Date: 10/02/2007

## **CITY OF MADISON**

| Registration Statement - Common Council   |   |                    |   | <del></del> |      |
|---|---|--------------------|---|-------------|------|
| Please Print  | 07377   | PLEASE             | E PRINT NAME CLE                            | ARLY        |      |
| Agenda No.  | 7   | Name<br>Address    | ANTONIO Est<br>8334 Mansion<br>Madison W1 F | Hill Ave    |      |
| Please check the appropriate box:  Please check the appropriate box:  |   |                    |   | e box:      |      |
| Support Oppose Neither Su   | pport Nor Oppos   | AND                | Wish to spe Do not wish Available to        | to speak    | ions |
| At this meeting are you representing an organization or a person other than yourself: Yes No (If you answered "no," <b>STOP</b> ; 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:   |   |                    |   |             |      |
| La Mestiza Mexican Cuisine Inc  |   |                    |   |             |      |
| 6644 Odana Rd Madison WI 53719  |   |                    |   |             |      |
| (608) 826 0178  |   |                    |   |             |      |
| 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 "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 (Cor<br>Information Hearing<br>Other Items | <b>,</b><br>3 uu e | 3 minutes                                   |             |      |

## **REGISTRATION STATEMENT - PAGE 2**

| .,                  | n elected official or employee who is appearing solely on behalf of your office or for your municipality or municipality or learnmental body?  |
|---------------------|--|
|                     | wered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign lf you answered "no" to the question, go on to the next question)                                       |
| If you are<br>that: | being 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? |
|                     | o to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information)   |
| Date                | Signature  |
|                     | Print Name   |