### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Name Barb Mercer Address President			
	Addi		7,000,000,000	
Please check the appropriate boxes:	<b>1</b>	11(1001(00))	Dane Tavern League	
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support			×	
Oppose	X,	V	·	
Neither support nor oppose				
I wish to speak	X	X		
Available for information only				
Name, address and telephone number of a MADISON RANGE ( P.O. BOX 8858 MADISON WI	each person or or 2 auw + y 7	ganization you are represe	nting:	
Are you being paid for your representatio	n?		☐ Yes ☐ No	
Are you appearing as part of your other part of your other part of you answered "no," STOP; you need question.)			Yes No aswered "yes," go on to the next	
Speaking Limit:	*****************	4 minutes		
REGISTRANT # 16				

	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes \sum No						
		ed "yes" to the question, u answered "no" to the q		ed not complete the rest of to the next question.)	this form, except th	hat you must sign	
If you a	are bein	g paid for your represer	ntation, or if yo	our appearance is part of o	ther paid duties, do	you understand	
	1.,	Before you engage in lowith the City Clerk?	obbying as a lol	bbyist, you or your princip	al must file an auth  Yes	orization No	
	2	Your principal is not p with the City Clerk?	ermitted to aut	horize you to lobby unles	s the principal is r	egistered	
	3.		r), the principal	nore than \$500 for lobbying must file expense statemers.			
(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	9/2	20/05	Signature	Barbara Barbara	Mercer		
	•	•	Print Name	Barbara	JMER	CER	

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	ress 1030 V: MADIS	SHEVEN	SON
Agenda No. 29	Add	ress 1030 V:	las Aux	<del>(</del>
		MARKS	5071	53715
		<u> </u>		-
Please check the appropriate boxes:				
	01880	01881	<u> </u>	1985
	Referendum	Hardship Exemption		g smoking ban
Support		<b>*</b>	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
Oppose	×	X	×	
Neither support nor oppose				
I wish to speak			×	
Available for information only				
Name, address and telephone number of	each person or or	ganization you are repres	enting:	. 12
Are you being paid for your representation	on?		☐ Yes	
Are you appearing as part of your other p (If you answered "no," STOP; you need question)			Yes unswered "yes,"	了No "go on to the next
Speaking Limit:	••••••	4 minutes		
	(See I	Back)		
REGISTRANT # _ <b>5</b> l	(000)	Sucary		

		elected official who is appearing solely on behalf of your office or for your municipality or other labody?
		ered "yes" to the question, <b>STOP.</b> 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 that:	ı are be	eing 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?
If you Office	u answe e at Roo	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date <sub>.</sub>		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam		ZABEL	
Agenda No. 29	Addı	ress 8530 G1755	JUAY BUD #314	
		MODLETON		
	J	IMODERAGE	( ) -	
Please check the appropriate boxes:				
	··			
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose  Neither support nor oppose	<del></del>	<u>×</u>		
I wish to speak	· · <del>-</del>		*	
Available for information only				
Name, address and telephone number of each person or organization you are representing:				
Are you being paid for your representation	1?		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 Limit:4 minutes				
REGISTRANT # (See Back)				

Are you governme		ed official who is apply?	pearing solely	on behalf of	f your office	or for your r		No
	If you answered "yes" to the question, <b>STOP</b> . You need not complete the rest of this form, except that you must sign his form. If you answered "no" to the question, go on to the next question.)							
If you are that:	e being p	paid for your represent	tation, or if you	ır appearance	e is part of oth	ner paid dutie	s, do y	ou understand
1.		efore you engage in lot th the City Clerk?	obying as a lob	byist, you or	your principal	must file an		ization ] No
2.		our principal is not pe th the City Clerk?	rmitted to auth	orize you to	lobby unless	the principal Ye		istered ] No
3	pe	your principal spends riod (calendar quarter) e remaining quarters of	, the principal	must file exp			ity Cle	
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 9	120	105_	Signature	D)	ways.	Jul .		**************************************
<del>5</del>			Print Name	Dian	7.49 T	18 F		· · ·

PRINT NAME CLEARLY

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	1, 0 7 1/	Fipre, MD Whelse St.
Please check the appropriate boxes:		•	53 te3
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support			
Oppose	X	×	$\times$
Neither support nor oppose	/	/ \	<u> </u>
I wish to speak			<u> </u>
Available for information only			
name, address and telephone number o	f each person or or	ganization you are represe	enting:
Are you being paid for your representat  Are you appearing as part of your other	paid duties for this	s person or organization?	Yes No
(If you answered "no," <b>STOP;</b> you nee question.) <b>Speeking Limit</b>	a noi compiete ine	4 minutes	nswereu yes, go on to the next
Speaking Limit:REGISTRANT# ちの	(See	Back)	

Are you an elected official wh governmental body?	io is appearing solely on behalf of y	Your office or for your municipality or other Yes \(\sum{\text{No}}\)
	uestion, <b>STOP</b> . You need not complete to the question, go on to the next quest	the rest of this form, except that you must sign tion.)
If you are being paid for your r that:	epresentation, or if your appearance is	s part of other paid duties, do you understand
1. Before you engage with the City Cle		our principal must file an authorization  Yes No
2. Your principal is with the City Cle		obby unless the principal is registered  Yes No
period (calendar	spends or will owe more than \$500 aquarter), the principal must file expensarters of the calendar year?	for lobbying services in any reporting nse statements with the City Clerk for Yes No
(If you answered "no" to any of Office at Room 103 of the City-C	the last three questions, please call the lost three questions, please call the lounty Building, Madison, for more inf	he City Clerk at 266-4601 or go to the Clerk's formation.)
Date	Signature	
	Print Name	

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	HILL THE COLUMN				
	Nam	· Pete Be	eber norp St. WI 537/4		
Agenda No. 29	Addi	ess 3230 T)	oard St.		
5	7100	m 1'ss	1.1T 537/4		
	_	1/a/a/30/1	0,1 3 3 11 1		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose	1				
Neither support nor oppose					
I wish to speak	V	V	V		
Available for information only					
Name, address and telephone number of o	each person or or	ganization you are represe	enting:		
Are you being paid for your representatio	n?		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 Limit:	•••••••	4 minutes			
REGISTRANT # 13 (See Back)					

Are you		body? Yes No
		red "yes" to the question, <b>STOP</b> . 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:	ire beir	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?  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?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	ress 2201 We	rnev		
Agenda No. 29	Add	ress 2201 We	et low Aug		
		Modison	. 1		
	<b>.</b>	J'IDOLSAN	013014		
Please check the appropriate boxes:					
	01000	01881	01985		
	01880 Referendum	Hardship Exemption	Repealing smoking ban		
Support	Referendum	Traidsinp Exemption	repeating smoking can		
Oppose	X	X	X		
Neither support nor oppose	(A 369)				
I wish to speak	X	X	X		
Available for information only					
Name, address and telephone number of	each person or or	ganization you are represe	nting:		
Are you being paid for your representation	on?		☐ 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 Limit:4 minutes					
REGISTRANT # (See Back)					

Are you an elect governmental bod	eted official who is appearing solely on behalf of your office or for your municipal dy?	lity or other No
	"yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that y answered "no" to the question, go on to the next question.)	ou must sign
If you are being p that:	paid for your representation, or if your appearance is part of other paid duties, do yo	u understand
	Before you engage in lobbying as a lobbyist, you or your principal must file an authorize with the City Clerk?	ation No
	Your principal is not permitted to authorize you to lobby unless the principal is regist with the City Clerk?	tered No
pe	f your principal spends or will owe more than \$500 for lobbying services in any reporteriod (calendar quarter), the principal must file expense statements with the City Clerical remaining quarters of the calendar year?	
	"no" to any of the last three questions, please call the City Clerk at 266-4601 or go to 03 of the City-County Building, Madison, for more information)	o the Clerk's
Date	Signature	
	Print Name	

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY			
	Nam	e Dave F	letH
Agenda No. 29	Addı	ress 270 SA	NFORD DR
		Doches	+ 411
			.5
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	1		
Oppose	1/	1/	
Neither support nor oppose			
I wish to speak			
Available for information only			
(If you answered "no," STOP; you need question.)  Name, address and telephone number of			
Are you being paid for your representati	on?		☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this d not complete the	s person or organization? erest of this form. If you a	Yes No  nswered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
REGISTRANT # 12	(See	Back)	

	ou an e nmental	elected official who is a body?	ppearing solely	on behalf of your	office or for	r your mun	icipality or other
		red "yes" to the question ou answered "no" to the				rm, except t	hat you must sign
If you that:	are bei	ng paid for your represe	ntation, or if you	ur appearance is par	t of other pa	id duties, d	o you understand
	1.	Before you engage in le with the City Clerk?	obbying as a lob	byist, you or your p	rincipal mus	t file an autl	horization
	2.	Your principal is not p with the City Clerk?	ermitted to auth	norize you to lobby	unless the p	orincipal is	registered  No
	3.	If your principal spend period (calendar quarte the remaining quarters of	r), the principal	must file expense s			
(If yoı Office	answei at Roon	red "no" to any of the la n 103 of the City-County	st three question Building, Madisc	s, please call the Ci on, for more informa	ty Clerk at 2 ttion.)	66-4601 or	go to the Clerk's
Date <sub>-</sub>			Signature	. 200		<u>-</u>	
			Print Name				

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		IMINITY	AVIE CLEAKET	
	Nam	· <u>Man</u>	Tedeschi	
Agenda No. 29	Addı	1779 F	Elka Ln	
	7100	radus	m WI 5370	
	1	- LOCAS	BN W1 3370	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose		<b>レ</b>		
Neither support nor oppose				
I wish to speak				
Available for information only				
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," 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?				
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 Limit:4 minutes				
REGISTRANT # (See Back)				

•	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other covernmental body?  Yes \[ \sum \] No				
		ed "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)			
If you a that:	are beir	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?  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?			
(If you o Office a	answere it Room	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)			
Date _		Signature			
		Print Name			

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		<del>~,-</del>	·
	Nam	e CHERIE	SLONIKER
Agenda No. 29	Ađđ	ress 777 S.	M.11. Sta
_		Madisa	117
		Vilue 1 Se	rn. U -
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	X	X	×
Neither support nor oppose			
I wish to speak	X	X	X
Available for information only			
Name, address and telephone number of	f each person or or	ganization you are represe	enting:
Are you being paid for your representati			☐ Yes ☑ No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for thi d not complete the	s person or organization? erest of this form. If you a	Yes Mo nswered "yes," go on to the next
Speaking Limit:	******************	4 minutes	
-	(Sac	Back)	
REGISTRANT # 38	996)	<i>Duch</i>	
REGISTRAINT # 36			

	ou an nmenta	elected official who is appearing solely on behalf of your office or for your municipality or other body?
		red "yes" to the question, <b>STOP.</b> 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 that:	are be	ing 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?
		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

-

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINTINA	AVIE CLEARLI
	Nam	. Atan	Tedeschi
Agenda No. 29	Addı	$t_{\rm ess} = 1725 F$	Tka Lanc
		Modiso	n 53701
	<b>!</b>		
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	X	X	
Neither support nor oppose			
I wish to speak			X
Available for information only		<u> </u>	
(If you answered "no," STOP; you nee question.)  Name, address and telephone number of			
Are you being paid for your representat	ion?		☐ Yes ☑ No
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	paid duties for thi d not complete the	s person or organization? erest of this form. If you a	Yes No No nswered "yes," go on to the nex
Speaking Limit:		4 minutes	
DECISTRANT# 10	(See	Back)	

	are you an elected official who is appearing solely on behalf of your office or for your municipality or other overnmental body?					
		red "yes" to the question, <b>STOP</b> . 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:	are bei	ing 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?  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?				
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)				
Date		Signature				
		Print Name				

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

			A	
	Nam	e JeanMac	Cubbin	
Agenda No. (29AB÷C)	Add	ress 3530 Heat  MARISON L	ther Crest	
, ,,,=	Addi	11000 1000 1	IT SOMA	
	_1	MATH SON a	2 05.70	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose	$\rightarrow$	X	×	
Neither support nor oppose				
I wish to speak	X	X	*	
Available for information only				
Name, address and telephone number of	each person or or	ganization you are represe	nting:	
Are you being paid for your representation	n?		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 Limit:	•••••	4 minutes		
REGISTRANT # 37	(See	Back)		

	-	elected official who is appearing solely on behalf of your office or for your municipality or other al body?
		vered "yes" to the question, <b>STOP</b> . 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 yo that:	u are b	being 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?
		vered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT N	AME CLEARLY
	Nam	e PHIL MIEL	KE
Agenda No. 29	Addı	ess 9/7 11/A15	H, #103
	7.1	MANISON. 1	VI 53714
		1 1/10/30/07	
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			V
Oppose	V	V	
Neither support nor oppose			
I wish to speak	/		<u> </u>
Available for information only			
(If you answered "no," STOP; you nee question.)  Name, address and telephone number of			
Are you being paid for your representat	ion?	-	Yes No
Are you appearing as part of your other (If you answered "no," STOP; you nee question)	paid duties for thi d not complete the	s person or organization? erest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:	******************	4 minutes	
REGISTRANT # 28	(See	Back)	

		elected official who is appearing solely on behalf of your office or for your municipality or other al body?
		ered "yes" to the question, <b>STOP.</b> 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 that:	are bo	eing 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?  [ Yes ] No
	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?
		ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information)
Date _		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT N	AVIE CLEARLY
	Nam	. Matt Law	Ws
Agenda No. 29	Addı	ress 121 S. Ha	million St
3		Madria	53703
	<b></b>	11.13-47.43	
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	×	X	X
Neither support nor oppose			
I wish to speak	X		
Available for information only			
(If you answered "no," STOP; you need question)  Name, address and telephone number of			
	on?		☐ Yes ☐ No
Are you being paid for your representati	OII !		
Are you appearing as part of your other if you answered "no," STOP; you need question.)	paid duties for this I not complete the	s person or organization? rest of this form. If you o	Yes No No no swered "yes," go on to the next
Speaking Limit:	***************************************	4 minutes	
DECISTRANT # 79	(See	Back)	

		elected official who is appearing solely on behalf of your office of for your municipality of other body?
		ered "yes" to the question, <b>STOP</b> . 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 that:	are be	ing 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?  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?
		tred "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT N	AME CLEARLY		
	Narñ	e / Louis	Loslovsky		
Agenda No. 29	Addı	$_{\text{ress}}$ $1/394$	belief he		
		Mark	con al col		
	<del>J</del>				
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose	X	<u> </u>	<u> </u>		
Neither support nor oppose		•			
I wish to speak					
Available for information only					
(If you answered "no," STOP; you need question.)  Name, address and telephone number of					
Are you being paid for your representation	on?	***************************************	☐ Yes ☐ No		
Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	paid duties for this I not complete the	s person or organization? erest of this form. If you o	Yes No No Inswered "yes," go on to the next		
Speaking Limit:	•••••	4 minutes			
REGISTRANT# <b>SO</b>	(See	Back)			

Are you an o	elected official who is appearing solely on behalf of your office or for your municipality or other \textstyle \textstyle \textstyl
	ered "yes" to the question, <b>STOP</b> . 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 betthat:	ing 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?  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?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		<u> </u>	AME CEEAKL1
	Nam	ne DAVID	AMRENS
Agenda No. 29	Add	ress / OQ I	Royledge St
	1100		•
		Machi	
Diagonal all the second of the second			
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose		,	1
Neither support nor oppose			
I wish to speak			X
Available for information only			
Name, address and telephone number of	each person or or	ganization you are repres	enting:
Are you being paid for your representation	on?		☐ Yes ☐ No
Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	oaid duties for this not complete the	s person or organization? rest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:	***************************************	4 minutes	
REGISTRANT# 21	(See	Back)	

.,,	nmental	body? Yes No
		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 that:	are be	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?
		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

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam		A. Schmack
Agenda No. 29	Addr		lard St
		MADI	
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose			
Neither support nor oppose			<u></u>
I wish to speak			
Available for information only			
question.) Name, address and telephone number of	each person or or	ganization you are repres	enting:
Are you being paid for your representation	n?		☐ Yes ☐ No
Are you appearing as part of your other p (If you answered "no," STOP; you need question)			Yes No No Inswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 32	(See 1	Back)	

		elected official who is appearing solely on behalf of your office or for your municipality or other lbody?
(If you this fo	u answe orm. If y	ered "yes" to the question, <b>STOP.</b> 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 that:	are be	sing 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?  Yes No
	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?
(If you Office	ı answe at Roo	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

•		<u>FIGHT INA</u>	WIE CEEARCH
Agenda No. 29	Nam Addi		ward St.
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	Teororomann		
Oppose			
Neither support nor oppose			1
I wish to speak	<u> </u>		
Available for information only	_		
Name, address and telephone number o	f each person or or	ganization you are represe	nting:
Are you being paid for your representate  Are you appearing as part of your other (If you answered "no," STOP; you need question.)	naid duties for thi	s person or organization? erest of this form. If you ar	☐ Yes ☐ No ☐ Yes ☐ No nswered "yes," go on to the next
Speaking Limit:	•••••••	4 minutes	
REGISTRANT # 33	(See	Back)	

Are you an elected official who is governmental body?	appearing solely	on benair or your office or to	Yes Yes	No No
(If you answered "yes" to the questi this form. If you answered "no" to to			orm, except t	hat you must sign
If you are being paid for your reprethat:	esentation, or if you	r appearance is part of other p	aid duties, d	o you understand
1. Before you engage is with the City Clerk?	n lobbying as a lobl	oyist, you or your principal mu	st file an autl	horization No
2. Your principal is no with the City Clerk?	t permitted to auth	orize you to lobby unless the	principal is:	registered No
	rter), the principal	ore than \$500 for lobbying ser must file expense statements war?		
(If you answered "no" to any of the Office at Room 103 of the City-Coun			266-4601 or	go to the Clerk's
Date	Signature			
	Print Name			

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi		ridson Elderberry Ro n 53719
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose		×	X
Neither support nor oppose  I wish to speak	<b>X</b>	X	X
At this meeting are you representing an (If you answered "no," STOP; you need question.)  Name, address and telephone number of AMCVICAM (AMC)	ed not complete the	rest of this form. If you a	inswered "yes," go on to the next
Are you being paid for your representat	tion?		Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this ed not complete the	s person or organization? rest of this form. If you a	Yes  No nswered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
REGISTRANT # 90	(See	Back)	

	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
		red "yes" to the question, <b>STOP.</b> 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 that:	are bei	ing 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?  Yes No
	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?
(If you Office	ı answer at Roon	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 _	9,	120/05 Signature ANIM Hover
		Print Name (18/11) (19/14)

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		<u>PRINT N</u>	AME CLEARLY
Agenda No. 29	Nam Addi		hech Washington #/ WI 53704
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
G	Referendum	Hardship Exemption	Repeating smoking ban
Support		· · · · · · · · · · · · · · · · · · ·	
Oppose			
Neither support nor oppose			
I wish to speak			<b>**</b>
Available for information only			
At this meeting are you representing an (If you answered "no," STOP; you need question.)  Name, address and telephone number of	ed not complete the	rest of this form. If you	answered "yes," go on to the next
Are you being paid for your representat	ion?		Yes No
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)			
Speaking Limit:	**************	4 minutes	

(See Back)

REGISTRANT # 34

Are yo		elected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No
(If you this for	answer m. If yo	red "yes" to the question, <b>STOP.</b> 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:	are bei	ing 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?  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?
(If you o Office o	answer ut Roon	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT N	AME CLEARLY
Agenda No. 29	Nam Addı	1571 006	Remnator FMOUTH 121
		MARASON	W 55+65
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	TOTOTOHOUM		
Oppose	*	×	*
Neither support nor oppose	<u> </u>		
I wish to speak	<b>X</b>	>	4
Available for information only			
Name, address and telephone number of	of each person or or	ganization you are repres	senting:
Are you being paid for your representa	tion?		☐ Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question)	r paid duties for thi ed not complete the	s person or organization? e rest of this form. If you	☐ Yes ► No answered "yes," go on to the next
Speaking Limit:	**************	4 minutes	
REGISTRANT # 91	(See	Back)	

governmental	body?
1 2 2	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, do you understand
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?
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?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NA	ME CLEARLY
Agenda No. 29	Nam Add	11163 00 1	HAKER WITHEN WAY
		MADISON,	WI 537-11
Please check the appropriate boxes:		•	
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
(If you answered "no," STOP; you need question)  Name, address and telephone number of			
Are you being paid for your representat	r paid duties for thi	s person or organization?	Yes No Yes No
(If you answered "no," STOP; you need question)	ed not complete the	4 minutes	isweren yes, go on to the next
Speaking Limit:	****************	4 IIIIIUUUU	
REGISTRANT # 40	(See	Back)	

Are you an elected official who is governmental body?	appearing solely	on behalf of your office	or for your mun	icipality or No	other
(If you answered "yes" to the questi this form. If you answered "no" to the			his form, except t	hat you mus	t sign
If you are being paid for your reprethat:	esentation, or if you	ir appearance is part of ot	her paid duties, d	o you unde	rstand
1 Before you engage in with the City Clerk?	n lobbying as a lob	byist, you or your principa	l must file an autl  Yes	norization No	-
2 Your principal is no with the City Clerk?	t permitted to auth	norize you to lobby unless	the principal is	registered No	
	rter), the principal	ore than \$500 for lobbying must file expense statemer ear?			
(If you answered "no" to any of the Office at Room 103 of the City-Coun			k at 266-4601 or	go to the C	lerk's
Date 9-20-05	Signature	Lympth			
	Print Name	Lynn	HALBE	50+.··	

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Addr	ess 124 Geor	GIANA CIR.
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	X	X	
Neither support nor oppose			
I wish to speak			<u>X</u>
Available for information only			
		ganization you are repres	enting: 10 SWV Mainson
MADISON, UI 5376			
ンルー 号 みして Are you being paid for your representation	on?		Yes No
Are you appearing as part of your other part of your other part of you answered "no," STOP; you need	paid duties for this I not complete the	s person or organization? rest of this form. If you o	Yes No No answered "yes," go on to the next
nuestion)			
Speaking Limit:	************	4 minutes	

governi		body? Yes No
		red "yes" to the question, <b>STOP.</b> 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	are beir	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?  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?
(If you o Office a	answere at Room	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name
		· ·

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		ININI	AME CLEARUI	
	Nam	e Bary	Poulson	
Agenda No. 29	Addı	ess 637	Charles Ln	
		20	Ism 53711	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose			<i>\\</i>	
Neither support nor oppose				
I wish to speak	V			
Available for information only				
name, address and telephone number of the electric force.	f each person or or	ganization you are repres	senting:	
Are you being paid for your representat  Are you appearing as part of your other  (If you answered "no," STOP; you nee question.)	paid duties for this	s person or organization? rest of this form. If you	Yes No Yes No answered "yes," go on to the ne	 ext
Speaking Limit:	•	4 minutes Back)		
<del>10-31</del>				

_	ou an e imental	body? Yes No
		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 that:	are bei	ing 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?  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?
(If you Office	answer at Roon	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addı	10-0	ndgren vmenter St. #205 on, W/ 53562
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	-		
Oppose			
Neither support nor oppose			
I wish to speak	1		
Available for information only			
Name, address and telephone number of Libertarian Party of Dana 2005 Orelaway Cross, 715-475-9104	e County	ganization you are represe	
Are you being paid for your representation	n?		Yes No
Are you appearing as part of your other p (If you answered "no," STOP; you need question)	aid duties for this not complete the	s person or organization? rest of this form. If you ar	Yes No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 42	(See	Back)	

-	ou an e imental	body?
		red "yes" to the question, <b>STOP.</b> 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 that:	are 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?  Yes No
	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?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		IMINI	AVIE CEEARUI
Agenda No. 29	Nam Addi	ST COVE	Muntilest on July 5320
Please check the appropriate boxes:			ANY STATES STATES AND ANY
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support			
Oppose	V	<u> </u>	
Neither support nor oppose			
I wish to speak	<u></u>	· ·	
Available for information only	<u>.</u> .		
At this meeting are you representing an of (If you answered "no," STOP; you need question.)  Name, address and telephone number of	l not complete the	rest of this form. If you d	inswered "yes," go on to the next
Are you being paid for your representation	on?		☐ Yes ☐ No
Are you appearing as part of your other p (If you answered "no," STOP; you need question)	paid duties for this not complete the	s person or organization? rest of this form. If you a	Yes No Inswered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
registrant # 96	(See	Back)	

Are you governm		ected official who is appearing solely on behalf of your office or for your municipality or other body?
(If you at	nswere If you	ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)
If you ar that:	re bein	g paid for your representation, or if your appearance is part of other paid duties, do you understand
1	L 10	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?
(If you ar Office at	nswere Room	ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date	1-2	Signature Charles Victoria Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		FRINTIN	AME CLEAKE!
	Nam	e Michael (	asperser
Agenda No. 29	Addr	ess 3418 Howe	Av.
· ·		ess 3418 Home Madison,	.5
		V(~X//88/1) *	V
Please check the appropriate boxes:			
			01005
	01880	01881	01985 Repealing smoking ban
G	Referendum	Hardship Exemption	X
Support			
Oppose  Neither support nor oppose	<u> </u>	<u> </u>	
I wish to speak			
Available for information only			
(If you answered "no," STOP; you need question.)  Name, address and telephone number of a Sports Pub			
Are you being paid for your representation	n?		☐ Yes   No
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)	aid duties for this not complete the	s person or organization? erest of this form. If you	Yes 💢 No answered "yes," go on to the next
Speaking Limit:	**************	4 minutes	
REGISTRANT # 43	(See	Back)	

		elected official who is appearing solely on behalf of your office or for your municipality or other lbody?
		ered "yes" to the question, <b>STOP.</b> 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 that:	are be	ing 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?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		A TELL 1	
	Name	PATRICIA	(GADOW)
Agenda No. 29	Addr	ess 3330 V	Vesture LN
		Madison	WI 53713
Please check the appropriate boxes:			
	01000	01001	01985
	01880 Referendum	01881 Hardship Exemption	Repealing smoking ban
Support	Referendum	Hardship Exemption	Repeating smoking ban
Oppose			Law .
Neither support nor oppose	<u> </u>		
I wish to speak	1-	<u> </u>	
Available for information only			
(If you answered "no," STOP; you need a question.)  Name, address and telephone number of e			
Are you being paid for your representation	1?		☐ Yes    No
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question.)	nid duties for this not complete the	s person or organization rest of this form. If you	Yes No answered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # <u>98</u>	(See	Back)	

Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?			
	red "yes" to the question, <b>STOP.</b> 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 beithat:	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?		
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?			
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		I I I I I I I	TIVELY CASE ALLE I
	Nam	e Michele 1	Nheeler
Agenda No. 29	Addı	ress 4781 Ve	mon Rd.
5	1.00	Madison, w	mon Rd of 53704
Please check the appropriate boxes:	<b>1</b>		
Tiouse enter the appropriate contest			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	<b>/</b>	✓ <b>/</b>	
Neither support nor oppose			
I wish to speak			
Available for information only			
(If you answered "no," STOP; you need question.)  Name, address and telephone number of			
Are you being paid for your representati			☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this d not complete the	s person or organization? rest of this form. If you o	☐ Yes ☐ No inswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 45	(See	Back)	

Are you an egovernmental	elected official who is appearing solely on behalf of your office or for your municipality or other 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 question.)			
If you are beithat:	ing 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?  Yes No			
<b>2</b>	Your principal is not permitted to authorize you to loubly 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?			
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)			
Date 9-2	OOF Signature Thillula			
	Print Name Michele Wheeler			

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		IKKIYI KU	
	Nam	e PATRICIA J	MILLER
Agenda No. 29	Addr	ess 2457 UPF	lam ST#2
. •		MADISON U	H EZMOU
		MADISON V	OF DO LOL
Please check the appropriate boxes:			
Flease check the appropriate boxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support		CIGAR BARS ONLY	
Oppose	X	×	X
Neither support nor oppose			
I wish to speak			*
Available for information only			· · · · · · · · · · · · · · · · · · ·
(If you answered "no," STOP; you need question.)  Name, address and telephone number of			
			· 
Are you being paid for your representati	on?		☐ Yes
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this d not complete the	s person or organization? rest of this form. If you a	☐ Yes ☑No enswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 39	(See	Back)	

Are you an elected official who governmental body?	is appearing solely on behalf of you	ur office or for your municipality or other  Yes No
	tion, <b>STOP.</b> You need not complete th the question, go on to the next questic	te rest of this form, except that you must sign on.)
If you are being paid for your reprishat:	resentation, or if your appearance is p	part of other paid duties, do you understand
1 Before you engage with the City Clerk	in lobbying as a lobbyist, you or your?	principal must file an authorization  Yes No
2. Your principal is n with the City Clerk	not permitted to authorize you to lob!?	by unless the principal is registered  Yes No
period (calendar qu	pends or will owe more than \$500 for narter), the principal must file expense ers of the calendar year?	• •
	e last three questions, please call the inty Building, Madison, for more infor	City Clerk at 266-4601 or go to the Clerk's mation.)
Date	Signature	
	Print Name	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NAME CLEARLY		
Agenda No. 29	Nam Addr		Doeppers 1472	
Please check the appropriate boxes:		Arlineton	Hershts, 4 60007	
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose	上			
Neither support nor oppose				
I wish to speak	$\perp$ $\times$	$X \rightarrow X$		
Available for information only		<u> </u>		
(If you answered "no," STOP; you need question.)  Name, address and telephone number of the property of the pr	f each person or or 69000000000000000000000000000000000000	ganization you are represed	enting:	
Speaking Limit:		4 minutes		
	(See	Back)		
REGISTRANT #				

Are you an ogovernmental	elected official who is appearing solely on behalf of your office or for your municipality or other lbody?				
	If you answered "yes" to the question, <b>STOP.</b> 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 question.)				
If you are be	sing 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?  Yes No				
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?				
(If you answe Office at Roor	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)				
Date <u> </u>					
	Print Name Agron Joseph )				

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT N	AVIE CLEARLI
	Nam	e JOANNE ST	EINBERG
Agenda No. 29	Addı	ess 427 FALCO	d Car
		MONONA W	-10-3:0
	J	<u> PIONONE</u> K	١١٠ (١١٥
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	X	X	· · · · · · · · · · · · · · · · · · ·
Neither support nor oppose	· .		5.
I wish to speak	<del></del>		X
Available for information only			
(If you answered "no," STOP; you need a question.)  Name, address and telephone number of e  MONERN SPECIALTY CO  4502 HEIGESEN ME  MADISON WI 53718			
Are you being paid for your representation	n?		☐ Yes No
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question.)	nid duties for this not complete the	s person or organization? rest of this form. If you o	Yes No answered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 52	(See	Back)	

Are you an government	elected official who is appearing solely on behalf of your office or for your municipality or other lal body?
	vered "yes" to the question, <b>STOP.</b> 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 b that:	being 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?
(If you answ Office at Ro	vered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nan Add	ress 1-117 EPKC	Borcharatt Leng
Agenua 170.	Auu	less [ 1/]	A part of the part
Disease shoot the convenients haves	<del></del>		
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	<u> </u>	<u></u>	·
Neither support nor oppose			
I wish to speak			
Available for information only			
If you answered "no," <b>STOP;</b> you ne uestion.)	ed not complete the	e rest of this form. If you ar	nswered "yes," go on to the i
If you answered "no," <b>STOP;</b> you ne uestion.)	ed not complete the	e rest of this form. If you ar	nswered "yes," go on to the i
If you answered "no," STOP; you nequestion.)  Name, address and telephone number	ed not complete the	e rest of this form. If you ar	nswered "yes," go on to the r
If you answered "no," STOP; you nequestion.)  Name, address and telephone number of the you being paid for your representative you appearing as part of your other lify you answered "no," STOP; you ne	of each person or	rest of this form. If you are represent the rest of this form. If you are represent the representation you are represent the representation?	nswered "yes," go on to the ring:
If you answered "no," STOP; you nequestion)  Name, address and telephone number of the control o	of each person or	rest of this form. If you are represent the rest of this form. If you are represent the rest of this form. If you are rest of this form. If you are	nswered "yes," go on to the ring:
At this meeting are you representing a (If you answered "no," STOP; you nequestion)  Name, address and telephone number of the you being paid for your representative answered "no," STOP; you neguestion)  Speaking Limit:	of each person or	rest of this form. If you are represent the rest of this form. If you are represent the rest of this form. If you are rest of this form. If you are	nswered "yes," go on to the r  nting:  Yes No

		elected official who is appearing solely on behalf of your office or for your municipality or other lbody?
		ered "yes" to the question, <b>STOP</b> . 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 that:	are be	ing 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?
		ared "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information)
Date _		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	None	e JANE KS	CANOSIOSONÍ
Agenda No. 29		ress 4314 REM	
	7 kdul		WI 53716
Please check the appropriate boxes:	<b>i</b>	•	
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	<b></b>		
Neither support nor oppose			
I wish to speak			
Available for information only			
Name, address and telephone number of	each person or or	ganization you are repres	enting:
Are you being paid for your representati	on?		Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for thi I not complete the	s person or organization? e rest of this form. If you o	Yes No inswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # _ 5 9	(See	Back)	

	*	n elected official who is appearing sole atal body?	y on behalf of your office of for your multiplication of Yes	No
		wered "yes" to the question, <b>STOP.</b> You r If you answered "no" to the question, go o	need not complete the rest of this form, except in to the next question.)	that you must sign
If you that:	ı are be	being paid for your representation, or if	your appearance is part of other paid duties, o	lo you understand
	1	Before you engage in lobbying as a l with the City Clerk?	obbyist, you or your principal must file an aut	horization No
	2.,	Your principal is not permitted to a with the City Clerk?	uthorize you to lobby unless the principal is	registered No
	3.		more than \$500 for lobbying services in any all must file expense statements with the City year?	
		wered "no" to any of the last three questi nom 103 of the City-County Building, Mad	ons, please call the City Clerk at 266-4601 or lison, for more information.)	go to the Clerk's
Date <sub>.</sub>	······	Signature Print Name		

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	ress 1927 Borra	Ryan wh Dr. wt 53597
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose	×	×	
Neither support nor oppose  I wish to speak  Available for information only	X	×	*
At this meeting are you representing an (If you answered "no," STOP; you nee question)  Name, address and telephone number of	d not complete the	e rest of this form If you a	nswered "yes," go on to the next
Are you being paid for your representat	ion?		Yes No
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	paid duties for this d not complete the	s person or organization?  rest of this form. If you are	☐ Yes ☑ No nswered "yes," go on to the next
Speaking Limit:	***************************************	4 minutes	
REGISTRANT # 67	(See	Back)	

Are you an ogovernmental	body?	ely on behalf of your office or for	your mun Yes	No No
	red "yes" to the question, <b>STOP</b> . You ou answered "no" to the question, go o		m, except t	hat you must sign
If you are beithat:	ing paid for your representation, or if	your appearance is part of other pai	d duties, d	o you understand
1.	Before you engage in lobbying as a with the City Clerk?	lobbyist, you or your principal must	file an autl	notization No
2.	Your principal is not permitted to a with the City Clerk?	authorize you to lobby unless the pr	rincipal is a	registered
3.	If your principal spends or will owe period (calendar quarter), the princip the remaining quarters of the calendar	oal must file expense statements wit		
	red "no" to any of the last three quest n 103 of the City-County Building, Ma		66-4601 or	go to the Clerk's
Date	Signature			
	Print Name			

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	Rich	Bennett
Agenda No. 29	Addı		Park ST
		MAD- W	Ŧ
Please check the appropriate boxes:	<del></del>		
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	RODOLOGICA		X
Oppose	×	$\sim$	
Neither support nor oppose			
I wish to speak			X
Available for information only			
(If you answered "no," STOP; you need question.)  Name, address and telephone number of	each person or or		
Are you being paid for your representation.  Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	oaid duties for thi	s person or organization? erest of this form. If you a	Yes No  Yes No nswered "yes," go on to the next
Speaking Limit:		4 minutes	\$
REGISTRANT # 76	(See	Back)	

Are you an egovernmental	blected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes  No			
	red "yes" to the question, <b>STOP.</b> 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 beithat:	ing 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?  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?			
(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	20-05 Signature Kirlan Burnett			
	Print Name <u>Kichard</u> Derrell			

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

PRINT NAME CLEARLY 29 Agenda No. Address Please check the appropriate boxes: 01880 01881 01985 Repealing smoking ban Referendum Hardship Exemption Support Oppose Neither support nor oppose I wish to speak  $\sim$ Available for information only 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," go on to the next question.) Name, address and telephone number of each person or organization you are representing: NITTY GRATE Yes Are you being paid for your representation? Are you appearing as part of your other paid duties for this person or organization? Yes (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 Limit: .....4 minutes (See Back)

REGISTRANT #\_12

Are you governme		body?	appearing solery	on behan or your	office of 10.	Yes	No No
		ed "yes" to the question u answered "no" to the				rm, except t	hat you must sign
If you are that:	e bein	ng paid for your represe	entation, or if yo	ur appearance is par	t of other pa	id duties, d	o you understand
1.		Before you engage in with the City Clerk?	lobbying as a lob	obyist, you or your p	rincipal mus	t file an autl	horization No
2.		Your principal is not with the City Clerk?	permitted to aut	horize you to lobby	unless the p	orincipal is	registered No
3.		If your principal spend period (calendar quart the remaining quarters	er), the principal	must file expense s	obbying serv tatements wi	rices in any ith the City	reporting Clerk for No
If you an Office at l	swere Room	ed "no" to any of the lo 103 of the City-County	ast three question  Building, Madis	ns, please call the Ci on, for more informa	ity Clerk at 2 ation)	266-4601 or	go to the Clerk's
Date	9.	20.05	Signature				
			Print Name	MARSH	OHA	MACU	

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Add	ress 1610 Anne	L Crest-Way S 3716
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose		×	*
Neither support nor oppose	×		
I wish to speak	1120		
Available for information only	0		
Name, address and telephone number of	each person or or	ganization you are represe	nting:
Are you being paid for your representati	on? -		☐ Yes
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for thi I not complete the	s person or organization? e rest of this form. If you as	Yes No nswered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
REGISTRANT # 75	(See	Back)	

		elected official who is appearing solely on behalf of your office or for your municipality or other lbody?  Yes No			
		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 that:	ı are be	ing 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?  Yes No			
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes No			
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?					
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 9-20-05 Signature July Gibson Print Name Lucy Gibson					
		Print Name Lucy Gibson			

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	_		1	
	Nam	e DAVID W	1GANDWEX9 26 AV	
Agenda No. 29	٨ 44.	and Ahe	al Ail	
Agenua 110.	Addi	less //E)/ PIDEI		
		MAdison	Wy 53904	
		•	The state of the s	
Please check the appropriate boxes:				
		01001	01005	
-	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support	<del> </del>			
Oppose	- V	V		
Neither support nor oppose				
I wish to speak		V		
Available for information only				
(If you answered "no," STOP; you need question.)  Name, address and telephone number of				
Are you being paid for your representation?  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.)				
question.				
Speaking Limit:	•••••	4 minutes		
	(See	Back)		
REGISTRANT # 77	(5000	<del>~~~</del>		

Are you an egovernmental	elected official who is appearing solely on behalf of y body?	your office or for your muni	icipality or other No
1 V 'F	red "yes" to the question, <b>STOP</b> . You need not complete ou answered "no" to the question, go on to the next question.		hat you must sign
If you are bei that:	ing paid for your representation, or if your appearance i	s part of other paid duties, do	you understand
1	Before you engage in lobbying as a lobbyist, you or yo with the City Clerk?	our principal must file an auth	norization No
2	Your principal is not permitted to authorize you to lowith the City Clerk?	obby unless the principal is n	registered No
3.	If your principal spends or will owe more than \$500 period (calendar quarter), the principal must file expert the remaining quarters of the calendar year?		
Office at Room	red "no" to any of the last three questions, please call the m 103 of the City-County Building, Madison, for more inf		go to the Clerk's
Date	Signature Flavor	(Wignows	κy

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

<u> </u>		1	A
	Nam	e Kathleen	A A Bodill
Agenda No. 29	Addı	ess Daa a M	clare Stuff
8	7100	055	Car Carel
		(INCO SEC)	1114 23 (1)7
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	X	X	
Neither support nor oppose			
I wish to speak			
Available for information only			
Name, address and telephone number of	each person or or	ganization you are represe	nting:
Are you being paid for your representati	on?		☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)			Yes No aswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT # 84	(See ]	Back)	

Are you an e governmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?			
	red "yes" to the question, <b>STOP</b> . 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, do you understand			
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?			
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?			
(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 <b>Dop</b>	+ 30,2005 Signature Kathleen A. Albertul			
	Print Name 41 1000 H. A. DOONT			

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	e TANYA R	ST ST
Please check the appropriate boxes:		÷	
·	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose Naither support not oppose	*	*	
Neither support nor oppose  I wish to speak  Available for information only			*
At this meeting are you representing an (If you answered "no," STOP; you need question.)  Name, address and telephone number of	ed not complete the	e rest of this form. If you a	nswered "yes," go on to the next
Are you being paid for your representat	tion?		☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," STOP; you need question)	paid duties for thi	s person or organization? erest of this form. If you a	Yes No No nswered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
DECISTRANT # 85	(See	Back)	

Are you an e governmental	lected official who is a body?	ppearing solely	on behalf of	your offic		Your muni	No No
	red "yes" to the question ou answered "no" to the				of this form	, except ti	hat you must sign
If you are beinthat:	ng paid for your represe	ntation, or if yo	ur appearance	is part of	other paid	duties, de	you understand
1	Before you engage in l with the City Clerk?	obbying as a lob	byist, you or	your princi	pal must fi	le an auth Yes	orization No
2.	Your principal is not p with the City Clerk?	permitted to auti	horize you to	lobby unle	ess the prin	ncipal is r	egistered No
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?							
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 20 SEPT 05 Signature Print Name TANYA ROBESH							

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Kristi	Gilmore
Agenda No. 29	Addı	ress 2621	Table St.
	7100	Madisa	on. Wi 53704
Please check the appropriate boxes:	-4		1
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	X	X	
Neither support nor oppose			
I wish to speak			*
Available for information only			<u></u>
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," 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?  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 Limit:	••••••••	4 minutes	
REGISTRANT # 93			

Are you an e governmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No			
	red "yes" to the question, <b>STOP</b> . 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 beinthat:	ing 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?  Yes No			
2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?			
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?				
(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 9-20-05 Signature Kristi L Gilmore  Print Name Kristi L Gilmore				

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Reit	<b>.</b>	
Agenda No. 29	Add	ress 1952	HEATL AW	
		MADIS	~ 53704	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose				
Neither support nor oppose			/A	
I wish to speak				
Available for information only				
Name, address and telephone number of e	ach person or or	ganization you are repres	enting:	
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 Limit:4 minutes				
REGISTRANT # O (See Back)				

Are you an elected official governmental body?	who is appearing solely on behalf of you	Yes No
	e question, <b>STOP.</b> You need not complete the no is to the question, go on to the next question.	he rest of this form, except that you must sign on.)
If you are being paid for you that:	ur representation, or if your appearance is	part of other paid duties, do you understand
1 Before you en with the City	ngage in lobbying as a lobbyist, you or you Clerk?	r principal must file an authorization Yes No
2. Your principa with the City	al is not permitted to authorize you to lob Clerk?	by unless the principal is registered Yes No
period (calend	ipal spends or will owe more than \$500 fo dar quarter), the principal must file expens g quarters of the calendar year?	or lobbying services in any reporting se statements with the City Clerk for Yes  No
	y of the last three questions, please call the ty-County Building, Madison, for more infor	City Clerk at 266-4601 or go to the Clerk's rmation.)
Date	Signature	
	Print Name	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		1 IUII VI	THE CHARLES	
	Nam		Cohen	
Agenda No. 29	Addı	ess 114 03	iark Trl	
		Madien		
		Maznas	TOWN DOTTE	
Please check the appropriate boxes:				
	01880	01881	01985	
G	Referendum	Hardship Exemption	Repealing smoking ban	
Support Oppose		1	and sed to	
Neither support nor oppose	OPP SON	Opposes	The salue	
I wish to speak		4 0	30W	
Available for information only				
and the second second	· .		lf: ☐ Yes ☐ No	
At this meeting are you representing an (If you answered "no," STOP; you need	i organization or a p ad not complete the	vest of this form. If you	answered "ves." go on to the next	
question.)	ea noi compiete inc	rest of this form if you	answered yes, go en te me men	
Name, address and telephone number of	f each person or or	ganization you are repres	senting:	
Are you being paid for your representat	tion?		☐ Yes ☐ No	
A	maid duting for this	margan ar arganization?	Yes No	
Are you appearing as part of your other (If you answered "no," STOP; you nee	paid duties for this ed not complete the	rest of this form. If you		
question.)	a nor compress me	, <del>, , , , , , , , , , , , , , , , , , </del>	<i>y</i>	
Speaking Limit:4 minutes				
	(See I	Back)		
REGISTRANT #				

		l body?
		ered "yes" to the question, <b>STOP</b> . 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 that:	are be	ing 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?  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?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	PRINT NAME CLEARI		
Agenda No. 29	Nam Addi	11-11	LLINZING SHORE ACRES R W. 5316
Please check the appropriate boxes:			•
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	X	X	
Neither support nor oppose			
I wish to speak			
Available for information only			
question.)  Name, address and telephone number of	each person or or	ganization you are represe	nting:
Are you being paid for your representation	on?		☐ Yes ☐ No
Are you appearing as part of your other of (If you answered "no," STOP; you need question.)	paid duties for this I not complete the	s person or organization? rest of this form. If you ar	Yes No No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT #	(See	Back)	

		elected official who is appearing solely on behalf of your office or for your municipality or other labody?
		ered "yes" to the question, <b>STOP.</b> 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 that:	are be	eing 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?
If you Office	u answe e at Roo	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date <sub>.</sub>		Signature
		Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Rita Klinz	ina	
Agenda No. 29	Add	ress 714 Interlak	e Dr.	
		Monona W	1 63716	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose	V			
Neither support nor oppose				
I wish to speak				
Available for information only				
Name, address and telephone number of	f each person or or	ganization you are represe	nting:	
Are you being paid for your representat	ion?		☐ Yes ☐ No	
Are you appearing as part of your other (If you answered "no," STOP; you nee question)	paid duties for thi d not complete the	s person or organization? erest of this form. If you ar	Yes No nswered "yes," go on to the next	
Speaking Limit:	•••••••	4 minutes		
REGISTRANT # (See Back)				
	the contract of the second of the second	the contract of the contract o	the property of the contract o	

		Pr	int Name		· · · · · · · · · · · · · · · · · · ·			
Date	·	Si <sub>1</sub>	gnature					
(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.)								
	3	If your principal spends or period (calendar quarter), the the remaining quarters of the	ne principal	must file expens				
	2	Your principal is not perm with the City Clerk?	itted to aut	horize you to lob	by unless the p	rincipal is	registered No	
	1	Before you engage in lobby with the City Clerk?	ring as a lol	obyist, you or you	r principal must	file an aut	horization  No	
If yo that:		eing paid for your representati	on, or if yo	our appearance is p	part of other par	id duties, d	o you unders	tand
this	form. If	vered "yes" to the question, <b>ST</b> you answered "no" to the ques	tion, go on	to the next questic	on.)			
	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other overnmental body?							

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Name Gary Poulson Address la37 Charles La				
	2 xdd	1000			
		- Madi			
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose	<b>'</b>		A STATE OF THE STA		
Neither support nor oppose					
I wish to speak	learning to the same of the sa				
Available for information only					
Name, address and telephone number of the following of th	and Com	ganization you are represe	nting:		
Are you being paid for your representati	ion?		☐ Yes No		
Are you appearing as part of your other paid duties for this person or organization? Yes You (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 Limit:		4 minutes			
REGISTRANT# 36	(See	Back)			

	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?					
(If you answered "yes" to the question, <b>STOP.</b> 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 question.)						
If you that:	are beir	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?  Yes No				
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?				
	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?					
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)				
Date		Signature				
		Print Name				

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Christine	Webber
Agenda No. 29	Addı	ress 210 N H	
-		Madiso	
	<b></b>		
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	χ	X	<u> </u>
Neither support nor oppose			
I wish to speak			<u> </u>
Available for information only			
question)  Name, address and telephone number of Amorical Coluctors	each person or or	rganization you are represe	nting: 1901/11ST CARCEN Chapter
Are you being paid for your representation	on?		☐ Yes ☐ No
Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	oaid duties for thi not complete the	s person or organization? e rest of this form. If you ar	Yes No nswered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
REGISTRANT # 35	(See	Back)	

	Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes X No						
	(If you answered "yes" to the question, <b>STOP.</b> 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 question.)						
If you that:	are beir	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?  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 _	10	Print Name Christine WOSS					
	Print Name Christing Wooles						

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

INITIALIZATION OF THE PROPERTY					
	Nam	e NANCY	WILD		
Agenda No. 29	Addı	ress 107 / 44	DETDE		
Agenda No.	Addi		W W 532/4		
		MAD/30	0 W 3020/		
Please check the appropriate boxes:					
	01000	01901	01985		
	01880	01881	Repealing smoking ban		
	Referendum	Hardship Exemption	Repeating smoking ball		
Support	3	i			
Oppose					
Neither support nor oppose					
I wish to speak  Available for information only					
Available for information only			1		
At this meeting are you representing an o (If you answered "no," STOP; you need question.)  Name, address and telephone number of or	not complete the	e rest of this form. If you a	inswered "yes," go on to the next		
Are you being paid for your representation	n?		☐ 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 Limit:4 minutes					
	(\$00)	Rack)			
REGISTRANT # (See Back)					

Are you an elected official who is governmental body?	s appearing solely on behalf of your offic	e or for your municipality or other  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 question.)						
If you are being paid for your reprethat:	esentation, or if your appearance is part of	other paid duties, do you understand				
Before you engage ir with the City Clerk?	n lobbying as a lobbyist, you or your princi	pal must file an authorization  Yes No				
2. Your principal is no with the City Clerk?	t permitted to authorize you to lobby unle	ss the principal is registered Yes No				
period (calendar quar	nds or will owe more than \$500 for lobby rter), the principal must file expense statents as of the calendar year?					
(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 9/50/05	Signature Mancy Last Print Name NANCY C	'ild				
	Print Name NANCT C	W145				

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NA	WIE CLEARL I	
	Nam	e RICHAROS	RUSSELL	
Agenda No. 29	Addı	ess 2552 KEND		
	71001		1 53705-3736	
		THANIOU IN	1 23/03-3/30	
Please check the appropriate boxes:				
1 lease cheek the appropriate boxes.				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose	<u> </u>	X	<u> </u>	
Neither support nor oppose				
I wish to speak	X			
Available for information only			·	
(If you answered "no," STOP; you need question.)  Name, address and telephone number of e				
Are you being paid for your representatio			Yes No	
Are you appearing as part of your other part (If you answered "no," STOP; you need question)	aid duties for this not complete the	s person or organization? e rest of this form. If you a	☐ Yes    No nswered "yes," go on to the next	
Speaking Limit:		4 minutes		
	(San	Dank)		
REGISTRANT # 31 (See Back)				

_		elected official who is appearing solely on behalf of your office or for your municipality or other lbody?				
		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 that:	are be	sing 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?				
		ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information)				
Date _	Date Signature					
		Print Name				

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam		DOMEY	
Agenda No. 29	Addr	ess 5713 Ku	AMME LAWE	
		MANISON	N 53716	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support			V	
Oppose	اسسا			
Neither support nor oppose				
I wish to speak				
Available for information only				
Name, address and telephone number of e  Coalition for  BARTENDER  South Bay Lux	ach person or or or or	ganization you are represe	nting:	
Are you being paid for your representation?				
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 Limit:		4 minutes		
REGISTRANT#	(See	Back)		

Are you ar	elected official who is appearing solely on behalf of your office or for your municipality or other tal body?					
	wered "yes" to the question, <b>STOP.</b> 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 t that:	being 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?					
	vered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's com 103 of the City-County Building, Madison, for more information.)					
Date	Signature					
	Print Name					

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	· Nate Al	tfeather	
Agenda No. 29	∆ đđ₁	ess /8 S. Or		
	Addi			
		Madison, b	JI 53715	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose		X		
Neither support nor oppose				
I wish to speak	$-\times$			
Available for information only				
Name, address and telephone number of e	each person or or	ganization you are represe	enting:	
Are you being paid for your representation	n?		☐ 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 Limit:	•••••	4 minutes		
REGISTRANT # _ 26 (See Back)				

	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
		red "yes" to the question, <b>STOP</b> . 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 that:	are bei	ing 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?  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?
(If you Office	answer at Roon	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

43

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam				
Agenda No. 29	Addı	ess $4709$ S	plint Rd.		
		Madison.	WI 53718		
		· Color of Day			
Please check the appropriate boxes:					
	01880	01881	01985		
and the state of t	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose	X	X	Υ		
Neither support nor oppose					
I wish to speak	Z Z	X	X		
Available for information only					
Name, address and telephone number of	each person or or	ganization you are represe	enting:		
Are you being paid for your representation	n?		☐ 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 Limit:		4 minutes			
REGISTRANT # 21	REGISTRANT # (See Back)				
· · · · · · · · · · · · · · · · · · ·					

governmental	body? Yes No
1 0 0	red "yes" to the question, <b>STOP.</b> 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 beithat:	ing 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?  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?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Ros	TONYAWATHA	
Agenda No. 29	Addı	ess 56/	2 TONYAWATAKA	
		Mari		
Please check the appropriate boxes:		•		
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose	X	<u> </u>		
Neither support nor oppose				
I wish to speak			X	
Available for information only				
Name, address and telephone number of	LANES	ganization you are repres	enting:	
	B C/.	1-11-130-1		
Are you being paid for your representation?				
Are you appearing as part of your other part (If you answered "no," STOP; you need question)	paid duties for this not complete the	s person or organization? e rest of this form. If you	Yes No answered "yes," go on to the next	
Speaking Limit:	••••••	4 minutes		
REGISTRANT #	(See	Back)		

	ou an o	body? Solution is appearing solely on behalf of your office or for your municipality or other \sum_{\text{Yes}} \sum_{\text{No}} \text{No}
		red "yes" to the question, <b>STOP.</b> 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 that:	are bei	ing 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?
,		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

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		<u>FRINI IV</u>	AVIE CLEARLI	
Agenda No. 29	Nam Addr		fister	
Agenda No.	Addi		15	
		Magish	W1 >345	
m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose	X	X	<u> </u>	
Neither support nor oppose				
I wish to speak	X	Х	X	
Available for information only			· · · · · · · · · · · · · · · · · · ·	
(If you answered "no," STOP; you need question.)  Name, address and telephone number of				
Are you being paid for your representation	on?		☐ Yes ☐ No	
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)	paid duties for this not complete the	s person or organization? rest of this form. If you a	Yes No No Inswered "yes," go on to the next	
Speaking Limit:	•••••	4 minutes		
REGISTRANT # 26				

		elected official who is a I body?	ppearing solely	on behalf of your office	or for your muni	icipality or other  No
		ered "yes" to the question, you answered "no" to the c		ed not complete the rest of to the next question)	this form, except to	hat you must sign
If you that:	are be	ing paid for your represen	ntation, or if yo	ur appearance is part of o	ther paid duties, de	you understand
	1	Before you engage in lowith the City Clerk?	obbying as a lot	obyist, you or your princip	al must file an auth	orization  No
	2.	Your principal is not p with the City Clerk?	ermitted to aut	horize you to lobby unles	s the principal is I	egistered No
	3		r), the principal	nore than \$500 for lobbying must file expense statemerear?		
				ns, please call the City Cle con, for more information.)		go to the Clerk's
Date _	<del>-</del> .		Signature			
			Print Name			

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		ININI	AME CLEAGOI	
Agenda No. 29		e Scott ess 1902 L	Buchs -ondendaring Dr. HDOS 53764	
Please check the appropriate boxes:				
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban	
Support Oppose			V	
Neither support nor oppose  I wish to speak  Available for information only	V			
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.)  Name, address and telephone number of each person or organization you are representing:				
Are you being paid for your representation	n?		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 Limit:		4 minutes		
REGISTRANT # (See Back)				

•	ou an el imental	lected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No
		red "yes" to the question, <b>STOP</b> . You need not complete the rest of this form, except that you must sign on answered "no" to the question, go on to the next question.)
If you that:	are beir	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?  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?
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		IKHI	NAME CLEARET		
	Nam	e Walter	Southwood		
Agenda No. 29	Addı	ress 4025	Mineral Point Rd		
	71001	Madisa	7 7709		
		1 (-01.)01			
Please check the appropriate boxes:					
		01001	01005		
	01880 Referendum	01881	01985 Repealing smoking ban		
Cumout	Referendum	Hardship Exemption	Repeating smoking can		
Support Oppose	<u> </u>				
Neither support nor oppose					
I wish to speak	·				
Available for information only					
- <del>-</del> 	(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," 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 representatio	n?		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 Limit:	•••••	4 minutes			
REGISTRANT # (See Back)					

Are you an governmenta	elected official who is appearing solely on behalf of your office or for your municipality or other laborated labora
	ered "yes" to the question, <b>STOP.</b> 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, do you understand
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?
	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29		Name Joelle Parks Address 601 N. Henry Madison, Wi 53783			
Please check the appropriate boxes:					
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban		
Support					
Oppose	<u> </u>	X			
Neither support nor oppose	· · · · · · · · · · · · · · · · · · ·				
I wish to speak			*		
Available for information only			1.0		
name, address and telephone number of	of each person or	rganization you are represe	enting:		
Are you being paid for your representat	tion?		☐ Yes 💢 No		
Are you appearing as part of your other (If you answered "no," STOP; you need question)	rpaid duties for thi	s person or organization? e rest of this form. If you a	Yes No No enswered "yes," go on to the next		
Speaking Limit:	******************	4 minutes			
REGISTRANT # _ 3	(See	Back)			

		al body?  Lefected official who is appearing solely on behalf of your office or for your municipanty or other labour.  Yes No
		vered "yes" to the question, <b>STOP</b> . 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 yo that:		eing 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?  Yes No
	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?
		ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information)
Date	9/0	20/15 Signature Print Name  Signature Print Name  Signature Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Add		una brive WI 537/1
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support			
Oppose	<u> </u>	<u> </u>	X
Neither support nor oppose			
I wish to speak  Available for information only			
Name, address and telephone number of	each person or or	ganization you are represe	nting:
Are you being paid for your representati	on?		☐ Yes
Are you appearing as part of your other to (If you answered "no," STOP; you need question.)	paid duties for this	s person or organization? rest of this form. If you ar	Yes No No nswered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
REGISTRANT # 56	(See	Back)	

Are you an governmenta		on behalf of your office or for your municipality or other  Yes No
( ) )	ered "yes" to the question, <b>STOP.</b> You ne you answered "no" to the question, go on	to the next question)
If you are be that:	ing paid for your representation, or if yo	our appearance is part of other paid duties, do you understand
1	Before you engage in lobbying as a low with the City Clerk?	bbyist, you or your principal must file an authorization  Yes No
2	Your principal is not permitted to aut with the City Clerk?	thorize you to lobby unless the principal is registered Yes No
3.		nore than \$500 for lobbying services in any reporting I must file expense statements with the City Clerk for year?
	red "no" to any of the last three question 103 of the City-County Building, Madis	ns, please call the City Clerk at 266-4601 or go to the Clerk's son, for more information.)
Date	Signature	
	Print Name	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Danwell ress 615 Lat	Link_	
Agenda No. 29	Adda	ress 615 6	To sto me	12-
rigorium (10)	Addi	(COS	in the second	1. 0.
		BREVER	1 May	<i>9</i>
Please check the appropriate boxes:				
	01880	01881	0198	35
	Referendum	Hardship Exemption	Repealing sn	noking ban
Support				
Oppose				
Neither support not oppose				
I wish to speak	2	-	- Comment	
Available for information only				
Name, address and telephone number of	each person or or	ganization you are represe	enting:	
Are you being paid for your representation	on?		☐ Yes	X No
Are you appearing as part of your other part (If you answered "no," STOP; you need question)	paid duties for thi I not complete the	s person or organization? erest of this form. If you a	☐ Yes inswered "yes," g	No o on to the next
Speaking Limit:	****************	4 minutes		
REGISTRANT #	(See	Back)		

Are you as governmen	elected official who is appearing solely on behalf of your office or for your municipality or other al body?
	vered "yes" to the question, <b>STOP</b> . 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 l that:	eing 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?
	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

ì...

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Adam Be	nedetto	
Agenda No. 29	Addr	ess 705 5.	Dirkinson St	
			v w 53703	
	J		0 00 23703	
Please check the appropriate boxes:				
The second secon				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support		<u></u>		
Oppose	<u>×</u>	X	×	
Neither support nor oppose				
I wish to speak			<u> </u>	
Available for information only	1.0.4.4			
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," 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	n?		☐ 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 Limit:	••••••	4 minutes		
REGISTRANT # 25 (See Back)				

	•				
Are you as		is appearing solely o	n behalf of your office o	or for your muni	cipality or other No
	wered "yes" to the ques fyou answered "no" to		not complete the rest of th the next question.)	is form, except th	hat you must sign
If you are that:	being paid for your rep	resentation, or if your	appearance is part of other	er paid duties, do	you understand
1	Before you engage with the City Clerk		yist, you or your principal	must file an auth	orization No
2.	Your principal is n with the City Clerk	-	rize you to lobby unless t	the principal is r	egistered No
3.	period (calendar qu		re than \$500 for lobbying nust file expense statement or?		
			please call the City Clerk , for more information.)	at 266-4601 or §	go to the Clerk's
Date		Signature _			
		Print Name _			1000.7

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

•		I IXII Y I I I I	WIE CLEAKET
Agenda No. 29	Nam Add	ress 1817 Car	penter St
Please check the appropriate boxes:		TI NEW STREET	V was and V of
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose	×		
Neither support nor oppose I wish to speak			X
Available for information only		1	
question.)  Name, address and telephone number of	each person or or	ganization you are represe	nting:
Are you being paid for your representation	on?		☐ Yes 💆 No
Are you appearing as part of your other part (If you answered "no," STOP; you need question)			
Speaking Limit:	***************************************	4 minutes	
REGISTRANT# 74	(See ]	Back)	

Are you governm		ected official who is ap pody?	pearing solely	on behalf of	your office or fo	r your mun ☐ Yes	icipality or other No
		ed "yes" to the question, u answered "no" to the q				orm, except t	hat you must sign
If you ar that:	re bein	g paid for your represen	tation, or if you	ur appearance i	is part of other pa	aid duties, d	o you understand
1	<b>.</b> d	Before you engage in lowith the City Clerk?	bbying as a lob	byist, you or yo	our principal mus	st file an autl	norization  No
2	<b>.</b> •••	Your principal is not pewith the City Clerk?	ermitted to autl	norize you to le	obby unless the	principal is a	registered No
3	i.	If your principal spends period (calendar quarter the remaining quarters o	), the principal	must file expe	for lobbying serv nse statements w	vices in any ith the City Yes	reporting Clerk for No
(If you ar Office at	nswere Room	ed "no" to any of the last 103 of the City-County E	t three question Building, Ma <del>di</del> s	s, please call to on, for more inj	he City Clerk at 2 formation)	266-4601 or )	go to the Clerk's
Date	7.5	20-05	Signature Print Name	Sale	elno Ag	A KAV	AMARK

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	PRINT NAME CLEARLY			
	Nam	e LUKE W	ITKOWSKI	
Agenda No. 29	Adda	ess 9117 WAT	ERSIDE #207	
	, l			
		INTODUETOR	WI 53562	
Please check the appropriate boxes:				
	01000	01881	01985	
	01880	I .	Repealing smoking ban	
	Referendum	Hardship Exemption	Repeating smoking ban	
Support		×	N	
Oppose	X			
Neither support nor oppose			×	
I wish to speak  Available for information only				
Available for information only				
At this meeting are you representing an (If you answered "no," STOP; you nee question.)  Name, address and telephone number of	ed not complete the	e rest of this form. If you d	inswerea yes, go on to the next	
Are you being paid for your representat	ion?		Yes No	
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	paid duties for this ed not complete the	s person or organization? erest of this form. If you a	Yes No No Inswered "yes," go on to the next	
Speaking Limit:		4 minutes		
REGISTRANT # 95	(See	Back)		

Are you a	elected official who is appearing solely on behalf of your office or for al body?	your municipality or other Yes No				
	ered "yes" to the question, <b>STOP.</b> You need not complete the rest of this for you answered "no" to the question, go on to the next question)	rm, except that you must sign				
If you are that:	eing paid for your representation, or if your appearance is part of other pa	id duties, do you understand				
1	Before you engage in lobbying as a lobbyist, you or your principal must with the City Clerk?	file an authorization  Yes No				
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 service period (calendar quarter), the principal must file expense statements with the remaining quarters of the calendar year?					
	ered "no" to any of the last three questions, please call the City Clerk at 200m 103 of the City-County Building, Madison, for more information.)	66-4601 or go to the Clerk's				
Date	Signature	<u> </u>				
	Print Name					

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		I KUNT INF	WIE CLEAKET	
Agenda No. 29	Nam Addı	2021	hite Jon St Apt 205 wi 53708	
Please check the appropriate boxes:				
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban	
Support Oppose	×	X	×	
Neither support nor oppose I wish to speak Available for information only			×	
At this meeting are you representing an o (If you answered "no," STOP; you need question.)  Name, address and telephone number of e	not complete the	rest of this form. If you a	inswered "yes," go on to the next	
Are you being paid for your representation	n?		☐ Yes	
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)	aid duties for this not complete the	s person or organization? rest of this form. If you a	Yes No nswered "yes," go on to the next	
Speaking Limit:	***********	4 minutes		
REGISTRANT # 29 (See Back)				

	<i>*</i>	l body?
		ered "yes" to the question, <b>STOP</b> . 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 that:	are b	eing 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?
	<b>2</b> ,,	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?
		ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date <sub>.</sub>		Signature
		Print Name

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29		Name Johnny Kawanaugh Address 4110 CARBERRY 54			
		MADISON,	A \$3704		
Please check the appropriate boxes:	· .		<i>)</i>		
· ·	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose		e e			
Neither support nor oppose					
I wish to speak					
Available for information only					
Are you being paid for your representati	ion?		☐ Yes ⚠ No		
Are you appearing as part of your other (If you answered "no," STOP; you need question.)			Yes No nswered "yes," go on to the next		
Speaking Limit:	*****************	4 minutes	N. Committee of the Com		
	(See 1	Back)			
REGISTRANT #					
		<b>REGIS</b> '	TRANT#		

	ou an nmenta		o is appearing solely on behalf of your office or for your in Your Young	
			estion, <b>STOP</b> . You need not complete the rest of this form, exceed the question, go on to the next question.)	ept that you must sign
If you that:	ı are be	ing paid for your re	presentation, or if your appearance is part of other paid dutie	es, do you understand
	1.,	Before you engag with the City Cler	e in lobbying as a lobbyist, you or your principal must file an k?	
	2	Your principal is with the City Cler	not permitted to authorize you to lobby unless the principal k?	
	3.	period (calendar o	spends or will owe more than \$500 for lobbying services in quarter), the principal must file expense statements with the orters of the calendar year?	City Clerk for
			the last three questions, please call the City Clerk at 266-460 munty Building, Madison, for more information.)	l or go to the Clerk's
Date <sub>.</sub>			Signature	
			Print Name	
			•	
			***************************************	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	Name PAUL O'LEANY Address 113 4 E. MIEELIN ST			
Agenda No. 29	Add	ress $1134E$	MILLIN ST		
		11.015.01	53703		
		14AD15010			
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support	T T T T T T T T T T T T T T T T T T T				
Oppose		×			
Neither support nor oppose					
I wish to speak					
Available for information only					
Are you being paid for your representat	ion?		Yes No		
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	paid duties for this d not complete the	s person or organization? rest of this form. If you ar	☐ Yes ☐ No nswered "yes," go on to the next		
Speaking Limit:	*****************	4 minutes			
	(See	Back)			
REGISTRANT #	`	,			
		RECIC	TRANT #		

-		elected official who is appearing solely on behalf of your office or for your municipality or other body?   Yes No
		red "yes" to the question, <b>STOP</b> . 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 that:	are be	ing 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?  Yes No
	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?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name
		•

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		415	
↑ <del>↑</del>	Nam	e Allen Rale	V
Agenda No. 29	Addı	ess 247 Hell	over Town IN #11
	Addi	11 /2.	
		madisons	112 53417
Please check the appropriate boxes:			
rease eneck the appropriate toxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support		,	
Oppose		X	
Neither support nor oppose			
I wish to speak			
Available for information only			,
Name, address and telephone number	Si cacii person oi oi	gainization you are typics.	the med 4504
		<del> </del>	
Are you being paid for your representa	tion?		☐ Yes No
Are you appearing as part of your othe (If you answered "no," STOP; you ne question.)			Yes No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
	(See	Back)	
REGISTRANT #	(500)		
	<b>.</b>		
		<b>REGIS</b>	TRANT#

	ou an el nmental l		appearing solely	on behalf of your office	or for your mun	icipality or other
		ed "yes" to the questio u answered "no" to th		ed not complete the rest of to the next question)	this form, except t	hat you must sign
If you that:	are beir	ng paid for your repres	sentation, or if yo	our appearance is part of or	ther paid duties, d	o you understand
	1.	Before you engage in with the City Clerk?	lobbying as a lol	obyist, you or your principa	al must file an aut	horization ₄⊠No
	2.	Your principal is not with the City Clerk?	permitted to aut	horize you to lobby unless	s the principal is	registered No
	3.	, , , ,	ter), the principal	nore than \$500 for lobbying must file expense statemer year?		- <del>-</del>
				ns, please call the City Cle son, for more information.)		go to the Clerk's
Date _	9/2	0/05	Signature Print Name	Men Ba		

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Nam	e Elizabeth	1 Sanger
Addı	ess 143 w. Gi	nen 4 m/00
	Madison.	w)7 53703
	7,000	# 3 ·
1 01000	01001	01005
1	1	01985 Repealing smoking ban
Referendum	Hardship Exemption	Repeating smoking ban
<del>                                     </del>		~
<u> </u>	<del>                                     </del>	
on?		☐ Yes No
paid duties for this I not complete the	s person or organization? rest of this form. If you ar	Yes No nswered "yes," go on to the next
••••••	4 minutes	
(See	4 minutes	
	01880 Referendum    State     Office     Referendum     State     Office     Office	Referendum Hardship Exemption    W Sub KE-FREE MASS of organization or a person other than yourself: I not complete the rest of this form. If you are represented to the person or organization you are represented to the person of the person or organization you are represented to the person or organization you are represented to the person of the person or organization you are represented to the person of the person or organization you are represented to the person or organization you are represented to the person of the person or organization you are represented to the person of the person or organization you are represented to the person or organization you are represented to the person or organization you are represented to the person of the person of the person or organization you are represented to the person of the person or organization you are represented to the person of the

	ou an e nmental	lected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No
		ed "yes" to the question, <b>STOP</b> . 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 that:	are bein	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?  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
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's a 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name
	ं सक्त अपने अपने सम्बद्धाः	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		A AGEINA IN	THE CEERGET	
Agenda No. 29	Name Hather fin floedyl Address 2838 Moland St. 2818 Molloon, wit S3704			
Please check the appropriate boxes:				
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban	
Support			X	
Oppose		~		
Neither support nor oppose				
I wish to speak				
Available for information only			···	
Available for information only		<u> </u>		
Name, address and telephone number of the following paid for your representation.  Are you being paid for your representation.  Are you appearing as part of your other part (If you answered "no," STOP; you need to be a support of your need to be a support of your other part of your answered "no," STOP; you need to be a support of your need to be a support of your other part of your answered "no," STOP; you need to be a support of your need to be a support of your other part of your need to be a support o	on?	s person or organization?	Yes No	
question)  Speaking Limit:	•	4 minutes		
Speaking Limit:		4 minutes		
REGISTRANT #		Back)		
			ΓRANT #	

Are you an e governmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
	red "yes" to the question, <b>STOP</b> . 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 being that:	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?  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?
	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date So	Print Name Hathleen A. Albedyff
÷	
	****** ********************************

## City of Madison **Registration Statement - Common Council**

You must register before the Council considers your item.

**REGISTRANT** #

		PRINT NA	
	Nam	e Eleen th	10 m ps on
Agenda No. 29	Adđ	ress 311 Cam	obell St
		Madican	W1 53711
		1 break . m.	<b>▲▲</b> 6 # # # # # # # # # # # # # # # # # #
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	Referendam	Traidsinp Exemption	Repeating smoking ban
Oppose			
Neither support nor oppose		•	
I wish to speak			· · · · · · · · · · · · · · · · · · ·
Available for information only			
Name, address and telephone number	of each person or or	ganization you are represe	nting:
Name, address and telephone number  Friends Preschoe  Self - Edimer Publi	el - hon e Health No	ganization you are represe  -profrit at ho a	nting: ne mom group. Currently have
Seff - Former Publicastuma and	e Health No a child wif	ganization you are represe	nting: ne mom group. Currentum have
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Seff - Former Publicastions as part of your other you answered "no," STOP; you need to be setting the setting of the setting as part of your other you answered "no," STOP; you need to be setting the setting of your other you answered "no," STOP; you need to be setting the setting of your other you answered "no," STOP; you need to be setting the setting	e Health Mo a Child wife ation? or paid duties for this ared not complete the	ganization you are represedult for the art house of the Athlets of the person or organization?  rest of this form. If you are  4 minutes	nting:  Me Morn Grosp.  Currently have  Jould enjoy going  Yes Tho  Yes Tho  aswered "yes," go on to the next
same, address and telephone number  Frences Proschool  Self - Former Public  re you being paid for your representative you appearing as part of your other you answered "no," STOP; you nevertion)  peaking Limit:	e Health Mo a Child wife ation? or paid duties for this ared not complete the	ganization you are represedult for the art house of the Athlets of the person or organization?  rest of this form. If you are  4 minutes	nting:  Me Morn Grosp.  Currently have  Jould enjoy going  Yes Tho  Yes Tho  aswered "yes," go on to the next
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self - Former folding as part of your other you answered "no," STOP; you need to be selected.	e Health Mo a Child wife ation? or paid duties for this ared not complete the	ganization you are represedult for the art house of the Athlets of the person or organization?  rest of this form. If you are  4 minutes	nting:  Me Morn Grosp.  Currently have  Jould enjoy going  Yes Tho  Yes Tho  aswered "yes," go on to the next
Self - Former folds  astronome and control of the series o	e Health Mo a Child wife ation? or paid duties for this ared not complete the	ganization you are represedult for the art house of the Athlets of the person or organization?  rest of this form. If you are  4 minutes	nting:  ne mon group.  Currently have  Jould enilog go.  Yes Tho

	ou an o	elected official who is a body?	appearing solely	on behalf of ye	our office or fo	or your mun	icipality or other  No
		red "yes" to the question ou answered "no" to the				orm, except t	hat you must sign
If you that:	are be	ing paid for your represe	entation, or if you	ur appearance is	part of other p	aid duties, d	o you understand
	1	Before you engage in I with the City Clerk?	obbying as a lob	byist, you or you	ır principal mus	st file an auth	norization No
	2	Your principal is not pwith the City Clerk?	permitted to auth	norize you to lol	oby unless the	principal is i	registered No
	3	If your principal spend period (calendar quarters the remaining quarters	er), the principal	must file expens			
(If you Office	i answe at Rooi	red "no" to any of the la n 103 of the City-County	ast three question Building, Madis	s, please call the on, for more info	e City Clerk at I rmation)	266-4601 or	go to the Clerk's
Date _		AND	Signature				and the second s
			Print Name				
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e NICK ANDE	JACCHI
Agenda No. 29	Addı		anklin St
	Addi		
		1vladisan,	WI 33703
Please check the appropriate boxes:			
	01880	01881	01985
·	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	and the second	×	
Neither support nor oppose			
I wish to speak			
Available for information only			
	-		
Are you being paid for your representat	tion?		Yes No
Are you appearing as part of your other (If you answered "no," STOP; you nee question)			Yes No No swered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
	(See I	Back)	
	(500)		
REGISTRANT #		,	
REGISTRANT #			

	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No
(If you this fo	ı answei 1m. If yo	red "yes" to the question, <b>STOP.</b> 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 that:	are 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?  Yes No
	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?
(If you Office	answer at Roon	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

**REGISTRANT #** 

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

			AME CLEARLY
Agenda No. 29	Nam Addi		Uphan St.
Please check the appropriate boxes:		10 10 W. 20.	, 62 33 704
	01880	01881	01985
Support	Referendum	Hardship Exemption	Repealing smoking ban
Support Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
Name, address and telephone number of	each person or or	ganization you are repres	enting:
Are you being paid for your representation	on?		Yes No
Are you appearing as part of your other p (If you answered "no," STOP; you need question.)	aid duties for this not complete the	person or organization? rest of this form. If you a	Yes No Inswered "yes," go on to the next
Speaking Limit:	*****************	4 minutes	
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REGISTRANT #			

Are yo		lected official who is appearing solely on behalf of your office or for your municipality or other body?
		ed "yes" to the question, <b>STOP.</b> 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	are beii	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?
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name
****		

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		A. A. C.	
	Nam	e Joan BRAU	
Agenda No. 29	A 4.4	ress 702 Schille Madizon	of G.
	Aud	1000 (1)22 -0717/10	-76(1
		_Madison	WI 53704
		4	
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	Referendum	Traidship Exchiption	Repeating smoking can
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			
At this meeting are you representing ar			Yes X No
Are you being paid for your representa	tion?		☐ Yes
Are you appearing as part of your other (If you answered "no," STOP, you need question.)			Yes
Speaking Limit:	•••••	4 minutes	
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	ou an e nmental		appearing solely	on behalf of your offic	e or for your municipality or other  Yes No
		red "yes" to the question ou answered "no" to the			f this form, except that you must sign
If you that:	are bei	ng paid for your repres	entation, or if yo	ur appearance is part of	other paid duties, do you understand
	1	Before you engage in with the City Clerk?	lobbying as a lob	obyist, you or your princi	oal must file an authorization  Yes No
	2	Your principal is not with the City Clerk?	permitted to aut	horize you to lobby unle	ss the principal is registered Yes No
	3.	7 1 1 1	er), the principal	must file expense staten	ng services in any reporting tents with the City Clerk for Yes No
				ns, please call the City Cl con, for more information	erk at 266-4601 or go to the Clerk's )
Date _	9/2	0105	Signature	Joen Brace	National
			Print Name	Joan BRADI	16
			********		
			<b></b>	<b>_</b>	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	ie Jim Lo	CHUN
Agenda No. 29	Δđđ	ress 317 Stc	
	Addi		1 WIF 53703
		-	
Please check the appropriate boxes:		Irish Y	26/Lose Lounge
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			*
Oppose		1	
Neither support nor oppose			·
I wish to speak			
Available for information only			
Are you being paid for your representa	tion?		☐ Yes 📈 No
Are you being paid for your representa	HOII:		
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	r paid duties for this ed not complete the	s person or organization? e rest of this form. If you o	Yes No answered "yes," go on to the next
Speaking Limit:	******************	4 minutes	
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	ou an e ımental	lected official who is a body?	ppearing solely	on behalf of	your office or	f for your munic	cipality or other No
		ed "yes" to the question, ou answered "no" to the				is form, except th	at you must sign
If you that:	are bei	ng paid for your represen	ntation, or if you	ir appearance	is part of othe	r paid duties, do	you understand
	1.	Before you engage in lowith the City Clerk?	obbying as a lob	byist, you or y	our principal i	must file an autho	orization No
	2.	Your principal is not p with the City Clerk?	ermitted to auth	orize you to	lobby unless the	he principal is re	egistered No
	3	If your principal spends period (calendar quarter the remaining quarters of	r), the principal	must file expe			
(If you Office	answer at Room	ed "no" to any of the las i 103 of the City-County I	st three question Building, Madiso	s, please call on, for more ir	the City Clerk formation.)	at 266-4601 or g	to the Clerk's
Date _	9/.	20/25	Signature Print Name	GAN	TES LE	SETHEN	
		. \$	·				
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addı	ess 340 Wo	on wit 5378
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose	*	X	
Neither support nor oppose  I wish to speak  Available for information only		,	
(If you answered "no," STOP; you need question.)  Name, address and telephone number of Are you being paid for your representation.  Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	each person or or or on?	ganization you are represe	Pring:  ☐ Yes No ☐ Yes No
Speaking Limit:	***************************************	4 minutes	
REGISTRANT #	(See ]	Back)	
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	ou an ei imental	lected official who is a body?	ppearing solel	y on behalf	of your offic	ce or for	your muni ∐ Yes	icipality or other No
		ed "yes" to the question, u answered "no" to the				of this forn	n, except ti	hat you must sign
If you that:	are beir	ng paid for your represen	ntation, or if y	our appearan	ce is part of	other paid	l duties, de	you understand
	1.	Before you engage in lowith the City Clerk?	obbying as a le	obbyist, you o	r your princi	ipal must f	ile an auth	orization No
	2.	Your principal is not p with the City Clerk?	ermitted to au	ithorize you t	o lobby unle	ess the pri	ncipal is t	egistered 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?			Clerk for			
(If you Office	answer at Room	ed "no" to any of the la 103 of the City-County	st three questi Building, Mad	ons, please ca ison, for more	ll the City C information	lerk at 26( )	5-4601 or	go to the Clerk's
Date _	Q-b	0-05	Signature Print Name	Dor	ina.	to	140	
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	ne Jessicoa N	leitzel.
Agenda No. 29	Add	ress 1910 E. Wa	shing ton Ave.
·		Madison, W	I 53704
		· ·	
Please check the appropriate boxes:	•	LAUK	LOUNGE
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	X	X	
Neither support nor oppose		<u> </u>	
I wish to speak			
Available for information only			
LAVA Louige (608 461 W. Gilman Madison, WF	) (051-516		
Are you being paid for your representation	on?		Yes 🔀 No
Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	paid duties for thi	s person or organization? e rest of this form. If you o	Yes XNo answered "yes," go on to the next
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		elected official who is all body?	s appearing sole	ly on behalf of you	ir office or for		ipality or other No
		ered "yes" to the quest you answered "no" to t				ı, except the	at you must sign
If you that:	are be	eing paid for your repre	esentation, or if y	your appearance is p	part of other paid	duties, do	you understand
	1	Before you engage i with the City Clerk?		obbyist, you or you	principal must f	ile an autho ∐ Yes	nization ☐ No
	2	Your principal is no with the City Clerk?	-	uthorize you to lob	by unless the pri	ncipal is re	gistered No
	3	If your principal spe period (calendar qua the remaining quarte	rter), the princip	al must file expense			
		ered "no" to any of the om 103 of the City-Coun				5-4601 or ge	o to the Clerk's
Date _	9/	20/05	Signature Print Name	Jessica	Ne: + re	F-1.	
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	10.0	MAIN ST #1 ) WE 53704
Please check the appropriate boxes:			
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose	X	X	×
Neither support nor oppose  I wish to speak			
Available for information only			
	2		☐ Yes ☐ No
Are you being paid for your representation.  Are you appearing as part of your other part (If you answered "no," STOP; you need question.)	aid duties for this	s person or organization? rest of this form. If you ar	Yes No
Speaking Limit:	••••	4 minutes	
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.,		elected official who is appearing solely on behalf of your office or for your municipality or other laborated labora
		ered "yes" to the question, <b>STOP</b> . 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 that:	are be	eing 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?
	<sup>1</sup> 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?
		ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date <sub>.</sub>		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NA	AME CLEARLY
Agenda No. 29	Nam Addı	02/1/12	3/00 NLD. WI 53714
Please check the appropriate boxes:		• / •	
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support			
Oppose	1	V	
Neither support nor oppose	-		- in the state of
I wish to speak	-		
Available for information only			
Name, address and telephone number of e		ganization you are represe	
Are you being paid for your representation	n?		☐ Yes ☐ No
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question)			Yes No No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
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•	ou an e imental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
		red "yes" to the question, <b>STOP</b> . 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 that:	are bei	ing 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?  Yes No
	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?
		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.)
		の記述 シー・
Date _		Signature
		Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Add		WELDER  TRANSTOR
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Please check the appropriate boxes:			•
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	TOTOLOGICAL TOTOLOGICA	Transcomp Enterprise	
Oppose	<u> </u>		
Neither support nor oppose			
I wish to speak			
Available for information only			
Are you being paid for your representation?			Yes No
Are you appearing as part of your other (If you answered "no," STOP; you need question)			Yes No nswered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
	(See ]	Back)	
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	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No
		red "yes" to the question, <b>STOP.</b> 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 that:	are 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?  Yes No
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes No
п	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?
		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _	10-12	Signature
		Print Name