

Date: 7-6-07

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

Please Print

05379

PLEASE PRINT CLEARLY

Name Freddie Clark
Address 2414 Alfred Dr
Madison

Agenda No. 67

Please check the appropriate boxes:

- 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 No
(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:

Are you being paid for your representation? Yes No

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 Council)..... 5 minutes
Information Hearing..... 3 minutes
Other Items..... 3 minutes

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2

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Date _____

Signature _____

Print Name _____

Date: _____

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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05379

PLEASE PRINT CLEARLY

Name Vivian Allen

Address Crescent Rd

Agenda No. <u>67</u>

Please check the appropriate boxes:

- Support**
- Oppose**
- Neither Support Nor Oppose**

- and
- Wish to speak**
 - Do not wish to speak**
 - Available to answer questions**

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 Information Hearing.....3 minutes
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Signature _____

Print Name _____

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CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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05379

PLEASE PRINT CLEARLY

Name

Parrish Willis

Address

Alled Ave

Agenda No.

67

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neither Support Nor Oppose

Available to answer questions

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Yes

No

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Yes

No

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Information Hearing 3 minutes
Other Items 3 minutes

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Signature _____

Print Name _____

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CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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05379

PLEASE PRINT CLEARLY

Name

Ophelitt Mallit

Address

Homeless

Agenda No. 67

Please check the appropriate boxes:

- Support**
- Oppose**
- Neither Support Nor Oppose**

- and
- Wish to speak**
 - Do not wish to speak**
 - Available to answer questions**

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Print Name _____

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CITY OF MADISON

Registration Statement - Common Council
COMMITTEE

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Agenda No. 67

Name ANN ALEXANDER
Address 2422 Allied Dr #4

Please check the appropriate boxes:

- 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 No
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Signature _____

Print Name _____

Date: 2-6-07

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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05379

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Name VELMA JACKSON

Address 4538 SWENPINE

Agenda No. 67

Please check the appropriate boxes:

- 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 No
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CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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Name Gregory Wright
Address 2406 Alfred Dr. APT 4

Agenda No. 67

Please check the appropriate boxes:

- 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 No
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Signature _____

Print Name _____

Date: _____

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

Please Print

05379

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Barry Hayes

Agenda No. 67

Name Barry Hayes

Address Crescent Rd

Please check the appropriate boxes:

- 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 No
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 Other Items..... 3 minutes

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Date: _____

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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05379

PLEASE PRINT CLEARLY

Name

Willenena Thews

Address

Alfred Drive

Agenda No.

67

Please check the appropriate boxes:

Support

Oppose

Neither Support Nor Oppose

and **Wish to speak**

Do not wish to speak

Available to answer questions

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No

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CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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05379

PLEASE PRINT CLEARLY

Name William Conklin

Address 2122 Allied Dr #3
53711

Agenda No. 07

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- Wish to speak
 - Do not wish to speak
 - Available to answer questions

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Information Hearing.....3 minutes

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Registration Statement - Common Council

COMMITTEE

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05379

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Name Maisha Rummel
Address 1339 Rutledge St # 2

Agenda No. <u>67</u> <u>Meyer Leelby</u>

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- Support**
- Oppose**
- Neither Support Nor Oppose**

- and
- Wish to speak
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Agenda No. <u>67</u>

Name Lisa Subeck

Address 818 S. Common Rd. #4

Madison 53719

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- Wish to speak
 - Do not wish to speak
 - Available to answer questions

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