Date: 2/27/07

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ni n				
Please Print		PLEASE	PRIN	T CLEARLY
gt	em 8	Name	M	ARY ANN HALVORSON
Agenda No. 05	496	Address	//	LARKIN STI
	į		. —	2.33-2839
Please check the ap	propriate boxes:			
Support Oppose Neither S	Support Nor Oppose		and	<ul><li>☐ Wish to speak</li><li>☑ Do not wish to speak</li><li>☑ Available to answer questions</li></ul>
of who you represer	to," STOP; you need not connect and go on to the next quest telephone number of each pe	tion)		nis form. If you answered "yes," provide the name in you are representing:
· · · · · · · · · · · · · · · · · · ·			<del></del>	<del>, , , , , , , , , , , , , , , , , , , </del>
Are you being paid	for your representation?		<u> </u>	☐ Yes ☐ No
	ns part of your other paid duti no," <b>STOP;</b> you need not con			or organization?
Speaking Limits:	Public Hearing (Commor Information Hearing Other Items	nannskoannostanun is ku su	3 min	nutes

		ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?  Yes No
		red "yes" to the question, <b>STOP.</b> 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, 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	***	Signature
		Print Name

Date:  $\frac{2}{27}/67$ 

Registrat	ion Statement -	Cor	mmon	Cou	ncil
	•		AITTEE		
Please Print	·		DI FASE	PRIN'	T CLEARLY
Agenda No 8 -	05496		Name Address	<u>Je</u>	ean Pierre ROSAY
Please check the appr	opriate boxes:				
Support Oppose Neither Su	ipport Nor Oppose	<b>;</b>		and	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
(If you answered "no	ou representing an organ," <b>STOP;</b> you need not and go on to the next qu	comple	ete the res		ner than yourself: Yes No his form If you answered "yes," provide the name
Name, address and te	lephone number of each	persor	n or organ	izatio	n you are representing:
,		•	Ü	•	
<del> </del>					
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Are you being paid for	or your representation?				☐ Yes ☐ No
	part of your other paid of ," STOP; you need not				or organization?
Speaking Limits:	Public Hearing (Communication Hearing	that at all has a decided to	en e		nutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipalit	y or
other governmental body?	
(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must this form If you answered "no" to the question, go on to the next question.)	sign
If you are being paid for your representation, or if your appearance is part of other paid duties, please be adv that:	ised
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 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?	
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office Room 103 of the City-County Building, Madison, for more information)	? at
Date 2/27/07 Signature Jean Pierre ROSAI	
Print Name	

Date: 2-27-0

#### CITY OF MADISON

**Common Council** 

Registration Statement -

COMMITTEE Please Print PLEASE PRINT CLEARLY Please check the appropriate boxes: Wish to speak and Support Do not wish to speak **Oppose** 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 elected official or employee who is appearing solely on behalf of your office or for your municipality or

인 이 어제 보다 가게 하는 이번 경우로 원이 가장 보니 이 상품으로 만들고 보고를 받았다. 안전한 어느로 받았다. 호인	
(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, extitude this form. If you answered "no" to the question, go on to the next question)	cept that you must sign
If you are being paid for your representation, or if your appearance is part of other paid du that:	ties, please be advised
Before you engage in lobbying as a lobbyist, you or your principal must file a with the City Clerk	n authorization
Your principal is not permitted to authorize you to lobby unless you are regined.  City Clerk.	stered with the
If your principal spends or will owe more than \$1,000 for lobbying services in period (half year), the principal must file expense statements with the City remainder of the calendar year?	
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to Room 103 of the City-County Building, Madison, for more information)	the Clerk's Office at
Date 2-27-07 Signature Colony-MM  Print Name £1:70 beth £ Do C	Horay-Wernett

Date:  $\frac{2/27/0>$ 

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Please Print		PLEASE	PRINT CLEAR	LY	
Agenda No. 8 - 0	5496	Name Address	CHRIS 3902	ROMNES PRISCILLA	<u>CANE</u>
Please check the approp	oriate boxes:				
Support Oppose Neither Sup  At this meeting are you (If you answered "no," of who you represent an  Name, address and tele	STOP; you need not and go on to the next qu	nization or a per complete the re- uestion)	Do Do Asson other than y st of this form. L	f you answered "yes,	⊠No
				□ V	
Are you being paid for	your representation?			∐ Yes	· No
Are you appearing as partial (If you answered "no," question)					No ∑No on to the next
	Public Hearing (Comr Information Hearing Other Items	der regen rentan oben det attida	3 minutes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
	wered "yes" to the question, <b>STOP.</b> 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 I that:	peing 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.
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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 at fifthe City-County Building, Madison, for more information)
Date	Signature
	Print Name

Date: 2/27/07

Registrat	ion Statement -	Common Council
		COMMITTEE
Please Print		
		PLEASE PRINT CLEARLY
		Name Dee Fussell
Agenda No. 8. (	05486	Address I F Newspayer Cin
		Address I E Newhaven Cir.  Madison, WI.
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Please check the appr	opriate boxes:	성도 전환 전환 이 하는 경험 하는 물을 받는 것 같은 하는 것은 모든 모든 것이
Support		and Wish to speak  Do not wish to speak
Oppose Noithon Su	pport Nor Oppos	Available to answer questions
I Neither Su	pport nor Oppos	
At this meeting are yo	ou representing an orga	anization or a person other than yourself: Yes X No
		ot complete the rest of this form. If you answered "yes," provide the name
of who you represent	and go on to the next q	question)
Name, address and te	lephone number of eac	ch person or organization you are representing:
	·	
Are you being paid for	or your representation?	Yes No
		d duties for this person or organization? Yes No
		d duties for this person or organization? Yes No or complete the rest of this form. If you answered "yes," go on to the next
question)		
	Dalla II.	
Speaking Limits:		mmon Council) 5 minutes
		3 minutes

Are you an el other governr	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	red "yes" to the question, <b>STOP.</b> 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:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
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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 at the City-County Building, Madison, for more information)
Date	Signature
	Print Name