	9-19-2006	
Date:	1 19-2006	:

CITY OF MADISON

Registration State	ment - Common Council COMMITTEE
Please Print 04414	PLEASE PRINT CLEARLY
Agenda No.	Name Helen Dietzler Address 1010 Western Avenue
Please check the appropriate boxes	s:
Support Oppose Neither Support Noi	and Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing (If you answered "no," STOP; yo of who you represent and go on to	ng an organization or a person other than yourself: Yes No u need not complete the rest of this form If you answered "yes," provide the name the next question)
Name, address and telephone num	ber of each person or organization you are representing:
Are you being paid for your repres	sentation?
	other paid duties for this person or organization? Yes No need not complete the rest of this form. If you answered "yes," go on to the next
Information	ring (Common Council) 5 minutes n Hearing 3 minutes

	Print Nama
Date	Signature
Room 103 oj	the City-County Building, Madison, for more information)
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at
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?
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
If you are bothat:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
	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)
	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?

				ate:	
		CITY OF MADI	SON		
Registrat	tion Statement -	Common Co	uncil		
		COMMITTEE			
Please Print	1414		INT CLEARLY		
		Name (OSEMARY LE	と	
Agenda No		Address _	MEDISON S	1408	
		4	NADISON S	3702	
Please check the app	ropriate boxes:				
Support		an			
Oppose			Do not wish to		tions
Neither Si	upport Nor Oppos	(e . 1)			
If you answered "no	ou representing an orga o," STOP; you need no t and go on to the next o	t complete the rest of		☐ Yes ered "yes,"	☐ No provide the name
Name, address and te	elephone number of eac	ch person or organiza	tion you are representir	ıg:	
Are you being paid fo	or your representation?			Yes	□No
	s part of your other paid o, " STOP; you need no			Yes vered "yes,"	☐ No go on to the next
peaking Limits:	Public Hearing (Con Information Hearing Other Items	3 r	ninutes ninutes ninutes		

Are you an eleother 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 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
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Date	Signature
	Print Name

Date: 919/06

CITY OF MADISON

Registration Stateme	nt - Common Council
Please Print	
04414	PLEASE PRINT CLEARLY
	Name Vana L- Hoursey
Agenda No.	- Address 326 J Humming Mal
	MADIÚN WI US3711
Please check the appropriate boxes:	
Support	and Wish to speak Do not wish to speak
Oppose Neither Support Nor O	Available to engrees questions
Neither Support Nor O	
	n organization or a person other than yourself: Yes No
of who you represent and go on to the	ed not complete the rest of this form. If you answered "yes," provide the name next question.)
ivame, address and telephone number	of each person or organization you are representing:
	가 있는 것이 있는 것이 하는 것이 하는 것이 되었다. 그는 것이 하는 것이 되었다. 그는 것이 되었다. 그는 것이 되었다. 그는 것이 되었다. 그런 것이 되었다. 한 사람들은 사용을 하면 하는 것이 되었다. 사용을 하는 것이 되었다면 하는 것이 되었다. 그는 것이 되었다. 그는 것이 하는 것이 되었다. 그런 것이 되었다.
Are you being paid for your representa	ition?
	r paid duties for this person or organization?
(If you answered "no," STOP ; you ne question)	ed not complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing	(Common Council)5 minutes
Information He	earing 3 minutes

Are you an elected other governmental	official or employee who is appearing solely on behalf of your office or for your municipality or body?
	es" to the question, STOP. You need not complete the rest of this form, except that you must sign wered "no" to the question, go on to the next question.)
If you are being pa that:	id for your representation, or if your appearance is part of other paid duties, please be advised
	ore you engage in lobbying as a lobbyist, you or your principal must file an authorization the City Clerk
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peri	our principal spends or will owe more than \$1,000 for lobbying services in any reporting od (half year), the principal must file expense statements with the City Clerk for the hinder of the calendar year?
	City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at y-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date:	9-1	19-0) (_e ,	

CITY OF MADISON

Registration Statement -	Common Council COMMITTEE
Please Print 04414	PLEASE PRINT CLEARLY
	Name Mariheth Witzel-Behl Address 520Ce Esker Drive
Agenda No.	Address 5206 Esker Drive
	Madison W 1 53704
Please check the appropriate boxes:	
X Support	and Wish to speak
Oppose	☐ Do not wish to speak ☐ Available to answer questions
Neither Support Nor Oppo	
At this meeting are you representing an org	ganization or a person other than yourself: Yes No ot complete the rest of this form If you answered "yes," provide the name
of who you represent and go on to the next	
Name, address and telephone number of ea	sch person or organization you are representing:
Are you being paid for your representation	? □ Yes □ No
Are you appearing as part of your other pai (If you answered "no," STOP; you need nature question)	id duties for this person or organization? Yes No not complete the rest of this form. If you answered "yes," go on to the next
	mmon Council) 5 minutes g 3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental 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)
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Date	Signature
	Print Name