Date: 4/21//)

CITY OF MADISON

Registration Statement - LANDLORD & TENANT ISSUES SUBCOMMITTEE

Please Print	PLEASE PRINT CLEARLY
1	Name Branda K. Cal
_Agenda No	Address 30 N Hancoll Jt
Please check the appropriate boxes:	33703
Support Oppose Neither Support Nor Oppose	and 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 Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question.)	
Name, address and telephone number of each person or organization you are representing: Tenut Resource Center People's Usion	
1202 Williamson St 4102 ANAA	
Are you being paid for your representation?	Yes DNo
Are you appearing as part of your other paid duties for this person or organization? 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.)	
Speaking Limits: Public Hearing (Common Control Hearing Hearin	·