Complete this form if you wish to speak before the Board. If you wish to submit written comments and have them entered into the minutes record, please complete and give to the Secretary.

CITY OF MADISON	
Registration Statement	BOARD OF PUBLIC WORKS
Name Rélabie Welaber Address 26/3 stevens St	DATE 3-22-2017
Address 26/3 Stevens St.	ITEM NO. 16 ON AGENDA
¥∬ Support [] Oppose	[∕] Wish to Speak
[] See Written comments for the record	[] Do Not Wish to Speak
	[] Available to Answer
Questions	
At this meeting are you representing an organization or a person other than yo	ourself: [] Yes [] No
If you answered No – you need not complete the remainder of this form.	
If you answered Yes to above question please complete:	
Name, Address and phone number of each person or organization you are pre-	senting today:
Are you being Paid for your representation?	Flace Flat
	[] yes [] No
Are you appearing as part of your other paid duties for this person or o	9
If you answered YES – continue – on other side please	[] Yes [] No
PLEASE SEE OTHER S	IDE
Complete this form if you wish to speak before the Board. If you wish to sinto the minutes record, please complete and give to the Secretary. CITY OF MADISON Registration Statement	BOARD OF PUBLIC WORKS
	_
Name Skall + 53127	DATE 3-22-2017
Address 59 50 + VCUO	ITEM NO. / (p ON AGENDA
[] Support [] Oppose	∏∬ Wis h to Speak
[] See Written comments for the record	[] Do Not Wish to Speak
Questions	[] Available to Answer
At this meeting are you representing an organization or a person other than yo	ourself: [] Yes [No
If you answered No – you need not complete the remainder of this form.	1
<u>If you answered</u> <u>Yes</u> to above question please complete:	
Name, Address and phone number of each person or organization you are pre	senting today:
Are you being Paid for your representation?	[] yes [] No
Are you appearing as part of your other paid duties for this person or	[1 Yes [1 No
If you answered YES – continue – on other side please	

PLEASE SEE OTHER SIDE

Complete this form if you wish to speak before the Board. If you wish to submit written comments and have them entered into the minutes record, please complete and give to the Secretary.

CITY OF MADISON

BOARD OF BURLIC WORKS

Registration Statement / //	BOARD OF PUBLIC WORKS
Name Michael Kewen Address 352 Camauce Dan	DATE 3 /21/17 ITEM NOON AGENDA
Support [] Oppose	Wish to Speak
See Written comments for the record	[] Do Not Wish to Speak
Questions	[] Available to Answe
At this meeting are you representing an organization or a person other than yourself:	Yes [] No
If you answered No – you need not complete the remainder of this form.	\
If you answered Yes to above question please complete:	
Name, Address and phone number of each person or organization you are presenting	today: And Bils Mich UPh
Are you being Paid for your representation?	[] yes [XNo
Are you appearing as part of your other paid duties for this person or organiz	
If you answered YES – continue – on other side please	[]Yes [/]No
DI EASE SEE OTHER SIDE	