Date:	1	118/	७१	
Date.		<u> </u>	· ·	<del></del> .

## **CITY OF MADISON**

Registration Statement	- Common Co	uncil
Please Print	DIEASEI	PRINT NAME CLEARLY
	TLEASE I	
	Name	DEFF (THE LOBBYST) KOSENS
Agenda No.	Address	6801 SOUTH TOWNE DR.
11309		MADISON, WISC 53713
Please check the appropriate box:		Please check the appropriate box:
Support Oppose	AND	☐ Wish to speak ☐ Do not wish to speak
Neither Support Nor Oppo	ose	Available to answer questions
of who you represent and go on to the nex.  Name, address and telephone number of e	t question)	f this form. If you answered "yes," provide the name tion you are representing:
Are you being paid for your representation	n?	☐ Yes ☐No
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question)		n or organization?
Information Hearin	ommon Council) 5 1 ng 3 1	minutes

### REGISTRATION STATEMENT - PAGE 2

		nployee who is appearing s	olely on behalf of your	office or for your municipality or
other governr	nental body?			☐ Yes ☐ No
		uestion, <b>STOP.</b> You need no to the question, go on to the		is form, except that you must sign
If you are be that:	ing paid for your i	epresentation, or if your ap	ppearance is part of oth	er paid duties, please be advised
	Before you enga with the City Cle	ge in lobbying as a lobbyis erk	, you or your principal	must file an authorization
2	Your principal is City Clerk	s not permitted to authorize	you to lobby unless yo	ou are registered with the
3.		spends or will owe more that it, the principal must file calendar year?		
		website <u>www.cityofmadis</u> uilding, Madison, for more i		or go to the Clerk's Office at
Date \\\	18/08	Signature		
		Print Name		J.A Rosensee

ng na Palane	4 3 4 5		,	100	1	100	10.0
Date:	-11 ,	181	08			. ::	
August 1		- 1					

# **CITY OF MADISON**

Registration Statement	Common Council COMMITTEE
Please Print	
	PLEASE PRINT NAME CLEARLY
Agenda No. 33	Name BRIAN MUNISON
11309	Address 120 EAST LAKESIDE  MADISON WE
Please check the appropriate box:	Please check the appropriate box:
Support Oppose	AND Wish to speak  Do not wish to speak
Neither Support Nor Oppose	Available to answer questions
Name, address and telephone number of each	complete the rest of this form. If you answered "yes," provide the name
6801 Soury Town	
MP(562)	
Are you being paid for your representation?	☑ Yes □ No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mon Council) 5 minutes 3 minutes 3 minutes

### **REGISTRATION STATEMENT - PAGE 2**

Are you an el other governn	lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
	red "yes" to the question, <b>STOP.</b> 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 be that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk
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?
	o the City Clerk's website <a href="https://www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at the City-County Building, Madison, for more information)  Signature
\	Print Name RRAN LANG J

	- 11	IC	- PO
Date:		-18	

# CITY OF MADISON

Registration Stat	ement - Common (	Council
Please Print		
	PLEAS	E PRINT NAME CLEARLY
Agenda No. 33	Name	DON ESPOSITO
	Address 2	MADISON
1130		- ANICO
Please check the appropriate l	<b>)0X:</b>	Please check the appropriate box:
Support	AND	☐ Wish to speak☐ Do not wish to speak
Oppose Neither Support N		Available to answer questions
At this meeting are you represer (If you answered "no," STOP; of who you represent and go on Name, address and telephone nu	you need not complete the res to the next question)	t of this form. If you answered "yes," provide the name
Are you being paid for your rep	resentation?	☐ Yes ☐ No
Are you appearing as part of you (If you answered "no," STOP; question)		rson or organization? Yes No t of this form If you answered "yes," go on to the next
Informat	learing (Common Council)tion Hearing	3 minutes

## REGISTRATION STATEMENT - PAGE 2

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Are you an elected official or employee 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, <b>STOP.</b> 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, please be advised that:
Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
2 Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk
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?
(Please go to the City Clerk's website <a href="https://www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information)
Date 11-18-08 Signature
Print Name D. A. ESPUSITO JR