

Date: 10/19/11

# City of Madison Registration Statement – Alcohol License Review Committee

*You must register before the ALRC considers your item.*

PLEASE PRINT CLEARLY

Agenda No. <u>15</u> Required – Can be obtained from agenda on registration table.
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Name Amanda Ney  
 Address 1814 Madison St.  
Madison, WI 53711

Please check the appropriate boxes:

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

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

At this meeting are you representing an organization or a person other than yourself:  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:

Health First WI  
401 Wisconsin Ave  
268-2620

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  Yes  No  
*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)*

Speaking Limits: Public Hearing.....5 minutes  
 Information Hearing.....5 minutes  
 Other Items.....3 minutes

(See Back)

Registration Statement - Page 2

Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

*(If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)*

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

1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Yes  No
2. Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes  No
3. If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?  Yes  No

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

Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

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--

Name Paul Krupski  
 Address 802 Bowman Avenue  
Madison, WI

Please check the appropriate boxes:

**Support**  
 Wish to speak  
 Do not wish to speak  
 Available to answer questions

**Oppose**  
 Wish to speak  
 Do not wish to speak  
 Available to answer questions

At this meeting are you representing an organization or a person other than yourself:  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:

Health First Wisconsin  
401 Wisconsin Ave.  
Madison, WI 53703

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.)*

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Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_



For more information contact:  
Maureen Busalacchi, DCCRAA Facilitator, 608.268.2620

October 19, 2011

## **Dane County Coalition to Reduce Alcohol Abuse Position Statement on Agenda Item 15.**

The Dane County Coalition to Reduce Alcohol Abuse supports the Alcohol License Review Committee regarding agenda item 15, the Liquor License Guidelines. The Coalition strongly supports limiting access to and availability of alcohol at all of the establishments referenced in the drafted guidelines. We believe that this is a positive and beneficial step taken by the ALRC to better the alcohol beverage licensing process.

In the future, the Coalition would ask that the ALRC revisit the guidelines and consider adopting the guidelines into an ordinance to ensure that a new health standard is upheld for current as well as future generations. Not only will our communities be safer and healthier, ordinances would benefit the City and this committee in the form of time and resources.

The Coalition fully supports the Alcohol License Review Committee in their efforts to reduce risky and problem drinking. The proposed guidelines are a great tool for the City of Madison to help lessen the alcohol abuse seen throughout our communities.

Thank you for your time.

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