

Support

Rm 108

Date 9/21/14

Name of Traffic Signal Assessment District Mineral Point Road - Yellowstone Road  
**Traffic Signal Assessment District.**

Your Name Carmen Clark

Your Address 325 So Yellowstone Dr #333

Support and wish to speak  Support but do not wish to speak

Oppose and wish to speak  Oppose and do not wish to speak

Your signature Carmen Clark

Parcel Number 070824400926

*I only wish the traffic signal could be installed sooner. This is a dangerous corner for cars turning left across Mineral Pt or crossing M.P.*

Complete this form if you wish to speak before the Board. If you wish to submit written comments and have them entered into the minutes record, please complete and give to the Secretary.

CITY OF MADISON

Registration Statement

Name Eve Fine

Address 106 Shiloh Dr.

BOARD OF PUBLIC WORKS

DATE 09/21/2014

ITEM NO. \_\_\_\_\_ ON AGENDA

Support  Oppose  
 See Written comments for the record

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:

If you answered No - you need not complete the remainder of this form.

Yes  No

If you answered Yes to above question please complete:

Name, Address and phone number of each person or organization you are presenting today:

\_\_\_\_\_

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 YES - continue - on other side please.....

PLEASE SEE OTHER SIDE

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CITY OF MADISON

Registration Statement

BOARD OF PUBLIC WORKS

Name Deborah Zeigler  
Address 325 S. Yellowstone Dr  
Madison WI 53705

DATE 9/21/16  
ITEM NO. 44101 ON AGENDA

Support  Oppose  
 See Written comments for the record

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer

Questions

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CITY OF MADISON

Registration Statement

BOARD OF PUBLIC WORKS

Name Ray Polkinghorn  
Address 6426 Offshore Dr.  
Madison, WI 53705

DATE 9/21/16  
ITEM NO. \_\_\_\_\_ ON AGENDA

Support  Oppose  
 See Written comments for the record

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CITY OF MADISON

Registration Statement

BOARD OF PUBLIC WORKS

Name JOHN A. GEROLD  
Address 214 SARATOGACIR  
MADISON WI 53705

DATE 9/21/16  
ITEM NO. 4401 ON AGENDA

Support                       Oppose  
 See Written comments for the record

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer

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CITY OF MADISON

Registration Statement

BOARD OF PUBLIC WORKS

Name Bruce Perchik  
Address 122 Quarterdeck Dr

DATE 9/21/16  
ITEM NO. \_\_\_\_\_ ON AGENDA

Support                       Oppose  
 See Written comments for the record

Wish to Speak  
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