Date:  $\frac{5/2z/0}{}$ 

## **CITY OF MADISON**

Registration Statement - Common Council

	C	COMMITTEE			
Please Print	,	DIEAC	E DOINT NAME OF EA	DLV	
			E PRINT NAME CLEA		
Agenda No. 5			Daniel R He		
		Address	2000 Parare S	<del>}</del>	
C	09342		Parare du Sa	C, WX	53578
Please check the app	propriate box:		Please check the	appropria	te box:
Support Oppose Neither Su	pport Nor Oppose	AND	Wish to speal Do not wish to Available to	to speak	tions
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:					
Are you being paid fo	your representation?			Yes	☐ No
	part of your other paid dur " STOP; you need not co		erson or organization? st of this form If you answ	Yes Yes 'yes,''	No go on to the next
Speaking Limits:	Public Hearing (Commo Information Heating Other Items		3 minutes		

#### **REGISTRATION STATEMENT - PAGE 2**

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
(If you answe this form If y	ered "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 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?
Please go t Room 103 of	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	Signature
	Print Name

Date: 128/08	Date:	5/20/08
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## **CITY OF MADISON**

## Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. 5 09342	Name Craig Makelo  Address 319 Highview Land  Columbus wi 53925
Please check the appropriate box:	Please check the appropriate box:
Support Oppose Neither Support Nor C	Wish to speak  Do not wish to speak  Available to answer questions
At this meeting are you representing a (If you answered "no," <b>STOP</b> ; you not of who you represent and go on to the	an organization or a person other than yourself: Yes No leed not complete the rest of this form. If you answered "yes," provide the name to next question)
Name, address and telephone number	of each person or organization you are representing:
5000 N Sheman	Ane
Madson cul 5	-3>04
Are you being paid for your represent	
Are you appearing as part of your oth (If you answered "no," STOP; you need question)	ner paid duties for this person or organization? Yes No need not complete the rest of this form. If you answered "yes," go on to the next
Information H	g (Common Council) 5 minutes  Iearing 3 minutes  3 minutes

### **REGISTRATION STATEMENT - PAGE 2**

	n elected official or employ rnmental body?	vee who is appear	ing solely on behalf of your o	ffice or for you	r municipality or
	wered "yes" to the questic If you answered "no" to th		ed not complete the rest of this to the next question)	s form, except t	hat you must sign
If you are that:	being paid for your repre	sentation, or if yo	our appearance is part of othe	r paid duties, p	please be advised
1.	Before you engage ir with the City Clerk.	lobbying as a lo	bbyist, you or your principal r	nust file an aut	horization
2.	Your principal is not City Clerk.	permitted to auti	horize you to lobby unless yo	u are registered	l with the
3	If your principal sper period (half year), the remainder of the cale	ne principal must	nore than \$1,000 for lobbying t file expense statements with	services in any h the City Cle	reporting rk for the
(Please go Room 103	o to the City Clerk's we of the City-County Buildin	bsite <u>www.cityofi</u> 1g, Madison, for n	nadison.com/clerk/index.html nore information.)	or go to the	Clerk's Office at
Dateろ	120 /d	Signature Print Name	Craia Makala		

Date: 5 20 08

## CITY OF MADISON

# Early Public Comment Registration Statement - Common Council

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Please Print  Agenda No. 5	09342	PLEASE P Name Address	RINT NAME CLEA 2708 Lal	hte Le (and	t Ave
Please check the app	propriate box:		Please check the	appropria	te box:
Support Oppose Neither Su	ipport Nor Oppose	AND	☐ Wish to spead☐ Do not wish to Available to	to speak	tions
(If you answered "no of who you represent	ou representing an organization, "STOP; you need not compand go on to the next question elephone number of each personal.	lete the rest of n.)	this form If you answ		No provide the name
Are you being paid for	or your representation?			Yes	□No
Are you appearing as (If you answered "no question)	s part of your other paid duties o, " <b>STOP;</b> you need not comp	s for this person plete the rest of	n or organization? this form. If you answ	Yes yered "yes,'	UN6 go on to the next
Speaking Limits:	Public Hearing (Common of Information Hearing	3 r			

## **REGISTRATION STATEMENT - PAGE 2**

	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
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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 the City-County Building, Madison, for more information)
DateS	120 68 Signature WM
	Print Name (1) ( an + ( white