

CITY OF MADISON

Registration Statement

Early Childhood Care and Education Committee
Name of Board, Committee or Commission

Name Zanna Majerle
Address _____

Date 8/25/10
Item _____

☒ Support ☐ Oppose

☒ ☐ ☐
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:
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

☒ Yes ☐ No

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?
(If you answered "no" to both these questions, **STOP**. You need not complete the rest of this form.
If you answered "yes," turn over to the next question.)

☒ Yes ☐ No

Registration Statement - Page 2

Are you an elected official 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 questions.)

If you are being paid for your representation, or if your appearance is part of other paid duties, do you understand that:

1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk? ☐ Yes ☐ No
2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk? ☐ Yes ☐ No
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? ☐ Yes ☐ No

(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)

Date 8/25/10

Signature

Zanna Majerle

Print Name

Zanna Majerle

CITY OF MADISON

Registration Statement

Early Childhood Care and Education Committee
Name of Board, Committee or Commission

Name AET LAKE
Address SS S. GAMMON RD

Date 8/24/10
Item _____

☒ Support ☐ Oppose

☐ 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:
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

☒ Yes ☐ No

Name, address and telephone number of each person or organization you are representing:

LEEC SS. GAMMON RD

Are you being paid for your representation?

☐ Yes ☒ No

Are you appearing as part of your other paid duties for this person or organization?

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Date 8/24/10

Signature A. Lee Lake

Print Name A. L. LAKE