CITY OF MADISON Registration Statement for Common Council Organizational Committee

Name _ Address _	Lorri Wendus S 6668 W. Thorospole Or: Scressille us \$3548	Date/ Item/	4-3	
Opp	oport Dose ther Support or Oppose			Speak /ish to Speak e to Answer Questions
(If you answer	red "no," STOP ; you need not complete the rest of this form ress and telephone number of each person or or Notestime 4 Superior Comp	n. <i>If you answered "</i> y canization vou a	ves," go on to the are representi	ina:
Are you bei	ing paid for your representation?			☐ Yes 🗹 No
(If you answer	pearing as part of your other paid duties for this pred "no" to both these questions, STOP. You need not compet "yes," turn over to the next question.)	person or organi plete the rest of this	zation? form.	☐ Yes ☑ No

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government (If you answere	al body? ed "yes" to the question, STC	ppearing solely on behalf of your office or for you	🗌 Yes 🗾 No
If you answere	d "no" to the question, go on	to the next questions.)	
If you are bunderstand	. .	presentation, or if your appearance is part of other	er paid duties, do you
1.	Before you engage file an authorization	in lobbying as a lobbyist, you or your principal muswith the City Clerk?	st ☐ Yes ☐ No
2.		ot permitted to authorize you to lobby unless th d with the City Clerk?	e ☐ Yes ☐ No
3.	in any reporting peri	nds or will owe more than \$500 for lobbying service od (calendar quarter), the principal must file expens City Clerk for the remaining quarters of the calendary	e
(If you answerd of the City-Cou	ed "no" to any of the last thro nty Building, Madison, for m	ee questions, please call the City Clerk at 266-4601 or go to the ore information.)	e Clerk's Office at Room 103
Date /2-	4-07	Signature Lie Unity	
- 10 II		Print Name Lowi Westdws	