Date:	1//14/06)
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CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print Amendment No	0 7390 5 Suppl	PLEASE PRIN	NT CLEARLY July Spears
Amendment No	- 1 OXI	Address	f/2 JungerSt.
Amendment No	02	396 —	Madison, W1 53703
Amendment No.			
Amendment No			
At this meeting are you (If you answered "no of who you represent	pport Nor Oppose ou representing an organization	plete the rest of the n.)	Do not wish to speak Available to answer questions ther than yourself: Yes No this form If you answered "yes," provide the nat
Are you being paid for	or your representation?		Yes No
	part of your other paid duties," STOP; you need not comp		or organization? Yes No this form. If you answered "yes," go on to the ne
Speaking Limits:	Public Hearing (Common of Information Hearing	3 mir	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body? Yes No		
	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:	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 the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		

Date:	11	(4	106
			,

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print 02391, 02392, 0239	PLEASE PRINT CLEARLY
Amendment No. (Name JUSCHA ROBINSON
Amendment No. 1	Address 2007 JEWIFER ST 53704
Amendment No. 7	
Amendment No.	
Amendment No.	
Please check the appropriate boxes:	
Support	and Wish to speak
Oppose	Do not wish to speakAvailable to answer questions
Neither Support Nor Oppose	
At this meeting are you representing an organizati (If you answered "no," STOP ; you need not comp of who you represent and go on to the next question	plete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each pers	son or organization you are representing:
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid duties (If you answered "no," STOP; you need not comparestion)	es for this person or organization? Yes No plete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Common Information Hearing Other Items	3 minutes

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body? Yes No		
	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:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised		
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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.)		
Date	Signature		
	Print Name		

Date: 14/06

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print 02388 02396	PLEASE PRINT CLEARLY
Amendment No	Name SATYA RHONES CONWAY Address 2642 HOARO ST
Oppose Neither Support Nor Oppose At this meeting are you representing an organization (If you answered "no," STOP; you need not complete of who you represent and go on to the next question. Name, address and telephone number of each personal control of the next question.	ete 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 duties (If you answered "no," STOP; you need not compl question.) Speaking Limits: Public Hearing (Common Conformation Hearing Other Items	ouncil)5 minutes 3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
	vered "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 t 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
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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 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date:] l	14	06
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CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print	PLEASE PRINT CLEARLY	A
Amendment No. 12 Amendment No. 13 Amendment No. 13 Amendment No. 13 Amendment No. 13 Please check the appropriate boxes:	PLEASE PRINT CLEARLY Name Address Made	tel Terminast on WI 63714
Support Oppose Neither Support Nor Oppose At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of Name, address and telephone number of each	Available anization or a person other than yourselest complete the rest of this form. If you a question.)	vish to speak le to answer questions f: Yes No answered "yes," provide the name
Are you being paid for your representation? Are you appearing as part of your other paid (If you answered "no," STOP; you need no question)	d duties for this person or organization? of complete the rest of this form. If you d	
Information Hearing	mmon 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? Yes No		
	vered "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 b that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised		
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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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)			
Date	Signature		
	Print Name		