Date: 11/06/07

CITY OF MADISON

Registration Statement -	Common Council
Please Print 07631 Agenda No.	PLEASE PRINT NAME CLEARLY Name <u>VICHOLAS</u> 2937 L Address <u>8540 Craroway</u> BLVD #113 MIDDCATON, WI
Please check the appropriate box: Support Oppose Neither Support Nor Oppose	Please check the appropriate box: Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of	anization or a person other than yourself: Yes No of complete the rest of this form. If you answered "yes," provide the name
Are you being paid for your representation? Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)	
	mmon Council) 5 minutes 3 minutes

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		lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
		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	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk
	2	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk
	3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
•	_	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information)
Date _		Signature
		Print Name