153703			
		Madison 4	U\$253703		
	i		,		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support	X	X	×		
Oppose			The state of the s		
Neither support nor oppose					
I wish to speak Available for information only					
Name, address and telephone number of	f each person or or	ganization you are represe	nting:		
Are you being paid for your representat	tion?		☐ Yes XNo		
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for thi	s person or organization? erest of this form. If you ar	Yes No No nswered "yes," go on to the next		
Speaking Limit:		4 minutes			
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REGISTRANT #					

Are you governme	n elected official who is appearing solely on behalf of your office or for your municipality or other tal body? Yes No
	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign fyou answered "no" to the question, go on to the next question)
If you are that:	being paid for your representation, or if your appearance is part of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	wered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's com 103 of the City-County Building, Madison, for more information)
Date	Signature
	Print Name

City of Madison Registration Statement - Common Council

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Agenda No. 29	Nam Addi	e Ryan	ame clearly Stoflet yes IRD #20°
Please check the appropriate boxes:	. •		
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support		V	V
Oppose			
Neither support nor oppose			
I wish to speak Available for information only			
Name, address and telephone number of ISVUCE STOFIET 33	each person or or	ganization you are represe	enting: 0 Anchor Inn
Are you being paid for your representation	on?		Yes XNo
Are you appearing as part of your other p (If you answered "no," STOP; you need question)			☐ Yes ☑ No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT #	(See]	Back)	

	ou an e nmental	elected official who is body?	appearing solely or	n behalf of yo	our office or fo	or your muni Yes	cipality or other No
(If you this fo	u answei orm If ye	red "yes" to the question ou answered "no" to the	n, STOP. You need e question, go on to	not complete t the next questi	he rest of this fo on)	orm, except th	at you must sign
If you that:	are bei	ng paid for your repres	entation, or if your	appearance is	part of other p	aid duties, do	you understand
	1	Before you engage in with the City Clerk?	lobbying as a lobby	vist, you or you	ır principal mu	st file an auth Yes	orization No
	2.	Your principal is not with the City Clerk?	permitted to author	rize you to lob	by unless the	principal is r Yes	egistered No
	3	If your principal spen period (calendar quart the remaining quarters	er), the principal m	ust file expens	or lobbying ser se statements w	vices in any prith the City (reporting Clerk for \[\] No
(If you Office	ı answer at Roon	red "no" to any of the l n 103 of the City-County	ast three questions, Building, Madison	please call the , for more info	e City Clerk at rmation.)	266-4601 or į	go to the Clerk's
Date _			Signature				
			Print Name				
						***	अप्रकारक स्वयक्तिक क्रिकाणक

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

Agenda No. 29	Nam Addi		IH BENAVIDES ISHNIGTON AND #48 WI 5373
		MULTIPON	W1 35/2
Please check the appropriate boxes:			
riease check the appropriate boxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	X	X	X
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
At this meeting are you representing an (If you answered "no," STOP; you nee question) Name, address and telephone number o	ed not complete the	e rest of this form. If you a	nswered "yes," go on to the next
(If you answered "no," STOP; you nee question) Name, address and telephone number o	ed not complete the	e rest of this form. If you a	nswered "yes," go on to the next
(If you answered "no," STOP; you nee question.)	ed not complete the	e rest of this form. If you a	nswered "yes," go on to the next
(If you answered "no," STOP; you nee question) Name, address and telephone number o	of each person or or cition?	rest of this form. If you are represe ganization you are represe sperson or organization?	nswered "yes," go on to the next
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	ou an e mental	lected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
		ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign on answered "no" to the question, go on to the next question.)
If you that:	are beii	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you Office a	answer at Room	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

Nam Addr 01880 eferendum nization or a p complete the	11/10	O1985 Repealing smoking ban
eferendum	Hardship Exemption	Repealing smoking ban Yes
eferendum	Hardship Exemption	Repealing smoking ban Yes
nization or a p	person other than yourself	: Yes Divi
nization or a p	person other than yourself	: Yes DAO
nization or a p	person other than yourself	: Yes
nization or a p	person other than yourself	: Yes
nization or a p	person other than yourself	Yes Yes
nization or a p	person other than yourself	Yes Yes
		☐ Yes No
duties for this complete the	s person or organization? rest of this form. If you a	Yes No nswered "yes," go on to the next
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(See]	Back)	
	duties for this	duties for this person or organization? complete the rest of this form. If you a 4 minutes (See Back)

	an elected official who is a portal body?	appearing solely on behalf of your office or for your municipality or other Yes
		s, STOP. You need not complete the rest of this form, except that you must sign question, go on to the next question.)
If you are that:	being paid for your represen	entation, or if your appearance is part of other paid duties, do you understand
1	Before you engage in lowith the City Clerk?	obbying as a lobbyist, you or your principal must file an authorization Yes You
2	Your principal is not p with the City Clerk?	permitted to authorize you to lobby unless the principal is registered Yes Yes
3		Is or will owe more than \$500 for lobbying services in any reporting er), the principal must file expense statements with the City Clerk for of the calendar year?
		st three questions, please call the City Clerk at 266-4601 or go to the Clerk's Building, Madison, for more information)
Date 9	-20-5	Signature Print Name MARHUM A MUELSOW
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REGISTRANT #

City of Madison Registration Statement - Common Council

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		PRINT N	AME CLEARLY
Agenda No. 29	Nam Addı	100-	K. Wolden Troy Dr.
		Madison	W1. 53704
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			`
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only	<u> </u>		
(If you answered "no," STOP; you need question.) Name, address and telephone number of Archor			
Are you being paid for your representation	on?		☐ Yes No
Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	oaid duties for this not complete the	s person or organization? rest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
	(See	Back)	
REGISTRANT #			

Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
(If you answered "yes" to the question, STOP . You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)
If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:
Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)
Date 9-20-05 Signature fatricia K. Wolds
Print Name Patricia K. Wolder

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

Agenda No. 29	Nam Addı	53 . 1	540-Cet 21119 St W 53714
Please check the appropriate boxes:	- 		
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support		1	
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
Name, address and telephone number of BRUS HAVELONE Are you being paid for your representati	un/19	ganization you are repres	enting: Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this	s person or organization? rest of this form. If you o	Yes No answered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
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Are you an government		is appearing solely on	behalf of your office of	or for your munici Yes	pality or other No
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1.	Before you engage with the City Clerk		st, you or your principal		ization] No
2 .	Your principal is with the City Clerk		ze you to lobby unless t		istered No
3.	period (calendar q	_	than \$500 for lobbying st file expense statement?	ts with the City Cle	
		he last three questions, p unty Building, Madison,	lease call the City Clerk for more information.)	at 266-4601 or go	to the Clerk's
Date		Signature	- No. of 1975		***
		Print Name			
					· - * • • • • • • • • • • • • •

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

REGISTRANT # _____

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Agenda No. 29	Nam Addi	· · · · · · · · · · · · · · · · · · ·	Hereman Aus
Agenda Ivo.	Addi	MAKTSON	
	.	Carried & Gillians with a	
Please check the appropriate boxes:	•		
	01880	01881	01985
· ·	Referendum	Hardship Exemption	Repealing smoking ban
Support		E	
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
Are you appearing as part of your other part of your need "no," STOP; you need	on?	s person or organization?	☐ Yes ☐ No
question.)	,		, . G
Speaking Limit:		4 minutes	
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REGISTRANT #			

.,	elected official who is appearing solely on behalf of your office or for your municipality or other
governmental	body?
	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 beithat:	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
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3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date	20/05 Signature Bronde J. Start
	Print Name BROWGA L, Steventon

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

	Nam	e Sound St	ilman
Agenda No. 29	Addı	ress 5128 Revi	nalds Ave
		Wourak	
			Marin
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	102010110111	X	X
Oppose			
Neither support nor oppose	×		
I wish to speak			
Available for information only			
Name, address and telephone number of	1	ganization you are represe	nting:
Are you being paid for your representation	on?		Yes No
Are you appearing as part of your other p (If you answered "no," STOP; you need question)	paid duties for this not complete the	s person or organization? rest of this form. If you ar	Yes No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
	(See	Back)	
REGISTRANT #			

 (If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.) If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that: 1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? 2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? 3. If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year? (If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's
Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? Yes No If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year? Yes No If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's
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period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year? (If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's
Office at Room 103 of the City-County Building, Madison, for more information.)
Date Signature
Print Name

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

Agenda No. 29		Nam Add	42/14/6	elsen pood Gardens , WI 5370+
Please check the approp	riate boxes:			i i
		01880	01881	01985
		Referendum	Hardship Exemption	Repealing smoking ban
Support	*****			
Oppose				
Neither support nor o	ppose			
I wish to speak	<u> </u>			
Available for informa	ation only			
At this meeting are you in (If you answered "no," in question.)	STOP; you need	not complete the	person other than yourself: e rest of this form. If you are ganization you are represe	nswered "yes," go on to the next
At this meeting are you really our answered "no," requestion.) Name, address and teleposter you being paid for you appearing as partify you answered "no," is a second to the control of	hone number of our representation	each person or or one	e rest of this form. If you are ganization you are represe sperson or organization?	nswered "yes," go on to the next
At this meeting are you really (If you answered "no," requestion.) Name, address and telepth Are you being paid for you appearing as part (If you answered "no," is a second to the control of the contr	hone number of our representation	each person or or one	e rest of this form. If you are ganization you are represe sperson or organization?	nswered "yes," go on to the next nting: Yes No
At this meeting are you in (If you answered "no," in question.) Name, address and telep Are you being paid for your appearing as particular to the point of the	hone number of our representation of your other process.	each person or or one on? on? aid duties for this not complete the	ganization you are represess person or organization? e rest of this form. If you are	nswered "yes," go on to the next nting: Yes No

	ou an e imental	lected official who is appearing solely on behalf of your office or for your municipality or other body?
		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 that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
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		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's In 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

	Nam	e 1150 S	wheek
Agenda No. 29	Addı	ess SIES. Gar	now Rd. #4
		/\/.oc	21501/WIJ5379
Please check the appropriate boxes:			•
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	and the same		
Neither support nor oppose	The Market		<u> </u>
I wish to speak			
Available for information only			
Name, address and telephone number of the state of the st		gamzanon you are represented	☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	paid duties for thi d not complete the	s person or organization? e rest of this form. If you a	Yes No No Inswered "yes," go on to the next
Speaking Limit:		4 minutes	
	(See	Back)	
REGISTRANT #			
		•	

Are yo		elected official who is appearing solely body?	on behalf of your office or f	or your municipa	lity or other No
		red "yes" to the question, STOP. You ne ou answered "no" to the question, go on		form, except that y	ou must sign
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	1	Before you engage in lobbying as a lob with the City Clerk?	obyist, you or your principal mu		ation No
	2	Your principal is not permitted to aut with the City Clerk?	horize you to lobby unless the		tered ··· No
	3.	If your principal spends or will owe n period (calendar quarter), the principal the remaining quarters of the calendar y	must file expense statements v	vith the City Cler	
		ed "no" to any of the last three question in 103 of the City-County Building, Madis		266-4601 or go t	o the Clerk's
Date _		Signature			
		Print Name			
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City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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	Nam	e NANEY 5	HAKKEY	
Agenda No. 29	Add	ress 205 56 A	LAANS AVE	
_		MADISON WI 53714		
		MACISON	W1 3371	
Please check the appropriate boxes:				
Trease effect the appropriate series.				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support	The state of the s			
Oppose				
Neither support nor oppose				
I wish to speak				
Available for information only				
Are you being paid for your representat	tion?		Yes X No	
Are you appearing as part of your other (If you answered "no," STOP; you need question)	r paid duties for this ed not complete the	s person or organization? erest of this form. If you a	Yes No nswered "yes," go on to the next	
Speaking Limit:		4 minutes		
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	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body? Yes No
		ed "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 that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? Yes No
	2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you Office	answer at Roon	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

City of Madison Registration Statement - Common Council

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PRINT NAME CLEARLY

Agenda No. 29	Nam Addi	ress 205 S	SMARKE!
Please check the appropriate boxes:		5	3714-2705
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
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Oppose	XX		·
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Available for information only			
question)			iswered "yes," go on to the next
Name, address and telephone number of		ganization you are represen	
•	on?	s person or organization?	nting: ☐ Yes No
Are you being paid for your representation Are you appearing as part of your other (If you answered "no," STOP; you need	on? paid duties for thi I not complete the	s person or organization? e rest of this form. If you ar	nting: ☐ Yes No

	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
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If you that:	are bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	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 \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's n 103 of the City-County Building, Madison, for more information.)
Date _		Signature
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City of Madison Registration Statement - Common Council

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Agenda No. 29		ess 509 M	oren ON.
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		11/Q/V(Jh)	
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	Referendum	Hardship Exemption	Repealing smoking ban
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Oppose			
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Name, address and telephone number of	each person or or	ganization you are represe	enting:
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Are you appearing as part of your other (If you answered "no," STOP; you need question)	paid duties for thi I not complete the	e rest of this form. If you a	Yes No No nswered "yes," go on to the next
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Are you an governmenta	an elected official who is appearing solely on behalf of your office or for your municipal body?	No
	wered "yes" to the question, STOP. You need not complete the rest of this form, except the fixed that the fixed that the question, go on to the next question.)	hat you must sign
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3.	If your principal spends or will owe more than \$500 for lobbying services in any period (calendar quarter), the principal must file expense statements with the City the remaining quarters of the calendar year?	
	wered "no" to any of the last three questions, please call the City Clerk at 266-4601 or oom 103 of the City-County Building, Madison, for more information.)	go to the Clerk's
Date	Signature	
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City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	PRINT NAME CLEARLY			
Agenda No. 29	Nam	771	RELLY HAR	<u> 25</u>
Agenda No. 29	Address Stage Grove Rd Walson, WI 537/6			
Please check the appropriate boxes:				
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	Referendum	Hardship Exemption	Repealing smoking bar	n
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Are you appearing as part of your other p (If you answered "no," STOP; you need a you appearing as part of your other p (If you answered "no," STOP; you need question.)	each person or	ganization you are repres	enting: Yes No	
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Are yo		lected official who is appearing solely on behalf of your office or for your municipality or other body?
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If you a that:	are beir	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
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Date 4	$ z_0 $	Signature Atticic Arrison
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City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Please check the appropriate boxes:			•
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	Referendum	Hardship Exemption	Repealing smoking ban
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A. van being mid for vone	tion?		☐ Yes ☐ No
Are you being paid for your representa	uon:		103
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	ou an el mental l	lected official who is appearing solely on behalf of your office or for your municipality or other body?
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