Date: <u>06-07-08</u>

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print			PRINT NAME CLEARLY
		Name	SUCHINDER P. SINGIH
Agenda No. 3			4501 VERONA AD
			MADISON W1. 53711
Please check the a	ppropriate boxes:		
			 ☐ Oppose ☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
(If you answered "question.) Name, address and	telephone number of each po	mplete the res	t of this form. If you answered "yes," go on to the next
Sindo	ed Singh		
Are you being paid for your representation?			☐ Yes 🖰 Ńo
	as part of your other paid dut no," STOP; you need not coi		son or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing Information Hearing Other Items		

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Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?				
(If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)				
If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:				
	ore you engage in lobbying as a lobbyist, you or your principal must file an authorization in the City Clerk?			
	r principal is not permitted to authorize you to lobby unless the principal is registered the City Clerk? Yes No			
регі	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?			
(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)				
Date	Signature			
	Print Name			