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City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print					
		Name	MARCIA	CATON CA	MPBELL
Agenda No	13	Address	7022 HA	HRVEST HIL	LL RD.
			MADISON	, W1 53	717-1031
Please check the ap	propriate boxes:				
	speak wish to speak le to answer questions			o speak t wish to speak ble to answer ques	stions
	you representing an organiza to, "STOP; you need not con				
Name, address and	telephone number of each pe	rson or organiza	ition you are repr	esenting:	
Are you being paid	for your representation?			Yes	□No
	is part of your other paid duti to," STOP; you need not con				□ No 'go on to the next
Speaking Limits:	Public Hearing	5	minutec		
- 1994年 - 1995年 - 1994年 - 1995年 - 199	Information Hearing				

Registration Statement - Page 2

Are you an e governmental	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 bein 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?
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?
	ed "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

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Date: 2/22/05

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print			
Agenda No. / 2		그 가지 그 지원은 그 사람이 되는 사람이 가입되는 것 같아 되었다. 그 가지 않는데	Osenberg era Vista 15f n 53704
Please check the appr	opriate boxes:		
	ish to speak to answer questions	Available	sh to speak to answer questions
		tion or a person other than yourself: nplete the rest of this form. If you ar	
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Madison	Area Commun	ity hand Trust	
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280-01			
Are you being paid fo	r your representation?		'⊠Yes □ No
		es for this person or organization? applete the rest of this form. If you are	
Speaking Limits:	Public Hearing Information Hearing Other Items	5 minutes	

Registration Statement - Page 2

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Date $2/2$	2505 Signature les Mulus Print Name les Bosenberg

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Date:	
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Wish to speak	
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Do not wish to spe	ak
Available to answ	er questions
an yourself: 🛛 🔀	Yes No
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are representing:	

City of Madison

R	egistration Sta	tement -	Common Cour	ncil	
Yo	u must register befo	ore the Cou	ncil considers your i	tem.	
Please Print					
Agenda No. 12		Name Address	JIM GWECK 116 N. FBW	5 1.	
Please check the appropriate b	oxes:				
Support Wish to speak Do not wish to spe Available to answe	ak er questions		Oppose Wish to sp Do not wis Available t		stions
At this meeting are you represe (If you answered "no," STOP, question.)	enting an organization you need not comple	n or a perso ete the rest	n other than yourself: of this form If you an	X Yes swered "yes,	☐ No " go on to the next
Name, address and telephone r	umber of each persor	n or organiz	ation you are represen	iting:	
Are you being paid for your re	oresentation?			Yes	□No
Are you appearing as part of you answered "no," STOP; question.)				Yes swered "yes,"	□ No ' go on to the next
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Registration Statement - Page 2

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(If you answe this form. If y	ared "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)		
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Date 2	-12-05 Signature HGU		
	Print Name JM 6V67K		