Date: 5-10-06

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print (03477		PRINT NAME C	LEARLY
	2	Name	Helen Dietzle	V
Agenda No.		Address	1610 Western 1	λνe.
			Madison, w	
Please check the ap	propriate boxes:			
			Please	
Support			Oppose Post as	Clerk only
Wish to			Wish to speak	
	wish to speak le to answer questions		Do not wish to speak Available to answer of	医马克氏氏征 化二甲基二甲基酚 医皮肤 医二甲酚 经工业 电压电池 医二甲基乙基乙二
Name, address and	telephone number of each p	erson or organization	you are representing:	
Are you being paid	for your representation?		Ye	es No
				,31 \ V
	is part of your other paid du no," STOP; you need not co			
Speaking Limits:	Public Hearing		utes	
	Information Hearing.			
	Other Items	3 min	utes	사람은 걸음 등을 들었다.

Registration Statement - Page 2

Are you governn		elected official who is appearing solely on behalf of your office or for your municipality or other body?
	2 4 4 7 4 7 7 7	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 a that:	re bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
	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 the principal is registered with the City Clerk?
	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?
	ter of the end of the	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's n 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

Date: 5/16/06

CITY OF MADISON

Registrati	on Statement -	Common Cou	ncil		
		COMMITTEE			
Please Print () Agenda No.	3477	PLEASE PRIN Name Address	TCLEARLY)any L 320 H MANNSI	Kowater Hermony bi	Jsly Vatore 374
Diago should the appre	on inte hoves				
At this meeting are yo (If you answered "no, of who you represent	pport Nor Oppose of representing an organ organ of the next of the	nization or a person ot complete the rest of the uestion)	Do not Availa her than yours his form. If you	u answered "yes	No
					je i do na
Are you being paid fo	r your representation?			☐ Yes	ZINº
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 bn to the next question.)					
Speaking Limits:		mon Council) 5 mi 3 mi 3 mi			

REGISTRATION STATEMENT - PAGE 2

The second of the second of the second of	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

Date: 5-16-06

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print	03477	PRINT NAME CLEARLY
Agenda No.	Nar Ado	Iress 5206 Esker Drive
		Madison
Please check the app	propriate boxes: Post a	s Clerkonly, please.
		Oppose Wish to speak Do not wish to speak Available to answer questions
		person other than yourself: Yes No e rest of this form. If you answered "yes," go on to the nex
Name, address and t	elephone number of each person or o	rganization you are representing:
Are you being paid	for your representation?	☐ Yes ☐ No
	s part of your other paid duties for th o," STOP; you need not complete th	is person or organization? Yes No e rest of this form If you answered "yes," go on to the nex
Speaking Limits:	Public Hearing Information Hearing	

Registration Statement - Page 2

Are you an government	n elected official who is appearing solely on be tal body?	half of your office or for your municipality or other Yes No
(If you answ this form. If	wered "yes" to the question, STOP. You need not of you answered "no" to the question, go on to the r	complete the rest of this form, except that you must sign next question.)
If you are b that:	being paid for your representation, or if your apports	earance is part of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, with the City Clerk?	you or your principal must file an authorization Yes No
2.	Your principal is not permitted to authorize with the City Clerk?	you to lobby unless the principal is registered Yes No
3.	If your principal spends or will owe more the period (calendar quarter), the principal must the remaining quarters of the calendar year?	an \$500 for lobbying services in any reporting file expense statements with the City Clerk for ☐ Yes ☐ No
(If you answ Office at Ro	wered "no" to any of the last three questions, pleo oom 103 of the City-County Building, Madison, for	ase call the City Clerk at 266-4601 or go to the Clerk's more information.)
Date	Signature	
	Print Name	

Date: 5-16-06

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print	03477	PRINT NAME CLEARLY
Agenda No	3	Name Debra Schmidt Address 2690 Research Park Dr. #216
Please check the ap	propriate boxes:	
At this meeting are (If you answered "r question)	wish to speak le to answer questions you representing an organiza no, "STOP; you need not co	Oppose (Position Should be Wish to speak recosted as Clerk Do not wish to speak Only Available to answer questions tion or a person other than yourself: Yes XNo implete the rest of this form. If you answered "yes," go on to the next reson or organization you are representing:
Are you being paid	for your representation?	☐ Yes ☐ No
		ies for this person or organization? Yes No nplete the rest of this form If you answered "yes," go on to the next
Speaking Limits:	Public Hearing Information Hearing Other Items	5 minutes

Registration Statement - Page 2

Are you a	an elected official who is appearing solely on behalf of your ntal body?	office or for your municipality or other Yes No
(If you ans this form. I	swered "yes" to the question, STOP. You need not complete the r If you answered "no" to the question, go on to the next question.)	rest of this form, except that you must sign)
If you are that:	being paid for your representation, or if your appearance is par	t of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, you or your pwith the City Clerk?	rincipal must file an authorization ☐ Yes ☐ No
2.	Your principal is not permitted to authorize you to lobby with the City Clerk?	unless the principal is registered Yes No
3	If your principal spends or will owe more than \$500 for loperiod (calendar quarter), the principal must file expense sthe remaining quarters of the calendar year?	obbying services in any reporting tatements with the City Clerk for Yes No
(If you ansv Office at Ro	swered "no" to any of the last three questions, please call the Ci loom 103 of the City-County Building, Madison, for more informa	ty Clerk at 266-4601 or go to the Clerk's ation.)
Date	Signature	
	Print Name	