

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Bonnie Lincoln  
Address 1505 Lake View Ave  
Madison, WI 53704

Date 11-18-10  
Item \_\_\_\_\_

**Support**  
 **Oppose**  
 **Neither** *Support or Oppose*

**Wish to Speak**  
 **Do Not Wish to Speak**  
 **Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Name, address and telephone number of each person or organization you are representing:

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Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
*(If you answered "no" to both these questions, STOP. You need not complete the rest of this form. If you answered "yes," turn over to the next question.)*

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(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 questions.)*

If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Yes  No
2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
3. 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?  Yes  No

*(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 11-18-10

Signature Bonnie Luccum

Print Name Bonnie Luccum

CITY OF MADISON  
Registration Statement for  
Common Council Organizational Committee

Name JAY YOUNG  
Address \_\_\_\_\_  
\_\_\_\_\_

Date 11/18/10  
Item OVERTURE

Support  
 Oppose  
 Neither Support or Oppose

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
  
3. 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?  Yes  No

*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Anne Connor  
Address 214 State St.

Date 11-18-10  
Item \_\_\_\_\_

- Support**
- Oppose**
- Neither Support or Oppose**

- Wish to Speak**
- Do Not Wish to Speak**
- Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

Driftless Studio / 214 State Street / Madison  
WI 53703

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  
(If you answered "no" to both these questions, **STOP**. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)  Yes  No

Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

(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 questions.)

If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

- 1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Yes  No
- 2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
- 3. 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?  Yes  No

(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 11/18/10

Signature *Anne Connor*

Print Name Anne Connor

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name ROSEMARY LEE  
Address 111 W WILSON  
53703

Date 11-18-70  
Item 3

Support  
 Oppose  
 Neither Support or Oppose

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

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Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(If you answered "yes" to the question, STOP. You need not complete the rest of this form except that you must sign this form.  
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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
  
3. 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?  Yes  No

*(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 \_\_\_\_\_



**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Tom Carro  
Address 16 Cornucopia Ct.

Date 11/18/10  
Item \_\_\_\_\_

- Support**
- Oppose**
- Neither Support or Oppose**

- Wish to Speak**
- Do Not Wish to Speak**
- Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Name, address and telephone number of each person or organization you are representing:  
Overrule Center

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
*(If you answered "no" to both these questions, STOP. You need not complete the rest of this form. If you answered "yes," turn over to the next question.)*

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(If you answered "yes" to the question, STOP. You need not complete the rest of this form except that you must sign this form.  
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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
3. 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?  Yes  No

*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name John Neis  
Address \_\_\_\_\_  
\_\_\_\_\_

Date 11/18  
Item 3 Alt

- Support  
 **Oppose**  
 Neither Support or Oppose

- Wish to Speak**  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Name, address and telephone number of each person or organization you are representing:  
Local Co  
\_\_\_\_\_  
\_\_\_\_\_

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
*(If you answered "no" to both these questions, STOP. You need not complete the rest of this form. If you answered "yes," turn over to the next question.)*

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
3. 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?  Yes  No

*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name STAN WOODARD  
Address 55 S GAMMON RD  
MADISON, WI

Date 11-18-10  
Item \_\_\_\_\_

- Support**  
 **Oppose**  
 **Neither Support or Oppose**

- Wish to Speak**  
 **Do Not Wish to Speak**  
 **Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

Luisier Community Education Center  
55 S. GAMMON RD, MADISON WI

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)

Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

(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 questions.)

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1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Yes  No

2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No

3. 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?  Yes  No

(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 11-18-10

Signature 

Print Name STAN WOODARD

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Amanda Larson  
Address 4619 Fenwick Rd  
Fitchburg, WI 53711

Date 11-18-10  
Item \_\_\_\_\_

- Support
- Oppose
- Neither *Support or Oppose*

- Wish to Speak
- Do Not Wish to Speak
- Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Name, address and telephone number of each person or organization you are representing:  
The Boys & Girls Club of Dane County

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  
*(If you answered "no" to both these questions, STOP. You need not complete the rest of this form. If you answered "yes," turn over to the next question.)*  Yes  No

Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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- 2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
- 3. 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?  Yes  No

(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 11-18-10

Signature Amanda Larson

Print Name Amanda Larson



**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Roger Buffett  
Address 18626 Wood Violet Way  
53717

Date 1-18-10  
Item Overture Center

- Support**  
 **Oppose**  
 **Neither** *Support or Oppose*

- Wish to Speak**  
 **Do Not Wish to Speak**  
 **Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Name, address and telephone number of each person or organization you are representing:

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Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
*(If you answered "no" to both these questions, STOP. You need not complete the rest of this form. If you answered "yes," turn over to the next question.)*

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
  
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*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Susan Crofton  
Address \_\_\_\_\_  
\_\_\_\_\_

Date 11/18/10  
Item Overture

- Support**  
 **Oppose**  
 **Neither Support or Oppose**

- Wish to Speak**  
 **Do Not Wish to Speak**  
 **Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Name, address and telephone number of each person or organization you are representing:

Overture Center Staff  
\_\_\_\_\_  
\_\_\_\_\_

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
*(If you answered "no" to both these questions, STOP. You need not complete the rest of this form. If you answered "yes," turn over to the next question.)*

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name LORI KIEF  
Address 4413 Doe Crossing  
Madison 53704

Date 11-18-10  
Item # 3 - Alternate

- Support  
 **Oppose**  
 ~~Neither Support or Oppose~~

- Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing: Local 60  
\_\_\_\_\_  
\_\_\_\_\_

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(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 questions.)*

If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
3. 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?  Yes  No

*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name JOE SENSENBRENER  
Address 818 PROSPECT PLACE  
MADISON

Date 11/18/10  
Item 3

- Support**  
 **Oppose**  
 **Neither Support or Oppose**

- Wish to Speak**  
 **Do Not Wish to Speak**  
 **Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

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Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
(If you answered "no" to both these questions, **STOP**. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(If you answered "yes" to the question, STOP. You need not complete the rest of this form except that you must sign this form.  
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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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3. 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?  Yes  No

*(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 11/18/10

Signature

Print Name

JOE SENSENBRENER



CITY OF MADISON  
Registration Statement for  
Common Council Organizational Committee

Name DAUL SOCIETY  
Address 121 SHANDISH CT  
MADISON, WI 53705

Date 10/18/10  
Item \_\_\_\_\_

Support  
 Oppose  
 Neither Support or Oppose

W/ AMEND MEAS

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)  Yes  No

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name DEIRDRE GALTON  
Address 350 S. HAMILTON ST. #306

Date 11/18/10  
Item # 3

- Support**  
 **Oppose**  
 **Neither Support or Oppose**

- Wish to Speak**  
 **Do Not Wish to Speak**  
 **Available to Answer Questions**

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

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Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
(If you answered "no" to both these questions, **STOP**. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

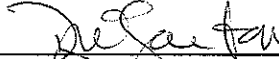
*(If you answered "yes" to the question, STOP. You need not complete the rest of this form except that you must sign this form.  
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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Yes  No
2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
3. 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?  Yes  No

*(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 11/18/10

Signature 

Print Name DEIRDRE GARTON

CITY OF MADISON  
Registration Statement for  
Common Council Organizational Committee

Name Tom Campbell  
Address 4607 Esch Ln.  
MADISON, WI 53704

Date 11-18-10  
Item 3 - alternate

Support  
 **Oppose**  
 ~~Neither support or Oppose~~

*Oppose privatization*

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:  
Local 60

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)  Yes  No

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(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 questions.)*

If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Yes  No
  
2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
  
3. 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?  Yes  No

*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name JEFF PORTER  
Address 638 W. LAKEVIEW ST.  
MADISON, WI 53715

Date 11/18/10  
Item ALTERNATE #3

- Support  
 Oppose  
 Neither Support or Oppose

- Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

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Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  
If you answered "yes," turn over to the next question.)

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
3. 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?  Yes  No

*(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 \_\_\_\_\_



**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Kathleen Ridout  
Address 1425 N Baldwin  
Madison

Date 11/18/10  
Item alternate #3

Support  
 Oppose  
 Neither Support or Oppose

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Name, address and telephone number of each person or organization you are representing:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  
*(If you answered "no" to both these questions, STOP. You need not complete the rest of this form. If you answered "yes," turn over to the next question.)*  Yes  No

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(If you answered "yes" to the question, STOP. You need not complete the rest of this form except that you must sign this form.  
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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
  
3. 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?  Yes  No

*(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 \_\_\_\_\_

**CITY OF MADISON**  
**Registration Statement for**  
**Common Council Organizational Committee**

Name Sheila Sims  
Address 6021 Roseberg Rd  
Madison WI 53719

Date 11/18/10  
Item 20248 - #3

Support  
 Oppose  
 Neither Support or Oppose

Wish to Speak  
 Do Not Wish to Speak  
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Left on  
registration  
table

Are you being paid for your representation?

Yes  No

Are you appearing as part of your other paid duties for this pers?  
(If you answered "no" to both these questions, STOP. You need not complete  
If you answered "yes," turn over to the next question.)

Yes  No

## Registration Statement - Page 2

Are you a public official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(If you answered "yes" to the question, STOP. You need not complete the rest of this form except that you must sign this form.*

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If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

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3. 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?  Yes  No

*(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

Sheila Sims