

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14
Item: ~~eg~~ e-cigarettes in public spaces

Name: Sara Sahli
Address: 2318 Teal Drive, MADISON

Support I wish to speak
 Oppose Available for information only
 Neither support nor oppose

Comments:

On this occasion, are you officially representing an organization or person other than you? _____
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? Yes
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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

Name, address, and telephone number of each person you are representing:
American Cancer Society Cancer Action Network
8317 Elderberry Road
Madison, WI 53717

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? Yes
(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.)

Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: Sara Sahli

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-14
Item: #9 (36141)

Name: Shaw Vedvik
Address: 508 W Wisconsin St Portage WI

Support
Oppose
Neither support nor oppose
I wish to speak
Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? Yes
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? No
Are you appearing as part of your other paid duties for this person or organization? No
(If you answered "no" to both these questions, STOP, you need not complete the rest of this form. If you answered "yes" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

[Blank lines for name, address, and telephone number]

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

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Are you registered as a lobbyist with (check any that applies):

City of Madison,
Dane County
Other

Signature:

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-14

Item: # 9

Name: Jean Mac Gubbin
Address: 3530 Heather Crest Madison

- X Support
Oppose
Neither support nor oppose
X I wish to speak
Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? 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.)

Are you being paid for your representation?
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" to either, go on to the next question, on reverse.)

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

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Are you registered as a lobbyist with (check any that applies):
City of Madison,
Dane County
Other

Signature:

Board of Health for Madison and Dane County

Registration to Appear

Date: 11 Dec 14

Item: # 9

Name: Tyler Newman
Address: 6621 Berkshire rd Madison WI 53711

Support
X Oppose
Neither support nor oppose
X I wish to speak
Available for information only

Comments: strongly oppose E-cig ban

On this occasion, are you officially representing an organization or person other than you? 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.)

Are you being paid for your representation?
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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? NO
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?
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Are you registered as a lobbyist with (check any that applies):
City of Madison,
Dane County
Other

Signature: [Handwritten Signature]

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-14

Item: F615 Ban. Item 9.

Name: William Boldenow

Address: 2701 University Ave Madison WI 53705

Support

Oppose

Neither support nor oppose

I wish to speak

Available for information only

Comments: A Ban Like this could impact lives lost by people who need and are trying to quit smoking.

On this occasion, are you officially representing an organization or person other than you? yes infinite
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? no

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

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? no

(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

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Are you registered as a lobbyist with (check any that applies):

- City of Madison,
- Dane County
- Other _____

Signature: _____

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-17

Item: 9

Name: EMILY WHITE
Address: 2917 Barlow St Madison, WI 53703

X Support I wish to speak
Oppose Available for information only
Neither support nor oppose

Comments: Please protect Madison's smoke-free air and prohibit the use of e-cigs in public indoor spaces.

On this occasion, are you officially representing an organization or person other than you? (If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? Yes
Are you appearing as part of your other paid duties for this person or organization? Y
(If you answered "no" to both these questions, STOP, you need not complete the rest of this form. If you answered "yes" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

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Are you registered as a lobbyist with (check any that applies):
X City of Madison,
Dane County
Other

Signature: Emily White

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14

Item: 9

Name: Kelly Mack

Address: 4001 Burns Ave Madison WI

Support

Oppose

Neither support nor oppose

I wish to speak

Available for information only

Comments: I am speaking on behalf of Madison Area Vapors.

On this occasion, are you officially representing an organization or person other than you? Yes

Are you being paid for your representation? 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" to either, go on to the next question, on reverse.)

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

(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

Madison Area Vapors - Social Media Group found on Facebook

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? No

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Are you registered as a lobbyist with (check any that applies):

City of Madison,

Dane County

Other

Signature: Kelly Mack

Board of Health for Madison and Dane County

Registration to Appear

Date: 7/11/14

Item: 9

Name: Jeremy Peterson
Address: 4001 Bruns Ave Madison, WI 53714

Support
[X] Oppose
Neither support nor oppose
[X] I wish to speak
Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? Yes
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? No
Are you appearing as part of your other paid duties for this person or organization?
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Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? NO
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

Name, address, and telephone number of each person you are representing:
Madison Area Vapers - Social Media Group

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? NO
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Are you registered as a lobbyist with (check any that applies):
City of Madison,
Dane County
Other

Signature: [Handwritten Signature]

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14

Item: 36741

Name: Dino Spinelli
Address: W4237 Alpine Village Ln, Cambridge

Support
Oppose
Neither support nor oppose
I wish to speak
Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? No
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Are you being paid for your representation?
Are you appearing as part of your other paid duties for this person or organization?
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Are you registered as a lobbyist with (check any that applies):
City of Madison,
Dane County
Other

Signature: [Handwritten Signature]

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14

Item: 36141

Name: Ronald Helferman - Browns

Address: 4548 Stein Ave Madison WI 53714

Support
X Oppose
Neither support nor oppose

I wish to speak
X Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? no
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Are you being paid for your representation?
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Are you registered as a lobbyist with (check any that applies):
City of Madison,
Dane County
Other

Signature:

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-14
Item: 9 - 38141

Name: Rick Gundermann
Address: 726 Cabot Lane, Madison

Support I wish to speak
Oppose Available for information only
Neither support nor oppose

Comments:

On this occasion, are you officially representing an organization or person other than you? 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.)

Are you being paid for your representation? _____
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Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
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Name, address, and telephone number of each person you are representing:

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Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: _____

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-14

Item: Agenda #9

Name: Beth Kempen

Address: 404 Park St Combined locks WI

Support

I wish to speak

Oppose

Available for information only

Neither support nor oppose

Comments:

On this occasion, are you officially representing an organization or person other than you?

(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation?

Are you appearing as part of your other paid duties for this person or organization?

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Are you registered as a lobbyist with (check any that applies):

City of Madison,

Dane County

Other

Signature: [Handwritten Signature]

Board of Health for Madison and Dane County
Registration to Appear

Date: 12-11-14

Item: Agenda # 9

Name: Ken Kerber

Address: 404 Park St Combined Locks WI 54113

Support
 Oppose
 Neither support nor oppose

I wish to speak
 Available for information only

Comments: _____

On this occasion, are you officially representing an organization or person other than you? _____
(If you answered "no," **STOP**, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

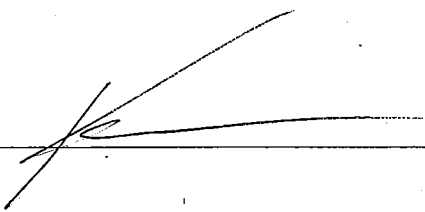
Are you being paid for your representation? NO
Are you appearing as part of your other paid duties for this person or organization? _____
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Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: 

**Board of Health for Madison and Dane County
Registration to Appear**

Date: 12-11-14

Item: Ecig Ban

Name: Jason Clark

Address: 1106 WEST ST WISCONSIN, WI 53646

- Support I wish to speak
 Oppose Available for information only
 Neither support nor oppose

Comments: _____

On this occasion, are you officially representing an organization or person other than you? 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.)

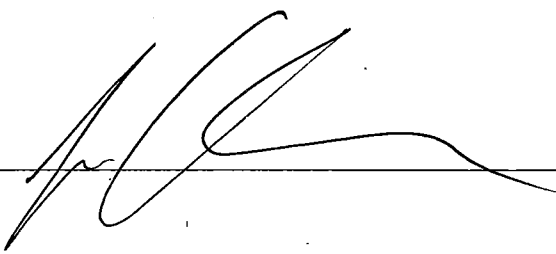
Are you being paid for your representation? _____
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- Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: 

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/2014

Item: 36141 / A6ENOA #9

Name: Matthew Packard

Address: P.O. Box 294, MAZON

- Support
I wish to speak
X Oppose
Available for information only
Neither support nor oppose

Comments:

On this occasion, are you officially representing an organization or person other than you? NO

Are you being paid for your representation?
Are you appearing as part of your other paid duties for this person or organization?

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? NO

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

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- Are you registered as a lobbyist with (check any that applies):
City of Madison
Dane County
Other

Signature: [Handwritten Signature]

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14

Item: #9

Name: Kayla Fannan
Address: 2049 Baird St. Madison WI 53714

- Support
Oppose
Neither support nor oppose
I wish to speak
Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? NO

Are you being paid for your representation? NO
Are you appearing as part of your other paid duties for this person or organization? NO

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

- Are you registered as a lobbyist with (check any that applies):
City of Madison
Dane County
Other

Signature:

**Board of Health for Madison and Dane County
Registration to Appear**

Date: 11 December 2014

Item: 9

Name: McKenzie Lund

Address: 8 N. Bassett St. Madison, WI 53703

Support

Oppose

Neither support nor oppose

I wish to speak

Available for information only

Comments: _____

On this occasion, are you officially representing an organization or person other than you? NO
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Are you being paid for your representation? _____

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

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Are you registered as a lobbyist with (check any that applies):

City of Madison,

Dane County

Other _____

Signature: _____

**Board of Health for Madison and Dane County
Registration to Appear**

Date: 12/11/14
Item: #9

Name: Jacqueline Ford
Address: 4562 Bonnie ave. Madison Wi 53718

Support I wish to speak
 Oppose Available for information only
 Neither support nor oppose

Comments: _____

On this occasion, are you officially representing an organization or person other than you? NO
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Are you being paid for your representation? _____
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(If you answered "no" to both these questions, STOP, you need not complete the rest of this form. If you answered "yes" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? _____
(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: Jacqueline Ford

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14

Item: 9

Name: Shawn Bachmann

Address: 4562 Pennell Ave Madison

Support

Oppose

Neither support nor oppose

I wish to speak

Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? 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.)

Are you being paid for your representation?

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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?

(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):

- City of Madison,
Dane County
Other

Signature: Shawn Bachmann

**Board of Health for Madison and Dane County
Registration to Appear**

Date: 12-11-14
Item: _____

Name: Jennifer Smith
Address: W 5284 County Road B

Support I wish to speak
 Oppose Available for information only
 Neither support nor oppose

Comments: _____

On this occasion, are you officially representing an organization or person other than you? 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.)

Are you being paid for your representation? no
Are you appearing as part of your other paid duties for this person or organization? no
(If you answered "no" to both these questions, STOP, you need not complete the rest of this form. If you answered "yes" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? _____
(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: _____

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/2014

Item: 9

Name: ADAM SCHULTZ

Address: 1217 SAINT ALBERT DR SUN PRAIRIE

Support

X Oppose

Neither support nor oppose

I wish to speak

K Available for information only

Comments: BANNING E-CIGARETTES FROM PUBLIC PLACES IS A BAD IDEA. THERE IS ZERO EVIDENCE SHOWING VAPING IS HARMFUL TO THE USER OR BYSTANDERS. LEGISLATING A BAN BASED ON THE WAY SOMETHING LOOKS IS OPENING A DOOR TO A LOT OF POSSIBILITIES IN THE GOVERNMENT SEVERELY ABUSING ITS LAWMAKING DUTIES

On this occasion, are you officially representing an organization or person other than you? 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.)

Are you being paid for your representation?

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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?

(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

(Blank lines for name, address, and telephone number)

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):

- City of Madison,
Dane County
Other

Signature:

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-2014

Item:

Name: TIMOTHY L. CATHERS

Address: W5284 CNTY HWY B R6 WI

- Support
Oppose
Neither support nor oppose
I wish to speak
Available for information only

Comments: HAVE BEEN SMOKE FREE FOR NEARLY 2 YRS THANKS TO VAPING. ALMOST DOWN TO ZERO NICOTINE. ESTABLISHMENTS THAT WISH TO NOT ALLOW VAPING CAN BUY A SIGN. GET REAL PLEASE - VAPING SAVES LIVES

On this occasion, are you officially representing an organization or person other than you? NO

Are you being paid for your representation? NO
Are you appearing as part of your other paid duties for this person or organization? NO

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?

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

Blank lines for name, address, and telephone number of each person represented.

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):

- City of Madison,
Dane County
Other

Signature:

Board of Health for Madison and Dane County
Registration to Appear

Date: 12/11/2014
Item: 9

Name: Kristina Meyers
Address: 1217 St Albert Dr. Sun Prairie WI

Support I wish to speak
 Oppose Available for information only
 Neither support nor oppose

Comments: This is my tool to quit smoking. And it has worked. I do not wish to be put out with smokers. & My doctor is thrilled with this as way to quit.

On this occasion, are you officially representing an organization or person other than you? _____
(If you answered "no," **STOP**, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? _____
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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
(If you answered "yes," **STOP**, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? _____
(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.)

Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: Kristina Meyers

Board of Health for Madison and Dane County

Registration to Appear

Date: 12-11-12

Item: 9

Name: David Ahrens

Address: 4014 Major Ave.

Support

Oppose

Neither support nor oppose

I wish to speak

Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? (If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? 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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? (If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

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Are you registered as a lobbyist with (check any that applies):

- City of Madison,
Dane County
Other

Signature:

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14
Item:

Name: Dona Wine USA
Address: 13100 W. ... US Hwy Rd Brookfield WI 53005

Support, Oppose, Neither support nor oppose
I wish to speak, Available for information only

Comments: American Lung Assn. in WI

On this occasion, are you officially representing an organization or person other than you?
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? YES
Are you appearing as part of your other paid duties for this person or organization? YES
(If you answered "no" to both these questions, STOP, you need not complete the rest of this form. If you answered "yes" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

[Blank lines for representing person information]

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? YES
(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):

City of Madison,
Dane County
Other WI

Signature: Dona Wine USA

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14

Item:

Name: Colton Rudy
Address: 9008 Carol Ann Dr Sturtevant WI 53177

- Support
Oppose
Neither support nor oppose
I wish to speak
Available for information only

Comments:

On this occasion, are you officially representing an organization or person other than you? 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.)

Are you being paid for your representation?
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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body?
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?
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- Are you registered as a lobbyist with (check any that applies):
City of Madison,
Dane County
Other

Signature:

**Board of Health for Madison and Dane County
Registration to Appear**

Date: 12/11/14
Item: _____

Name: Julian Hager
Address: 4225 108th St Fordsville WI 53126

Support I wish to speak
 Oppose Available for information only
 Neither support nor oppose

Comments: I am here to support the continuation of electronic
cigarettes. they have saved my life completely

On this occasion, are you officially representing an organization or person other than you? yes
(If you answered "no," **STOP**, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? no
Are you appearing as part of your other paid duties for this person or organization? no
(If you answered "no" to both these questions, **STOP**, you need not complete the rest of this form. If you answered "yes" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
(If you answered "yes," **STOP**, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

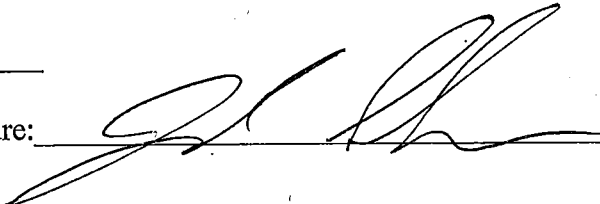
Name, address, and telephone number of each person you are representing:

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? _____

(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):

City of Madison,
 Dane County
 Other _____

Signature: 

**Board of Health for Madison and Dane County
Registration to Appear**

Date: 12/10/14

Item: _____

Name: Chelsea Mayton

Address: 1000 S Hancock St #110, Madison

- Support I wish to speak
 Oppose Available for information only
 Neither support nor oppose

Comments: This is in NO way comparable to smoking.

On this occasion, are you officially representing an organization or person other than you? _____
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? _____
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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? _____
(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):
 City of Madison,
 Dane County
 Other _____

Signature: _____

Board of Health for Madison and Dane County

Registration to Appear

Date: 12/11/14

Item: _____

Name: THERIN ERDAHL

Address: 1235 #308 ~~STON~~ 1233 JACKSON #308, STOUGHTON

- Support
- Oppose
- Neither support nor oppose
- I wish to speak
- Available for information only

Comments: ~~THIS IS A DECISION MADE~~

On this occasion, are you officially representing an organization or person other than you? _____
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? _____
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" to either, go on to the next question, on reverse.)

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? _____
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

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

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists? _____
(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

- Are you registered as a lobbyist with (check any that applies):
- City of Madison,
 - Dane County
 - Other _____

Signature: _____

Board of Health for Madison and Dane County

Registration to Appear

Date: 12.11.14

Item: _____

Name: Lauren Chare

Address: 5218 Keyans Way Madison

Support

Oppose

Neither support nor oppose

I wish to speak

Available for information only

Comments: _____

On this occasion, are you officially representing an organization or person other than you? _____
(If you answered "no," STOP, you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Are you being paid for your representation? yes

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

Are you a public official or employee who is appearing solely on behalf of your office or for your governmental body? yes
(If you answered "yes," STOP, you need not complete the rest of this form, except you must sign this form. If you answered "no," go on to the next question.)

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

District 3

If you are being paid for your representation, or if your appearance is part of your other paid duties, do you understand that the City of Madison and Dane County require registration of paid lobbyists?

(Requirements for registration as a lobbyist are slightly different between Madison and Dane County. Registration with either jurisdiction is sufficient for appearing before the Board of Health for Madison and Dane County. For information about registering as a lobbyist, contact the Madison City Clerk, 266-4601 AND the Dane County Clerk, 266-4121 or visit the office of each clerk in the City-County Building, 121 Martin Luther King, Jr. Blvd, Madison.

Are you registered as a lobbyist with (check any that applies):

- City of Madison,
- Dane County
- Other _____

Signature: Lauren Chare