Date: 1/4/01/

CITY OF MADISON

Registration	on Statement	Common (Council			
		COMMITTEE				
Please Print 이 구	-32.0		PRINT CL			
Agenda No. 12		Name	1/	W. yr	Ferl	
Agenua ivo.		Address	363	<u> </u>	ipine	
Please check the appropriate the propriet in t	oriate boxes:					
Support Oppose Neither Sup	port Nor Oppose		and	Wish to spe Do not wish Available to	ak 1 to speak 3 answer ques	stions
At this meeting are you (If you answered "no," of who you represent a	STOP; you need not	complete the res			DYes wered "yes,"	☐ No provide the name
Name, address and tele	phone number of each	ı person or organ	ization yo	ı are represent	ing:	
Are you being paid for	your representation?				☐ Yes	⊠No
Are you appearing as p (If you answered "no," question)		-	-		☐ Yes wered "yes,"	No go on to the next
	Public Hearing (Com Information Hearing					

Are you an ele other governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
	ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)
If you are beinthat:	ng 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 he City-County Building, Madison, for more information)
Date	Signature
	Print Name

	Date: 6-6-06
	CITY OF MADISON
Registration Statement -	Common Council COMMITTEE
Please Print 02320 Agenda No. 13 Peped 17	PLEASE PRINT CLEARLY Name Marsha Rummel Address 1339 Ruffelge St # 2 Madison
of who you represent and go on to the next q	nization or a person other than yourself: \(\bigcup \text{Yes}\) No to complete the rest of this form. If you answered "yes," provide the name
Are you being paid for your representation? Are you appearing as part of your other paid	☐ Yes ☐ No duties for this person or organization? ☐ Yes ☐ No
	t complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	nmon Council) 5 minutes 3 minutes 3 minutes

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
A	ered "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)
If you are bothat:	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?
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at fithe City-County Building, Madison, for more information)
Date	Signature
	Print Name

Date: 6/6/04

CITY OF MADISON

Registration Statem	ent - Common Council
Please Print 2320	PLEASE PRINT CLEARLY
Agenda No. / Z	Name CARNESTIAN MOSS Address 1729 BROWNing Rd Modison, WI 53704
Please check the appropriate boxes:	
Support Oppose Neither Support Nor 0	and Wish to speak Do not wish to speak Available to answer questions
	an organization or a person other than yourself: \[Yes \] No eed not complete the rest of this form. If you answered "yes," provide the name e next question.)
Name, address and telephone number	of each person or organization you are representing:
	<u> </u>
Are you being paid for your represer	tation? Yes No
	er paid duties for this person or organization? Yes No eed not complete the rest of this form. If you answered "yes," go on to the next
Information 1	g (Common Council) 5 minutes learing 3 minutes

and the second s	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	ered "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)
If you are be that:	sing 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 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: 6/6/06

CITY OF MADISON

Registration	on Statement -	Common Council
		COMMITTEE
Please Print		
2	320	PLEASE PRINT CLEARLY
		Name Maxane Okafo
Agenda No. 13		Address 2/3 Sunny meal 2
		II 7 mails and 1.) 18
		7/3/1/10/00/00/00/3
Please check the appro	priate boxes:	
		. The base of the control of the con
Support		and U Wish to speak 区 Do not wish to speak
Oppose Noither Sur	port Nor Oppo	Available to answer questions
iverther Suf	portator Oppo	2년 기계를 마음을 받는 것을 하는 것이 되었다. 일반의 사용으로 발생하는 것을 보는 것을 받는 것은 사용으로 받을 때 기름을 받는 것을 받는다.
		anization or a person other than yourself: Yes No
(If you answered "no, of who you represent a		ot complete the rest of this form. If you answered "yes," provide the name
oj wno you represent a	mu go on to the next	
Name, address and tele	ephone number of ea	ch person or organization you are representing:
		도 등을 보는 사람들은 경우 경우 사람들은 사람들이 되었다. 그 그리는 그 보는 것은 사람들이 되었다는 것 같은 것이 되었다. 그는 그를 모두 하고 있는 것은 것은 것을 하는 것을 보는 것이 되었다. 그런 것은 것은 것은 것은 것이 되었다. 그런 것은 것은 것은 것은 것이 되었다.
		공발하는 아무현대로 발표를 하는 모든 트립과 원교를 살았다.
Are you being paid for	your representation	?
Are you appearing as r	part of your other pai	d duties for this person or organization? Yes No
(If you answered "no,		ot complete the rest of this form. If you answered "yes," go on to the next
question)		
Speaking Limits:	Public Hearing (Co.	mmon Council) 5 minutes
	Information Hearin	
	Other Items	3 minutes

Are you an el other government	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
(If you answe this form. If y	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 beinthat:	ng 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 to Room 103 of t	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information)
Date	Signature
	Print Name

	eta . The state of the stat
	CITY OF MADISON
Registration Statement -	Common Council
Please Print 2320	PLEASE PRINT CLEARLY
Agenda No. 13, 16	Name Phil Salkin Address 127 M Main Verona, Wi 53593
Please check the appropriate boxes: Support Oppose Neither Support Nor Oppo	se
At this meeting are you representing an orgal (If you answered "no," STOP; you need no f who you represent and go on to the next	ot complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of ea	sch person or organization you are representing:
RASCO	
4801 Fore	t Rus Rd
Madison.	ω . 53 $^{-}$
Are you being paid for your representation	?
Are you appearing as part of your other pair (If you answered "no," STOP; you need n question)	d duties for this person or organization? Yes No ot complete the rest of this form. If you answered "yes," go on to the nex
Information Hearin	mmon Council) 5 minutes g 3 minutes 3 minutes

(SEE BACK)

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
(If you answer this form If yo	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 bei that:	ng 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 to Room 103 of th	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information)
Date <u>6/</u> (**
	Print Name P6, 15, 15, 15