Date: 4/6///

CITY OF MADISON

Registration Statement -	HOUSING COMMITTEE
	COMMITTEE
Please Print	PLEASE PRINT, CLEARLY
Agenda No.	Name Nauly Jensen Address 702 N. High Pink Rd
	Madison, WI
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppose	and Wish to speak Do not wish to speak Available to answer questions
of who you represent and go on to the next q	complete the rest of this form. If you answered "yes," provide the name
Apt. Assuc. of South C	Entral WI
102 N. High Point K	d #203
Maxison, WI	
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 minutes3 minutes3 minutes

REGISTRATION STATEMENT - PAGE 2

	elected official or employee nmental body?	who is appeari	ng solely on beh	alf of your offi	ce or for your municipality	or
	vered "yes" to the question, S you answered "no" to the qu				orm, except that you must si	gn
If you are b that:	eing paid for your represent	tation, or if you	ir appearance is	part of other j	oaid duties, please be advis	ed.
1.	Before you engage in lob with the City Clerk.	bbying as a lobl	yist, you or you	r principal mu	st file an authorization	
2.	Your principal is not per City Clerk.	mitted to autho	orize you to lobb	oy unless you a	are registered with the	
3.	If your principal spends of period (half year), the premainder of the calendar	orincipal must				
	to the City Clerk's website f the City-County Building, M				go to the Clerk's Office	at
Date	6.6.11	Signature	Maury	Jeusen_		
		Print Name	wancyv	<u>Jensen</u>		

		CITY OF WA	MOSIN	·	
Registra	tion Statement		HOUSING COMMIT	TEE	
120910520		COMMITTEE	- municipality		-
Please Print		PLEASE	PRINT CLEARLY		
Agenda No	9	Name Address	Breuden 30 N 4	Konkell	
Please check the app	propriate boxes:				×
Support Oppose Neither S	upport Nor Oppose			peak sh to speak to answer questions	
(If you answered "n of who you represen	you representing an organ to," STOP; you need not out to and go on to the next qu	complete the res estion.)	t of this form. If you an	swered "yes," provide th	he name
Name, address and t	elephone number of each	/ '	ization you are represe h HV	ıting:	
1 0 00					
Are you being paid	for your representation?			Yes No	
	s part of your other paid do," STOP; you need not o			Yes No swered "yes," go on to	the next
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	•••••	.3 minutes		

Date: ____

REGISTRATION STATEMENT - PAGE 2

그 그 그는	
Are you an elected official or employee who is appearing solely on behalf of you other governmental body?	ur office or for your municipality or Yes No
(If you answered "yes" to the question, STOP. You need not complete the rest of this form. If you answered "no" to the question, go on to the next question.)	this form, except that you must sign
If you are being paid for your representation, or if your appearance is part of on that:	other paid duties, please be advised
 Before you engage in lobbying as a lobbyist, you or your princip with the City Clerk. 	al must file an authorization
 Your principal is not permitted to authorize you to lobby unless City Clerk. 	you are registered with the
3. If your principal spends or will owe more than \$1,000 for lobbyi period (half year), the principal must file expense statements remainder of the calendar year?	ing Tourist and a company of the com
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.ht</u> Room 103 of the City-County Building, Madison, for more information.)	tml or go to the Clerk's Office at
Date DHUII Signature Brench / W. Print Name BREWDA K	Lall LONKEC

Date:	4	0	/		
Daw.		 2		 	

CITY OF MADISON

Registration S	tatement -	HOUS	ING COMMIT	TEE		
.		MITTEE		WARRIED A. T.		
Please Print		PLEASE PRINI	CLEARLY			
Agenda No		•	achel (09 Wha lerona (Swin Jen Rd Ul 53	593	
Please check the appropriate	boxes:	V	<u> </u>		<u> </u>	
Support Oppose Neither Support	Nor Oppose	and		peak ish to speak to answer ques	stions	
At this meeting are you repred (If you answered "no," STO of who you represent and go	P ; you need not compl	ete the rest of thi			No provide the	пате
Name, address and telephone	e number of each perso	n or organization	you are represe	enting:		
				. ,		
					to a second seco	
Are you being paid for your	representation?			Yes	☐ No	
Are you appearing as part of (If you answered "no," STO question.)				☐ Yes nswered "yes,"	∏ No ' go on to the	e next
Infor	c Hearing (Common C					

REGISTRATION STATEMENT - PAGE 2

Are you an eleother governm	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 bei 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 <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