Date: 100, 14, 2006

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print 02392	PLEASE PRINT CLEARLY
Amendment No. Amendment No. Amendment No. Amendment No. Amendment No. Please check the appropriate boxes:	Name Ilse Hecht Address 141 M. Hancock St Madison 53703
Support	and Wish to speak Do not wish to speak
Oppose Neither Support Nor Oppose	Available to answer questions
At this meeting are you representing an organiza (If you answered "no," STOP; you need not con of who you represent and go on to the next quest Name, address and telephone number of each pe	mplete the rest of this form. If you answered "yes," provide the name tion)
Are you being paid for your representation?	Yes No
Are you appearing as part of your other paid dut (If you answered "no," STOP; you need not conquestion.)	ies for this person or organization? Yes No mplete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Common Information Hearing Other Items	3 minutes

Are you an eleother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
	red "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 beinthat:	ng 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. 		
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 <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)			
Date <u>Nov</u>	14,2006 Signature <u>Hoekt</u> Print Name Ilse Hocht		

Date: 100.14.06

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print 02392	PLEASE-PRINT CLEARLY
Amendment No.	Name & Hecht (M)
Amendment No.	Address M. M. Honeock St
Amendment No.	[MrD] por MI 2330A-5311
Amendment No.	
Amendment No.	
Please check the appropriate boxes: Support	and Wish to speak
⊠ Oppose	Do not wish to speak
Neither Support Nor Oppose	Available to answer questions
of who you represent and go on to the next question	lete the rest of this form. If you answered "yes," provide the name n.)
Name, address and telephone number of each person	on or organization you are representing:
Are you being paid for your representation?	Yes X No
Are you appearing as part of your other paid duties (If you answered "no," STOP; you need not comp question)	s for this person or organization? Yes No lette the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Common Common Common Hearing Common Common Common Hearing Common Co	3 minutes

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, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)				
If you are t that:	If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:				
1	Before you engage in lobbying with the City Clerk.	ng as a lobbyist, you or your principal m	ust file an authorization		
2	Your principal is not permitt City Clerk.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.		ill owe more than \$1,000 for lobbying so ipal must file expense statements with ar?			
(Please go Room 103 d	o to the City Clerk's website <u>wy</u> of the City-County Building, Madi	<u>vw.cityofmadison.com/clerk/index.html</u> c ison, for more information.)	or go to the Clerk's Office at		
Date		nature A. C. Hech (M)			

Date: 11 (4/06

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print	02392	PLEASE I	PRINT CLEARLY	
Amendment No.	7	Name	Patrick McD	onnell
Amendment No.			441 N. PATER	
Amendment No.			MADISON, W	
Amendment No.				
Amendment No.				
Please check the appro	opriate boxes:			
Support	•		and Wish to speak	•
Oppose Noither Su	pport Nor Oppose		Do not wish to speak Available to answer	questions
(If you answered "no, of who you represent a Name, address and tele	and go on to the next quest ephone number of each pe	nplete the rest tion.) erson or organi:	of this form. If you answered vy.	
A cf	dress Same	- 15h 0	g Associ	41107
9	nove - 257	7-011	9	
Are you being paid for			□ Y	· /
Are you appearing as y (If you answered "no, question.)	part of your other paid dut "STOP; you need not con	ies for this per mplete the rest	son or organization? Ye of this form. If you answered "y	
Speaking Limits:	Public Hearing (Common Information Hearing		3 minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?		
	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.)		
If you are be that:	eing 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?		
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		

Please Print	02392	PLEASE	PRINT	T CLEARLY
Amendment No#	47	Name	Ja	emes Westring
Amendment No		Address		mes Westring 32 Drake St
Amendment No.			4	adison, WI. 53715
Amendment No.				
Amendment No.				
Please check the appro	opriate boxes:			
Support Oppose	iminating funding pport Nor Oppose		and	Wish to speak Do not wish to speak Available to answer questions
(If you answered "no,		lete the res		ner than yourself: Yes No is form If you answered "yes," provide the name
Name, address and tel	ephone number of each perso	on or organ	ization	n you are representing:
Madison	Trust for History	ic fre	serv	vahin
	estring Preside			
608 441	5435 X3			
Are you being paid for	r your representation?			☐ Yes "A No
	part of your other paid duties "STOP; you need not comp			or organization?
Speaking Limits:	Public Hearing (Common Confermation Hearing		.3 min	nutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?			
(If you answe this form. If y	red "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 be that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised		
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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?			
	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		

Date:	11-19-06

Please Print	02392	PLEASE PRII	NT CLEARLY	\cap	
Amendment No	7 James	Name	Marshe Rum	inel	
Amendment No	Medisa	Address	1339 Rutur	se #2	
Amendment No			Madigan WI	53703	
Amendment No					
Amendment No.					
Please check the appr	ropriate boxes:	and	☐ Wish to spea ☑ Do not wish	ak to speak	
Oppose Neither Su	ipport Nor Oppose	e	Available to	answer quest	tions
(If you answered "no of who you represent	ou representing an organ," STOP; you need not and go on to the next qualephone number of each	t complete the rest of t uestion)	this form. If you ansv	vered "yes," ¡	□ No provide the name
	or your representation?			☐ Yes	□ No
Are you appearing as (If you answered "no question)	part of your other paid," STOP; you need not	duties for this person t complete the rest of	or organization? this form. If you ans	∐Yes wered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	,,	inutes		

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?			
1 0 0	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.)		
If you are b that:	eing 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?		
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		

Date:	1-14-00	
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Please Print	1392	PLEASE PRIN	Ţ CLEARLY		
Amendment No.		Name /	omay Lel		
Amendment No.		Address ///	Welson		
Amendment No.		<i>M</i>	alyon 537	03	· · · · · · · · · · · · · · · · · · ·
Amendment No.		-{-}- {	755		
Amendment No.					
Please check the approp	riate boxes:				
□ ∧ Support		and	Wish to speak		
Oppose			Do not wish the Available to a		tiona
Neither Sup	port Nor Oppose		Available to a	answer quesi	Hons
(If you answered "no,"	representing an organizati STOP; you need not compad go on to the next question	plete the rest of th	er than yourself: is form. If you answe	☐ Yes ered "yes," j	provide the name
Name, address and telep	phone number of each pers	son or organization	n you are representing	ng:	
Are you being paid for y	your representation?			Yes	☐ No
	art of your other paid dutie STOP; you need not com			Yes ered "yes,"	☐ No go on to the next
]	Public Hearing (Common Information Hearing Other Items	3 mir	nutes		

_	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign fyou answered "no" to the question, go on to the next question.)
If you are that:	being 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?
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date:	11	114/	06
		-	

Please Print	2392	PLEASE PRINT CLEARLY
Amendment No Amendment No Amendment No Amendment No Amendment No		Name <u>SANDRA WARD</u> Address <u>441 N. PATERSON</u>
At this meeting are yo (If you answered "no, of who you represent	pport Nor Oppose ou representing an organ "STOP; you need not a and go on to the next qu	nization or a person other than yourself: Yes No complete the rest of this form. If you answered "yes," provide the nar
Are you appearing as	"STOP; you need not Public Hearing (Communication Hearing)	☐ Yes ☐ No duties for this person or organization? ☐ Yes ☐ No complete the rest of this form. If you answered "yes," go on to the ne mon Council)5 minutes 3 minutes 3 minutes

-	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?					
		ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)				
If you ar	re beir	ng paid for your representation, or if your appearance is part of other paid duties, please be advised				
1	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2	2	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3	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?				
		the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at a clear clear clear county Building, Madison, for more information.)				
Date		Signature				
		Print Name				

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

02391, 02392 You must 1

You must register before the Council considers your item.

Uddi, Uddi2	
Please Print	PLEASE PRINT/CLEARLY
Amendment No. # 7	Maria Vala
<i>H</i> /	Name Manuel Manu
Amendment No. # 10	Address 2/1 /// Wunttly or
Amendment No.	, , , , , , , , , , , , , , , , , , ,
Amendment No.	
Amendment No.	
Amendment Ivo.	
Please check the appropriate boxes:	
Support	and Wish to speak
Oppose	Do not wish to speak Available to answer questions
Neither Support Nor Oppose	Tivaliable to allower questions
At this meeting are you representing an organical (If you answered "no," STOP; you need not of who you represent and go on to the next quality.	complete the rest of this form. If you answered\"yes," provide the name
Name, address and telephone number of each	person or organization you are representing:
1015 CI Wash	
Are you being paid for your representation?	Yes No
Are you appearing as part of your other paid d (If you answered "no," STOP; you need not a question)	luties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Comm	non Council)5 minutes
	3 minutes
Other Items	3 minutes

(SEE BACK)

	REGISTRATION STATEMENT - PAGE 2			
Are you an electother government	ted official or employee who is appearing solely on behalf of your office or for your municipality or ntal body?			
	d "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question)			
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ŗ	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 emainder of the calendar year?			
	he City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at City-County Building, Madison, for more information.)			
Date //-/	4-06 Signature Supra Schmith			
	Print Name			

Date:	11	7	06
			· · · · · · · · · · · · · · · · · · ·

Please Print 02391, 02392, 02396	PLEASE PRINT CLEARLY
Amendment No. (Name JUSCHA ROBINSON
Amendment No. 1	Address LOUT SOURCE ST 53704
Amendment No. 7	
Amendment No.	
Amendment No.	
Please check the appropriate boxes:	
Support✓ OpposeNeither Support Nor Oppose	and Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organization (If you answered "no," STOP ; you need not complet of who you represent and go on to the next question	ete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each person	n or organization you are representing:
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid duties (If you answered "no," STOP ; you need not complequestion.)	for this person or organization? Yes No lete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Common Confirmation Hearing Other Items	3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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)
If you are b that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
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	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date: 111466

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print		PLEASE PI	RINT CL	.EARLY	ĺ	
Amendment No Amendment No Amendment No Amendment No	3 02388 6 02391 7 02392 9 02394 10 02395	NameAddress		on Nita 3109 Her Modrison	rd Minai UIS	5+ 3714
At this meeting are you re (If you answered "no," S of who you represent and	ort Nor Oppose epresenting an organization of TOP; you need not completed go on to the next question one number of each person	n or a person ete the rest o	of this fo	rm. If you answe	o speak unswer quest Yes ered "yes," p	⊠No
	our representation? t of your other paid duties to the complete of the comple				☐ Yes ☐ Yes ered "yes,"	☐ No ☐ No go on to the next
In	ublic Hearing (Common Conformation Hearing	3		3		

Are you an elected other governmenta	official or employee who is appearing solely on behalf of your office or for your municipality or lbody?
	yes" to the question, STOP. You need not complete the rest of this form, except that you must sign is swered "no" to the question, go on to the next question.)
If you are being p that:	aid for your representation, or if your appearance is part of other paid duties, please be advised
	fore you engage in lobbying as a lobbyist, you or your principal must file an authorization h the City Clerk
	ur principal is not permitted to authorize you to lobby unless you are registered with the y Clerk.
per	your principal spends or will owe more than \$1,000 for lobbying services in any reporting iod (half year), the principal must file expense statements with the City Clerk for the nainder of the calendar year?
	City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ity-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date: $\frac{1}{1} \neq \frac{106}{1}$

CITY OF MADISON Registration Statement - Common Council 2007 CAPITAL BUDGET

Please Print		_ PLEASE F	RINT CLE	ARLY	. ^	
Amendment No Amendment No Amendment No Amendment No Amendment No	3 02388 6 02391 7 02392 4 0	Name Address	Mic	boel Cio 314 Son Meedisco	<u>20Vm</u> unio 1:	53704
Please check the appr Support Oppose Neither Su At this meeting are you (If you answered "not of who you represent to the property of the pr	pport Nor Oppo ou representing an or "STOP; you need n and go on to the next	ose ganization or a perso not complete the rest t question.)	of this for	m. If you answere	Yes 'yes,"	□No
Are you being paid for Are you appearing as (If you answered "no question.) Speaking Limits:	part of your other pa ," STOP; you need to Public Hearing (Co Information Hearing	aid duties for this pers	of this for 5 minutes 3 minutes	nnization? [m. If you answere	☐ Yes ☐ Yes ed "yes,"	No No go on to the next

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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)
If you are b that:	being paid for your representation, or if your appearance is part of other paid duties, please be advised
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`	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date:		Nov	A
	1		~

Please Print	PLEASE PRINT CLEARLY	. 4
Amendment No. 3.02388 Amendment No. 6-2391 Amendment No. 7-02392 Amendment No. 8.02393 Amendment No. 8.02393	Name Spup Address 2007	1 Jeniter An 53704
Please check the appropriate boxes: Support Oppose Neither Support Nor Oppose At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next que Name, address and telephone number of each	Availadization or a person other than yours complete the rest of this form. If you westion.)	u answered "yes," provide the name
Information Hearing		



-	elected official or employee water that body?	who is appearing solely on behalf of your off	ice or for you Yes	ur municipality or No
		TOP. You need not complete the rest of this jestion, go on to the next question)	^c orm, except t	that you must sign
If you are b that:	eing paid for your representa	ation, or if your appearance is part of other	paid duties,	please be advised
1	Before you engage in lobb with the City Clerk.	oying as a lobbyist, you or your principal mu	ist file an aut	horization
2	Your principal is not pern City Clerk.	nitted to authorize you to lobby unless you	are registered	d with the
3		r will owe more than \$1,000 for lobbying seincipal must file expense statements with year?		
		www.cityofmadison.com/clerk/index.html o adison, for more information.)	r go to the	Clerk's Office at
Date		Signature	<u> </u>	
	Ī	Print Name		

Date: 11146	6
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Please Print				
Amendment No.	7 02392	PLEASE Name		LEDELL ZELLERS
Amendment No.	3 02388	Address		STO N. CARROLL ST
Amendment No.	4 02389			
Amendment No				
Amendment No				
Please check the appr	ropriate boxes:			
Support Oppose Neither Su	apport Nor Oppos	se	and	☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions
(If you answered "no	ou representing an orgo," STOP; you need not and go on to the next	ot complete the res	son othe st of thi	her than yourself: Yes No his form. If you answered "yes," provide the nan
Name, address and te	elephone number of each	ch person or orgar	nization	on you are representing:
,				
	, , ,			
Are you being paid for	or your representation?	•		Yes No
Are you appearing as (If you answered "no question.)	s part of your other paid o," STOP; you need no	d duties for this pe ot complete the re	erson or st of thi	or organization?
Speaking Limits:	Public Hearing (Cor Information Hearing	3	3 min	nutes

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body? Yes No
	wered "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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`	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name