### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Tim	Schmock
Agenda No. 29	Addı	ess 513 E	dwavel St.
-		Madison	1, WIL 537//
	and the second s		
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			$\times$
Oppose	×	×	
Neither support nor oppose			
I wish to speak			June 2
Available for information only			
Are you being paid for your represent	ation?		☐ Yes ☐ No
Are you appearing as part of your other (If you answered "no," STOP; you not question.)	er paid duties for this eed 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	
	(See ]	Back)	
REGISTRANT #	_		
		REGIS'	TRANT#

	ou an e mental		ppearing solely	on behalf o	f your office or	for your municipality or o	other
		ed "yes" to the question ou answered "no" to the				form, except that you must	sign
If you that:	are beir	ng paid for your represe	ntation, or if yo	our appearance	e is part of other	paid duties, do you unders	tand
	1.	Before you engage in lewith the City Clerk?	obbying as a lo	bbyist, you or	your principal n	nust file an authorization  Yes No	
	2.	Your principal is not p with the City Clerk?	permitted to au	thorize you to	lobby unless th	e principal is registered  Yes No	
	3.		r), the principa	l must file exp		ervices in any reporting with the City Clerk for Yes No	
		ed "no" to any of the la 103 of the City-County				nt 266-4601 or go to the Cle	rk's
Date _		W	Signature				
			Print Name	<del></del>			<del></del>
	*****						

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	2.1.224	A a .	
	Nam	· MAtt	Schmock ward st.
Agenda No. 29	Addı	ess <u>5132a</u>	ward St.
		MADE	SON, WI 9371
N 1 1 1 1			₹
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			
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	person or organization? rest of this form. If you as	Yes No No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
	(See l	Back)	
REGISTRANT #		,	
	***		
		ES ES AS FOR	11. CENTAL A MATERIA (II
		KEG15	FRANT #

	ou an o 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	answei at Rooi	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.

Agenda No. 29	Nam	Name Paula Huler  Address 226 Meadawark Drive  Madison, UE 53714				
Agenda No. 29	Addi	ress <u>ood meda</u>	TO 13711			
		1100000,6	(L 03/14			
Please check the appropriate boxes:	e e e e e e e e e e e e e e e e e e e					
	01880	01881	01985			
	Referendum	Hardship Exemption	Repealing smoking ban			
Support						
Oppose	<del>  X</del>	X	~			
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.)	r paid duties for thi ed 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				
	(See	Back)				
REGISTRANT #						
			***************************************			
		REGIST	FRANT #			

-	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	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?
	,	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's at 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.

	Name Caroncel Andrea Bayra						
Agenda No. 29	Add	Address 1715 Hoyt St					
		Madison	W1 53726				
	•						
Please check the appropriate boxes:							
	01880	01881	01985				
	Referendum	Hardship Exemption	Repealing smoking ban				
Support		<u> </u>					
Oppose	×	*					
Neither support nor oppose							
I wish to speak		<b>X</b>	×				
Available for information only							
Name, address and telephone number of ea  Smoke free Wiscons  HOI Wisconsin Ave  Madison WI 53703	LM	ganization you are repres					
Are you being paid for your representation	?		Yes No				
Are you appearing as part of your other part (If you answered "no," STOP; you need n question)							
Speaking Limit:	••••••	4 minutes					
REGISTRANT#_76_	(See I	Back)					

		elected official who is appearing solely on behalf of your office or for your municipality or othe al body?	ľ
(If you	u answ orm. If	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.)	n
If you that:	are be	being paid for your representation, or if your appearance is part of other paid duties, do you understand	đ
	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 Roc	vered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk' om 103 of the City-County Building, Madison, for more information.)	S
Date <sub>.</sub>		Signature	
		Print Name	_
		Invaca a Carte	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT N.	AME CLEARLI
	Nam	e Tara	Sangstad son St. #1 , w= 53703
Agenda No. 29	Addı	ress 1311 Morri	son St. #1
	7100	Madisan	wF 53703
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	***		
Oppose	- I		
Neither support nor oppose			
I wish to speak			
Available for information only			
At this meeting are you representing (If you answered "no," STOP; you question.)  Name, address and telephone number	need not complete the	e rest of this form. If you	answerea yes, go on to the next
Are you being paid for your represen	ntation?		☐ Yes ☐ No
Are you appearing as part of your ot (If you answered "no," STOP; you question.)	her paid duties for thi need 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	
	(See	Back)	

REGISTRANT # 27

governmen	11 0	Yes	No
, v ,	wered "yes" to the question, <b>STOP</b> . Y fyou answered "no" to the question, §	ou need not complete the rest of this form, except t go on to the next question)	hat you must sign
If you are I that:	being paid for your representation, or	if your appearance is part of other paid duties, d	o you understand
1.	Before you engage in lobbying as with the City Clerk?	s a lobbyist, you or your principal must file an auth  Yes	norization No
2.	Your principal is not permitted t with the City Clerk?	to authorize you to lobby unless the principal is in Yes	registered No
3.		owe more than \$500 for lobbying services in any noipal must file expense statements with the City ndar year?	
	vered "no" to any of the last three qu oom 103 of the City-County Building, 1	vestions, please call the City Clerk at 266-4601 or Madison, for more information )	go to the Clerk's
Date	Signatur	e	
	Print Na	me	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	PRINT NAME CLEARLY					
	Nam	e Roger W	os tmont			
Agenda No. 29	Addı	ess 1450 Z	Hotgeson Dr.			
		40 ( has	wel have,			
Please check the appropriate boxes:	•	Madison	W1 53709			
	01880	01881	01985			
	Referendum	Hardship Exemption	Repealing smoking ban			
Support			×			
Oppose	V	X,				
Neither support nor oppose						
I wish to speak			X			
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 a made of the state of the stat	not complete the	rest of this form. If you	answerled "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 d	Yes No Inswered "yes," go on to the next			
Speaking Limit:	•••••	4 minutes				
REGISTRANT # 2.3	(See	Back)				

		elected official who l body?	is appearing solely	on behalf of your o	office or for	your muni	cipality or othe	7
		ered "yes" to the ques you answered "no" to			est of this for	m, except th	nat you must sig	n
If you that:	are be	eing paid for your rep	resentation, or if yo	ur appearance is part	of other pai	d duties, do	you understan	đ
	1	Before you engage with the City Clerk	· -	byist, you or your pri	ncipal must	file an auth	orization No	
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?						
	3	· · · · ·	arter), the principal	nore than \$500 for lob must file expense sta rear?		-		
		ered "no" to any of th m 103 of the City-Cou				66-4601 or s	go to the Clerk'	S
Date _		·	Signature		146-1-1-1			
			Print Name			<del></del>		_

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e the	sone
Agenda No. 29	Addı	ress 161 ja	ckson
	1100	101 ) 00	N 1 (
			<u> </u>
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			LANGE LANGE CONTRACTOR OF THE PARTY OF THE P
Oppose	<u>X</u>	X	<u> </u>
Neither support nor oppose			
I wish to speak			<u>&gt;</u>
Available for information only			
(If you answered "no," STOP; you need question.)  Name, address and telephone number of a second sec	•	• • •	nting:
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 <del>No</del> Swered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
REGISTRANT # 5 4	(See ]	Back)	

Are you an governmenta	elected official who is appearing solely on behalf of your office or for your municipality or other
	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?
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 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.

		PRINT N	AME CLEARLY		
	Nam	e <u>Christine</u>	Reilly		
Agenda No. 29	Address 1506 Madison St				
			WI 53711		
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					
(If you answered "no," STOP; you need question.)  Name, address and telephone number of					
Are you being paid for your representation			☐ 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? rest of this form. If you	Yes No answered "yes," go on to the next		
Speaking Limit:		4 minutes			
REGISTRANT # 57	(See	Back)			

Are you governm		body?	n benair of your office of for	Yes Yes	No No
		ed "yes" to the question, <b>STOP</b> . You need u answered "no" to the question, go on to		m, except tl	nat you must sign
If you are that:	e bein	ng paid for your representation, or if your	appearance is part of other pai	d duties, de	you understand
1		Before you engage in lobbying as a lobby with the City Clerk?	rist, you or your principal must	file an auth	orization No
2.		Your principal is not permitted to author with the City Clerk?	rize you to lobby unless the pr	incipal is 1	egistered  No
3.		If your principal spends or will owe mor period (calendar quarter), the principal m the remaining quarters of the calendar yea	ust file expense statements wit		
		ed "no" to any of the last three questions, 103 of the City-County Building, Madison		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	· JOE K	linging
Agenda No. 29	i i	e DOE IN	O O O O O O O O O O O O O O O O O O O
Agenda No. 29	Addı	ess <u>4504 RAYI</u>	
		MADISON	wi 537/6
Please check the appropriate boxes:	<del></del>		
			21005
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support		1	- Andrew State Sta
Oppose			1000
Neither support nor oppose  I wish to speak	1	1	1
Available for information only			
Tivalidate for international starts		<u> </u>	
(If you answered "no," STOP; you need question)  Name, address and telephone number of			
Are you being paid for your representation	n?	n	☐ Yes   XNo
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	Yes No answered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
REGISTRANT # 17	(See	Back)	

Are you		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 on answered "no" to the question, go on to the next question.)					
If you a that:	re 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?  Yes No					
2	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.

Agenda No. 29	Nam Addi		Busalaki Teyfox Trail WI 53717
Please check the appropriate boxes:	_3	,	
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	1010101111111		
Oppose	×	×	<del>×</del>
Neither support nor oppose			
I wish to speak		×	×
Available for information only			
Name, address and telephone number of o	15 1 V	ganization you are repres	enting:
madison wil 537			
Are you being paid for your representation			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 d	Yes No answered "yes," go on to the next
Speaking Limit:	***************************************	4 minutes	
REGISTRANT # 55	(See	Back)	

Are you an elected official w governmental body?	ho is appearing solely on behalf of you	ur office of for your municipality of other  Yes No
	question, <b>STOP.</b> You need not complete th " to the question, go on to the next question	ne rest of this form, except that you must sign on.)
If you are being paid for your that:	representation, or if your appearance is 1	part of other paid duties, do you understand
1. Before you engage with the City Cl	age in lobbying as a lobbyist, you or you lerk?	r principal must file an authorization  Yes No
2 Your principal with the City Cl	is not permitted to authorize you to lob erk?	by unless the principal is registered  Yes No
period (calendar	oll spends or will owe more than \$500 for quarter), the principal must file expense uarters of the calendar year?	, <del>,</del> , , , ,
	of the last three questions, please call the County Building, Madison, for more infor	City Clerk at 266-4601 or go to the Clerk's mation.)
Date	Signature	
	Print Name	

REGISTRANT #

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	PRINT NAME CLEARLY			
	Nam	· Maru I	<u>avine</u>	
Agenda No. 29	Addı	ress TONGON	W CHEN	
		Wed I	MUX.	
	<b>!</b>	The second secon	The state of the s	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support			Ves	
Oppose				
Neither support nor oppose				
I wish to speak				
Available for information only				
question.) Name, address and telephone number of		ganization you are represe		
Are you being paid for your representation	on?		☐ Yes MNo	
Are you appearing as part of your other part (If you answered "no," STOP; you need question)			Yes Mo Inswered "yes," go on to the next	
Speaking Limit:	************	4 minutes		
	(See )	Back)		
REGISTRANT #	•			
			•	

	ou an e	lected official who is apbody?	pearing solely on be	half of your office or	for your munic	cipality or other
		ed "yes" to the question, ou answered "no" to the q		_	form, except th	at you must sign
If you that:	are bein	ng paid for your represen	atation, or if your app	earance is part of other	paid duties, do	you understand
	1.	Before you engage in lo with the City Clerk?	bbying as a lobbyist,	you or your principal m	ust file an auth	orization No
	2.	Your principal is not powith the City Clerk?	ermitted to authorize	you to lobby unless the	e principal is 16	egistered No
	3.	If your principal spends period (calendar quarter the remaining quarters o	), the principal must			
		ed "no" to any of the las 103 of the City-County E			t 266-4601 or g	go to the Clerk's
Date _	9	20/02	Signature 100 Print Name	WALALE MORULE	wine	
			• • • • • • • • • • • • • • • • • • • •			

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		IRITI	TITLE CESTIFICATION
Agenda No. 29	Nam Add	cess Chris, January Ja	Limie + Isabella Hollenback bra Lane W1 53704
Please check the appropriate boxes:		Madison,	W1 53704
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support Oppose	Within	MARREWY	MULLERA
Neither support nor oppose  I wish to speak  Available for information only			
Name, address and telephone number of	of each person or or	ganization you are represe	nting:
Are you being paid for your representa	tion?		☐ Yes  【No
Are you appearing as part of your othe (If you answered "no," STOP; you need question.)	r paid duties for this ed not complete the	s person or organization? rest of this form. If you an	Yes No No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
REGISTRANT #	(See	Back)	
		KEGIS:	ΓRANT #

	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, ou answered "no" to the		_	2 .,	except that	t you must sign
If you that:	are bei	ng paid for your represen	ntation, or if y	our appearance is	part of other paid	duties, do y	ou understand
	1	Before you engage in lowith the City Clerk?	obbying as a lo	bbyist, you or you	ur principal must fi	e an author Yes	ization ☑ No
	2	Your principal is not p with the City Clerk?	permitted to au	thorize you to lol	bby unless the prin		ristered No
	3.	If your principal spends period (calendar quarter the remaining quarters of	r), the principa	l must file expen		-	-
		ed "no" to any of the las 1103 of the City-County				.4601 or go	to the Clerk's
Date _	9-	20-05	Signature	This	AJE,		
			Print Name	Chris	s-lopher_	`Ho 114	en back

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	· Roue E	126HY 42718LO 12D 0N, WE 53719
Agenda No. 29	Addı	ess 3157 Mu	y R thelia 120
		MATOIS	N. WC 53719
		Arte 100	
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			
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 nswered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
	(See ]	Back)	
REGISTRANT #	· ·	,	
		DECIC	
		KEGIS	TRANT#

	ou an e nmental		ppearing solely	y on behalf of your office or for your municipality or other Yes Yo
		red "yes" to the question ou answered "no" to the		eed not complete the rest of this form, except that you must sign to the next question.)
If you that:	are beii	ng paid for your represen	ntation, or if yo	our appearance is part of other paid duties, do you understand
	1.	Before you engage in lowith the City Clerk?	obbying as a lo	obbyist, you or your principal must file an authorization Yes No
	2.	Your principal is not p with the City Clerk?	permitted to au	thorize you to lobby unless the principal is registered  Yes No
	3.		r), the principa	more than \$500 for lobbying services in any reporting all must file expense statements with the City Clerk for year?
				ons, please call the City Clerk at 266-4601 or go to the Clerk's ison, for more information.)
Date _	Ser	+ 20 1105	Signature	Roue L Bursery
		)	Print Name	ROXIE L BURGHY

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NA	WE CLEARLY
Agenda No. 29	Nam	ne <u>Kalleen</u>	Mortensen Temons Ave n Wi 53704
Agenda 110. 27	Add	$\frac{425}{425}$	a William
			7 11 53-104
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	X	<b>X</b>	
Neither support nor oppose			
I wish to speak			
Available for information only			
Are you being noid for your removes	ntion?		☐ Yes ☐ No
Are you being paid for your representa	ation?		LICS LINO
Are you appearing as part of your other (If you answered "no," STOP; you need question.)			Yes No No swered "yes," go on to the next
Speaking Limit:	•••••	4 minutes	
	(See	Back)	
REGISTRANT #			
	•• •••		
		DECIC	NAMES A SECTION II
		K K.( 712.)	TRANT #

Are you an e governmental	elected official who is ap body?	ppearing solely o	on behalf of you	r office or fo	r your muni	cipality or other  No
	ed "yes" to the question, ou answered "no" to the q				orm, except th	nat you must sign
If you are beithat:	ng paid for your represen	itation, or if you	appearance is p	art of other pa	aid duties, do	you understand
1.	Before you engage in lo with the City Clerk?	bbying as a lobb	yist, you or your	principal mus	t file an auth	orization No
2.	Your principal is not powith the City Clerk?	ermitted to autho	nize you to lobb	y unless the p	orincipal is r	egistered
3.	If your principal spends period (calendar quarter the remaining quarters o	), the principal n	nust file expense			
	red "no" to any of the las 1 103 of the City-County E				?66-4601 or s	go to the Clerk's
Date		Signature _				
		Print Name			······································	
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### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Agenda No. 29	Addı	ess 226 RAN	porple of
	l l	WELL I COLD	w7 537/7
			<u> </u>
Please check the appropriate boxes:			
rease effect the appropriate boxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	- L		
Neither support nor oppose			
I wish to speak			
Available for information only			
Are you being paid for your representat  Are you appearing as part of your other (If you answered "no," STOP; you nee	ion?	s person or organization? rest of this form. If you ar	☐ Yes ☐ No
question)			
Speaking Limit:	**************	4 minutes	
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		KEGIS'.	FRANT#

.,	ou an nmenta		is appearing solely or	behalf of your off	ce or for your municipality or other Yes No
			stion, <b>STOP</b> . You need to the question, go on to t	_	of this form, except that you must sign
If you that:	are be	ing paid for your rep	resentation, or if your	appearance is part or	other paid duties, do you understand
	1.	Before you engage with the City Clerk		ist, you or your princ	ipal must file an authorization Yes No
	2	Your principal is a with the City Clerk	-	ize you to lobby un	ess the principal is registered  Yes No
	3.	period (calendar qu		ist file expense state	ying services in any reporting ments with the City Clerk for Yes No
			ne last three questions, p unty Building, Madison,		Clerk at 266-4601 or go to the Clerk's
Date _			Signature		
			Print Name		
		*************			
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Please check the appropriate boxes:	<del></del>		
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	101010101111		
Oppose	X	X	X
Neither support not oppose			
I wish to speak			
Available for information only			
At this meeting are you representing a	ın organization or a	person other than yourself:	Yes No
(If you answered "no," STOP; you no	eed not complete the	e rest of this form. If you ar	nswered "yes," go on to the next
question)			
Name, address and telephone number	of each person or or	ganization you are represe	nting:
Are you being paid for your represent	ation?		☐ Yes ☐ No
Are you being paid for your represent	anon:		100
Are you appearing as part of your other (If you answered "no," STOP; you no question.)	er paid duties for this sed not complete the	s person or organization? rest of this form. If you ar	Yes No No swered "yes," go on to the next
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	ou an e nmental	elected official who is body?	appearing solel	y on behalf of yo	ur office or for yo	ur municipality or Yes No	other
		red "yes" to the questio ou answered "no" to the		_		except that you mu	st sign
If you that:	are bei	ng paid for your repres	entation, or if y	our appearance is j	part of other paid of	uties, do you unde	erstand
	1	Before you engage in with the City Clerk?	lobbying as a lo	obbyist, you or you	r principal must file	e an authorization Yes No	
	2.	Your principal is not with the City Clerk?	permitted to au	thorize you to lob	by unless the princ	ipal is registered Yes No	
	3.	If your principal spen period (calendar quart the remaining quarters	er), the principa	al must file expense	e statements with t		
		red "no" to any of the l n 103 of the City-County				1601 or go to the C	Clerk's
Date _	9/2	olos	Signature	Stace	KM	240	
			Print Name	Gloria	No Mey	200	<del></del>
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	STEPHE	N JOSHEFF
Agenda No. 29	Addı	ress / 4	MANO MESTER
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Dlange abook the environments haven			•
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose		1	Same and the same
Neither support nor oppose			
I wish to speak			
Available for information only			
(If you answered "no," STOP; you need question.)	d not complete the	rest of this form. If you a	nswered "yes," go on to the next
(If you answered "no," STOP; you need question.)	d not complete the	rest of this form. If you a	nswered "yes," go on to the next
At this meeting are you representing an (If you answered "no," STOP; you need question.)  Name, address and telephone number of Are you being paid for your representation.	d not complete the	rest of this form. If you a	nswered "yes," go on to the next
(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 (If you answered "no," STOP; you need the property of the propert	d not complete the each person or or or on?	ganization you are represes person or organization?	nswered "yes," go on to the next enting:  Yes No
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	ou an e nmental	elected official who is body?	appearing solely	on behalf of your of	ffice or for your mun	icipality or other No
		red "yes" to the questio ou answered "no" to the			st of this form, except t	hat you must sign
If you that:	are bei	ng paid for your repres	entation, or if you	r appearance is part	of other paid duties, d	o you understand
	1.	Before you engage in with the City Clerk?	lobbying as a lobb	yist, you or your prir	ncipal must file an autl	norization No
	2.	Your principal is not with the City Clerk?	permitted to authorize	orize you to lobby u	nless the principal is	registered No
	3.	If your principal spen period (calendar quart the remaining quarters	ter), the principal i	nust file expense stat		
		ed "no" to any of the l n 103 of the City-County				go to the Clerk's
Date _	9-2	20-2005	Signature _	20.D	4.5	
	•		Print Name	STEPHI	MESSON	s fig.
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### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NA	AME CLEARLY
Agenda No. 29	Nam Add		STOCKWERC Sale Blud , WB 53704
Please check the appropriate boxes:		•	
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support	sage 1		
Oppose	×	X	
Neither support nor oppose			
I wish to speak			
Available for information only		·	10 (to bill a thin 11) 110 min
	f each person or or	ganization you are represe	enting:
Name, address and telephone number of		ganization you are represe	
Name, address and telephone number of Are you being paid for your representation are you appearing as part of your other of you answered "no," STOP; you need	ion? paid duties for this	s person or organization?	<ul> <li>☐ Yes</li> <li>☐ No</li> <li>☐ Yes</li> <li>☐ No</li> </ul>
Name, address and telephone number of Are you being paid for your representation are you appearing as part of your other of you answered "no," STOP; you need uestion.)	ion? paid duties for this d not complete the	s person or organization? rest of this form. If you ar	<ul> <li>☐ Yes</li> <li>☐ No</li> <li>☐ Yes</li> <li>☐ No</li> </ul>
Name, address and telephone number of Are you being paid for your representation.  Are you appearing as part of your other (If you answered "no," STOP; you need question.)  Speaking Limit:	ion? paid duties for this d not complete the	s person or organization? rest of this form. If you ar	<ul> <li>☐ Yes</li> <li>☐ No</li> <li>☐ Yes</li> <li>☐ No</li> </ul>

	ou an ei mental	lected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No
(If you this for	answer rm. If yo	ed "yes" to the question, <b>STOP</b> . You need not complete the rest of this form, except that you must sign 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?
(If you Office	answere at 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.

		PRINT N.	AME CLEARLY		
Agenda No. 29	Nam Add	PRO 574	S. PARIC SE SO WIL STATE		
Please check the appropriate boxes:	_		ø		
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban		
Support	<u> </u>	. /			
Oppose	V	V			
Neither support nor oppose	. 4				
I wish to speak					
Available for information only					
Name, address and telephone number of a	mw_e	ganization you are represe	Yes No		
Are you appearing as part of your other p. (If you answered "no," STOP; you need question.)			Yes No nswered "yes," go on to the next		
Speaking Limit:	*********	4 minutes			
REGISTRANT #	(See ]	Back)			
			_ , , _ , _ , _ , _ , _ , _ , _		

**REGISTRANT** #

Are you an governmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?					
(If you answe this form 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 are be 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?					
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 answe Office 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 m 103 of the City-County Building, Madison, for more information.)					
Office at Room	Signature  Print Name  M. Charles  M. Char					

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addı	ess Madisa-	rliss , w.T
Please check the appropriate boxes:			
Support	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Oppose Neither support nor oppose I wish to speak	/		
At this meeting are you representing an of (If you answered "no," STOP; you need question.)  Name, address and telephone number of the control of the contro	not complete the	rest of this form. If you ar	nswered "yes," go on to the next
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	person or organization? rest of this form. If you ar	Yes No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
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		REGIST	ΓRANT #

	registration statement 1 ago 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									
	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 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?								
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 <u>7/2</u>	Signature Man Collins								

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	PRINT NAME CLEARLY					
Agenda No. 29		Name Eric Hart  Address 326 Milwaskee St  Madison WI 53714				
Please check the appropriate boxes:						
	01880 Referendum	01881 Hardship Exemption	01985 Repeating smoking ban			
Support Oppose		V	V			
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	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.)	oaid 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				
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	ou an e nmental	lected official who is a body?	ppearing solely o	on behalf of	your offi	ce or for y		oality or other ☑ No
		ed "yes" to the question, ou answered "no" to the		_		of this form,	except that	you must sign
If you that:	are beir	ng paid for your represen	ntation, or if your	appearance	is part of	other paid	duties, do y	ou understand
	1.	Before you engage in lowith the City Clerk?	obbying as a lobb	yist, you or	your princ	ipal must fil [		ization ☑No
	2	Your principal is not p with the City Clerk?	ermitted to autho	orize you to	lobby unl	ess the prin		istered No
	3.	If your principal spends period (calendar quarter the remaining quarters of	r), the principal n	nust file exp		ments with	the City Cle	
		ed "no" to any of the las a 103 of the City-County I					4601 or go	to the Clerk's
Date _	4/2	20/05_	Signature				anggapani ap seer	
	1	<b>v</b> ,	Print Name _		-1 C	Har	year.	
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e DANIEL G G	CEBUA IN
Agenda No. 29	Add	ress 13L C Wilson	<b>&gt;</b>
		Magazine.	-·
Please check the appropriate boxes:		•	
Trease check the appropriate boxes.			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	V.		V
Oppose	· · · · · · · · · · · · · · · · · · ·	7	
Neither support nor oppose			
I wish to speak			
Available for information only			
Are you being paid for your representa	tion?		Yes No
Are you appearing as part of your othe (If you answered "no," STOP; you nequestion.)			Yes No No swered "yes," go on to the next
Speaking Limit:	••••••	4 minutes	
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REGISTRANT #	•	,	
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		REGIS	ΓRANT #

-	ou an e nmental	lected official who is appearing solely on behalf of your office or for your municipality or other body?  Yes No
(If you this fo	i answer rm. 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?  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 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.

Name Addr 01880 eferendum	ess 4001 f  made  01881  Hardship Exemption	S REEd  liawatha D  on 53711  01985  Repealing smoking ban
eferendum	01881 Hardship Exemption	01985
eferendum	01881 Hardship Exemption	01985
eferendum	Hardship Exemption	•
×		Repealing smoking ban
X	×	X
X	×	X
	]	
		☐ Yes ☐ No
uties for this complete the	s person or organization? rest of this form. If you an	Yes No swered "yes," go on to the next
••••••	4 minutes	
(See I	Back)	
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	person or or or outles for this complete the	person or organization you are representatives for this person or organization?  complete the rest of this form. If you and and the complete the rest of this form. If you and the complete the rest of this form. If you are representation?  Complete the rest of this form. If you are representation?

	ou an el mental	lected official who is a body?	appearing solely	on behalf of your	office or for	your mun	icipality or other
		ed "yes" to the question u answered "no" to the		~	•	m, except t	hat you must sign
If you that:	are beir	ng paid for your represe	entation, or if yo	ur appearance is par	t of other par	id duties, d	o you understand
	1	Before you engage in l with the City Clerk?	obbying as a lob	byist, you or your p	rincipal must	file an autl	norization No
	2	Your principal is not pwith the City Clerk?	permitted to aut	norize you to lobby	unless the p	rincipal is i	registered No
	3	If your principal spend period (calendar quarters the remaining quarters	er), the principal	must file expense s	—	-	
		ed "no" to any of the la 103 of the City-County				56-4601 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.

	PRINT NAME CLEARLY				
	Nam	· Bonnie	1 Jorre		
Agenda No. 29	Addı	ess 3234 M	1/Workerst		
		Modison	-14F 5371V		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose					
Neither support nor oppose	*	., .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
I wish to speak	à				
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	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 o	Yes No answered "yes," go on to the next		
Speaking Limit:		4 minutes			
	(See	Back)			
REGISTRANT #					

REGISTRANT #

	ou an e nmental		appearing solel	y on behalf of your offic	e or for your mur	nicipality of other		
		red "yes" to the question ou answered "no" to the		eed not complete the rest o to the next question.)	f this form, except i	that you must sign		
If you that:	are bei	ng paid for your represe	entation, or if y	our appearance is part of	other paid duties, d	lo you understand		
	1	Before you engage in with the City Clerk?	lobbying as a lo	bbyist, you or your princip	pal must file an aut	horization UNO		
	2.	Your principal is not with the City Clerk?	permitted to au	thorize you to lobby unle	ss the principal is Yes	registered—— Vo		
	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?						
				ons, please call the City Cl son, for more information		go to the Clerk's		
Date _	9-	20-05	Signature	Bornie 10	w			
		ı	Print Name	Bonnie	OVVL			

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

·	Nam	e <u>Carol Ferg</u>	a 557
Agenda No. 29 Address 360 W. Weshington			
_			/ 1
		Medison W	1 53763
Diib-statha amanandata haman			
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support		18	
Oppose	$\top$	X	<u> </u>
Neither support nor oppose	. ` `		
I wish to speak			
I wish to speak  Available for information only  At this meeting are you representing an If you answered "no," STOP; you need to be supported	ed not complete the	rest of this form. If you ar	nswered "yes," go on to the nex
I wish to speak  Available for information only  At this meeting are you representing an If you answered "no," STOP; you need question.)	ed not complete the	rest of this form. If you ar	nswered "yes," go on to the nex
I wish to speak	ed not complete the	rest of this form. If you ar	nswered "yes," go on to the next
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 the you being paid for your representative you appearing as part of your other of you answered "no," STOP; you need to you answered "no," STOP; you need you need you answered "no," STOP; you need	f each person or or ion?	ganization you are represent sperson or organization?	nswered "yes," go on to the nex
I wish to speak Available for information only  At this meeting are you representing an (If you answered "no," STOP; you need tuestion.)  Name, address and telephone number of the you being paid for your representative you appearing as part of your other (If you answered "no," STOP; you need tuestion.)	f each person or or ion?  paid duties for this d not complete the	ganization you are represent ganization you are represent sperson or organization?	nswered "yes," go on to the nex
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 the you being paid for your representative you appearing as part of your other (If you answered "no," STOP; you need question.)	f each person or or ion?  paid duties for this d not complete the	ganization you are represent ganization you are represent sperson or organization?	nswered "yes," go on to the nex
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	f each person or or ion?  paid duties for this d not complete the	ganization you are represent sperson or organization?  rest of this form. If you are rest of this form. If you are	nswered "yes," go on to the next

	•	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:	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? Yes 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 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.

		I KILL IVE	WIE CEEARCI
	Nam		uske
Agenda No. 29	Add	ress 707 W.MG	in State
		Madison	1411 52710
		MURCIS VA	M1 02 112
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	X X	Traidship Exemption	V
Oppose		\ <u>\</u>	
Neither support nor oppose		*	
I wish to speak			
Available for information only			
Available for infolliation only			
Are you being paid for your representa	ation?		☐ Yes ☐ No
Atte you being paid for your representa-			
Are you appearing as part of your othe (If you answered "no," STOP; you no question.)	er paid duties for thi eed 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	
	(See	Back)	
REGISTRANT #	•	,	
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	ou an e nmental	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 ou 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?
	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?  [ 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 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.

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	Nam	e Sandra	Schmelzkon Reston Heigh	
Agenda No. 29	Δdd	ress 6709-1 1	Poches Heigh	e n.
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		MACISTR	VUL 35718	
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				
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 enswered "yes," go on to	the next
Speaking Limit:	•••••	4 minutes		
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•	ou an	elected official who is appearing solely on behalf of your office or for your municipality or other \textstyle \text{Yes} \textstyle \text{No}
		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)
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	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	i answe at Root	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
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	ress 2112 E Mai Madison, V	raud			
Agenda No. 29	Add	ress 2112 E Mai	754-			
		Madison, I	NI 53704			
Please check the appropriate boxes:						
	01880	01881	01985			
	Referendum	Hardship Exemption	Repealing smoking ban			
Support						
Oppose	X	X	Χ			
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						
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question)	each person or or	e rest of this form. If you ar				
Name, address and telephone number of	each person or or?	ganization you are represent sperson or organization?	nting:  ☐ Yes ☐ No ☐ Yes ☐ No			
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	you an e rnmental		appearing solely on behalf of your	office or for your municipality or other  Yes No
			on, <b>STOP.</b> You need not complete the re question, go on to the next question)	rest of this form, except that you must sign
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	1	Before you engage in with the City Clerk?	lobbying as a lobbyist, you or your pr	rincipal must file an authorization  Yes No
	2	Your principal is not with the City Clerk?	permitted to authorize you to lobby	unless the principal is registered  Yes No
	3.		eds or will owe more than \$500 for loter), the principal must file expense states of the calendar year?	
			ast three questions, please call the City Building, Madison, for more informa	ty Clerk at 266-4601 or go to the Clerk's ation.)
Date	9/20	165	Signature Morney T.  Print Name Mancy T	Michaud
		<b>.</b>		

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Please check the appropriate boxes:			ą.	
rease check the appropriate boxes.				
	01880	01881	. 01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support			X	
Oppose	X	×		
Neither support nor oppose			,	
I wish to speak				
Available for information only				
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-	ou an e nmental	elected official who is body?	appearing solel	y on behal	f of your offic		municipality or other	
		red "yes" to the question answered "no" to th				of this form, ex	cept that you must sign	
If you that:	ı are bei	ng paid for your repres	sentation, or if y	our appeara	ence is part of	other paid dut	ies, do you understand	
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	3.	If your principal sper period (calendar quar the remaining quarter	ter), the principa	al must file		ments with the		
		red "no" to any of the i n 103 of the City-Count					I or go to the Clerk's	
Date <sub>.</sub>	The state of the s	20	Signature Print Name	5	Ben Ren	A	Market,	_
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Please check the appropriate box	es:	<del></del>		
		01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support				V
Oppose	V	1/	1	a to the second
Neither support nor oppose				A
I wish to speak				
Available for information only	y			
Are you being paid for your repre	sentatio	n?		☐ Yes    ॢ☑No
Are you appearing as part of your (If you answered "no," STOP; you question)				Yes No nswered "yes," go on to the next
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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?
(If you this fo	ı answer rm. If yo	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 bei	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
٠	1	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
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	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 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.

	Nam	e JOHN KAUA	NAUGH YERMAN AVE
Agenda No. 29	Addı	ess 1025 N 51	YERMAN AVE
		madison	1 W: 53704
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support	Referendam	Tiardomp Exemption	Itopouring onlouing our
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only			×
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.)			Yes No nswered "yes," go on to the next
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	•	elected official who l body?	is appearing solely	on behalf of your o	ffice or for your m	<u> </u>
		· -	estion, <b>STOP.</b> You nee to the question, go on t	_	st of this form, excep	t that you must sign
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	1	Before you engage with the City Clerk	e in lobbying as a lobl k?	oyist, you or your pri	ncipal must file an a	uthorization  No
	2	Your principal is with the City Clerl	not permitted to auth k?	orize you to lobby u	nless the principal i	s registered
	3.	period (calendar q	pends or will owe mo uarter), the principal ters of the calendar ye	must file expense sta	· •	
			he last three questions unty Building, Madisc			or go to the Clerk's
Date <sub>.</sub>			Signature			
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		·				

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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	malisan,	WI
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Referendum	Hardship Exemption	Repealing smoking ban
The Art Section Conference Confer		
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?		Yes No
id duties for this not complete the	person or organization? rest of this form. If you an	Yes No swered "yes," go on to the next
••••••	4 minutes	
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	ganization or a part complete the ach person or organization or	Referendum Hardship Exemption  ganization or a person other than yourself: not complete the rest of this form. If you an  ach person or organization you are represent  id duties for this person or organization? not complete the rest of this form. If you an

	an elected official who is appearing solely on behalf of your office or for your municipality or other ental body?  Yes No
	nswered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign. If you answered "no" to the question, go on to the next question.)
If you arthat:	e being paid for your representation, or if your appearance is part of other paid duties, do you understand
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1 2 2	nswered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Room 103 of the City-County Building, Madison, for more information)
Date	Signature
	Print Name
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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		MADL	SOW, WI 53 to
Please check the appropriate boxes:			
	01000	A1001	01985
	01880 Referendum	01881 Hardship Exemption	Repealing smoking ban
Symport	Kelefelldalli	Haldship Exchiption	Repeating shioking our
Support			
Oppose			<i>F</i>
Neither support nor oppose			
I wish to speak		-	
Available for information only	<u> </u>		
Are you being paid for your representa	tion?		Yes No
Are you appearing as part of your othe (If you answered "no," STOP; you nequestion)	paid duties for this ed not complete the	s person or organization? erest of this form. If you a	Yes No nswered "yes," go on to the next
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_	ou an e nmental	lected 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 beir	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
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		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.

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01880	01881	01985
Referendum	Hardship Exemption	Repealing smoking ban
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on?		Yes No
paid duties for this not complete the	s person or organization? rest of this form. If you an	Yes No No swered "yes," go on to the next
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	Referendum  organization or a process of the complete the each person or or organization or organization or organization.	Referendum Hardship Exemption  organization or a person other than yourself:  not complete the rest of this form. If you are each person or organization you are represent

	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, 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:	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			
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			
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### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NAME CLEARLY			
	Nam	e ANGELA	WIGANOWSKY EG AVE: WI 53704		
Agenda No. 29	Addı	ress 1901 ABE	eg AVE.		
		MADISAN	W 53704		
Please check the appropriate boxes:					
1,111	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose					
Neither support nor oppose					
I wish to speak	<i>A</i>	ļ			
Available for information only					
Name, address and telephone number of  Are you being paid for your representation		ganization you are repres	enting:		
Are you being paid for your representant	)II:		100		
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? erest 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 nmental		ppearing solely	y on behalf of your office or		ality or other No
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	3		), the principa	more than \$500 for lobbying sal must file expense statements year?		
				ons, please call the City Clerk ( son, for more information)	ıt 266-4601 or go i	to the Clerk's
Date _	9-	20-05	Signature Print Name	ANGELA WIGA	wwsky	
		,				

### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e KELLY	JORDAN		
Agenda No. 29	Addr	ess 1330 R	ELGENT ST		
		MADISON	WI 5375		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support			<u> </u>		
Oppose	×	×			
Neither support nor oppose					
I wish to speak			· · · · · · · · · · · · · · · · · · ·		
Available for information only	×		X		
(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:    DRDAM'S   TEN PUB   1880   CESET   STREET   MANSON					
Are you being paid for your representation	?		☐ Yes		
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			
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	ou an e nmental		is appearing solely on behalf of your office or for your municipality or other Yes  \text{No}	ar
			tion, <b>STOP</b> . You need not complete the rest of this form, except that you must sign the question, go on to the next question.)	n
If you that:	are bei	ng paid for your repre	esentation, or if your appearance is part of other paid duties, do you understand	d
	1.	Before you engage i with the City Clerk?	in lobbying as a lobbyist, you or your principal must file an authorization  Yes No	
	2.	Your principal is no with the City Clerk?	ot permitted to authorize you to lobby unless the principal is registered Yes No	
	3.	period (calendar qua	ends or will owe more than \$500 for lobbying services in any reporting earter), the principal must file expense statements with the City Clerk for ers of the calendar year?	
			e last three questions, please call the City Clerk at 266-4601 or go to the Clerk'. nty Building, Madison, for more information.)	S
Date _	9-2	20-05	Signature Journal Print Name LEWY C. JORDAN	_
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### City of Madison Registration Statement - Common Council

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		Medison 1	01 53713
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Support			· · · · · · · · · · · · · · · · · · ·
Oppose			
Neither support nor oppose			
I wish to speak			
Available for information only	<u> </u>		
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)	oaid duties for this		☐ Yes No
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Are yo		lected 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 a that:	are beir	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
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		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

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Agenda 110. MJ	Addı	ress 1000 W	eurgia Wary
		WEIDM	1 WA 53713 (
Please check the appropriate boxes:			
	01880	01881	01985
·	Referendum	Hardship Exemption	Repealing smoking ban
Support		· · · · · · · · · · · · · · · · · · ·	
Oppose	L	£	Commence of the Contract of th
Neither support nor oppose			
I wish to speak			
Available for information only			
•	each person or or	ganization you are represe	enting:
•	each person or or	ganization you are represe	enting:
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Name, address and telephone number of or some series of the source of th	n?	s person or organization?	☐ Yes ☐ No
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Name, address and telephone number of a common of the comm	n? aid duties for this not complete the	s person or organization? rest of this form. If you a	☐ Yes ☐ No

Are you an e governmental	lected 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.)
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Date	Signature
	Print Name

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		<u> </u>	ALTER CHARLES
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Agenda No. 29		4 11	
Agenda No. 29	Addı	ress <u>1728N. H</u>	HMIDANT PIACI.
		Milwazz	kep. WI S 3208
	<del>, marking and a</del>		
Please check the appropriate boxes:	•		
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	- 1	L	
Neither support nor oppose			
I wish to speak			
Available for information only			
Name, address and telephone number of	tssn. of	WI .	
Are you being paid for your representat	tion?		¥es □ No
Are you appearing as part of your other (If you answered "no," STOP; you nee question.)	~	-	Yes No nswered "yes," go on to the next
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Are you an e	elected official who is appearing solely on behalf of your office or for your municipality or other body?
(If you answe	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.)
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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 answe Office 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 m 103 of the City-County Building, Madison, for more information)
Date	Signature Dona Winingky.  Print Name Dona Winingky.

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Agenda No. 29	Nam Add		LOUR Latoh Drive Apt 20;
t seemaalikka magaagaa sa ka ka jalka sa ka ay ka ka sa ka sa sa sa sa ka ka ka sa sa sa ka ka ka ka sa sa sa Sa sa		<u> </u>	4 1 3111
Please check the appropriate boxes:			
1.00	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	X	<u>X</u>	
Neither support nor oppose			
I wish to speak			
Available for information only	4.000-100		
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 thi 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	
	(See	Back)	
REGISTRANT #			
		DECIS'	TRANT#

	ou an e nmental	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 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?
	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
. <b>.</b>		
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### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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or a person of the the rest of the the rest of the	01881 hip Exemption  ther than yourself: this form. If you are	01985 Repealing smoking ban  Yes  No nswered "yes," go on to the nex enting: 08) 249-2863
or a person of the the rest of the the rest of the	01881 hip Exemption  ther than yourself: this form. If you are	01985 Repealing smoking ban  Yes  No nswered "yes," go on to the nex enting: 08) 249-2863
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	ou an o	elected official who is appearing solely on behalf of your office or for your municipality or other body?
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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?
		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.

		IMILI	ANIE CEEARUI
Agenda No. 29	Nam Addi		R. HARRISON FREEN G. (1) 53711
Please check the appropriate boxes:			na e
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support			
Oppose			. /
Neither support nor oppose	<del>                                     </del>		
I wish to speak			- PARTILLE P
Available for information only			
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		
Speaking Limit:	••••••	4 minutes	
	(See ]	Back)	
REGISTRANT #	`		
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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 u answered "no" to the question, go on to the next question)
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	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	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.

Agenda No. 29	Nam Add	e Lorne MiTa	epa Stothar-Rd.
		Madossa 157	537/4
		July Val	
Please check the appropriate boxes:			
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	1	\ \ \ \ \	
Neither support nor oppose			
I wish to speak			
Available for information only		<del>                                     </del>	
Available for information only		<u> </u>	
	0		☐ Yes 🔽 No
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? erest of this form. If you ar	Yes No nswered "yes," go on to the next
Speaking Limit:	***************	4 minutes	
	(\$00	Back)	
REGISTRANT #	(Bee	Dack)	
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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?  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?    Yes	Are you		ected official who is appearing solely on behalf of your office or for your municipality or other body?
that:  1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?			
with the City Clerk?	If you a that:	re bein	g paid for your representation, or if your appearance is part of other paid duties, do you understand
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?  [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		1.	
period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?	:	2	
Office at Room 103 of the City-County Building, Madison, for more information.)  Date Signature Print Name	Ž	3	period (calendar quarter), the principal must file expense statements with the City Clerk for
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	Date		Signature
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### City of Madison Registration Statement - Common Council

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Agenda No. 29	Addi	ress 122 600a	iana Cir
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and the second of the second o	<del>770</del>		20119
Please check the appropriate boxes:			
rease encok the appropriate boxes.			
	01880	01881	01985
· ·	Referendum	Hardship Exemption	Repealing smoking ban
Support			*
Oppose	<u> </u>	X	
Neither support nor oppose			
I wish to speak			
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		elected official who is all body?	appearing solely	on behalf of your of	fice or for	your muni	cipality or other
		ered "yes" to the question you answered "no" to the			t of this for	m, except ti	hat you must sign
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	1	Before you engage in with the City Clerk?	lobbying as a lob	byist, you or your prin	cipal must	file an auth	orization No
	2	Your principal is not with the City Clerk?	permitted to auth	notize you to lobby un	iless the pr	incipal is r	egistered No
	3.	If your principal spenderiod (calendar quart the remaining quarters	er), the principal	must file expense state	oying servicements with	ces in any h the City	reporting Clerk for No
(If you Office	answe at Roo	ered "no" to any of the lo m 103 of the City-County	ast three question Building, Madis	s, please call the City on, for more informatio	Clerk at 26 on.)	66-4601 or	go to the Clerk's
Date _	9-2	20-05	Signature	M K. Brandon	1	nave.	
			Print Name	Brandon	Beec	her	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Addi	ress 322 Acadessa	Hermanson  e wood Blud.  LI I
Please check the appropriate boxes:			55716
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Support			X
Oppose	٠	X	
Neither support nor oppose	<u> </u>		
I wish to speak	<u> </u>		
Available for information only			
Available for information only	<u> </u>	<u> </u>	
Name, address and telephone number of	2	rganization you are represented by 198 - 241 - 0147	enting:
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? e rest of this form. If you a	Yes No nswered "yes," go on to the next
Speaking Limit:		4 minutes	
	(See	Back)	
REGISTRANT #	·		
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	ou an e nmental		appearing solely on behalf of your office or for your municipality or othe	r
		, .	on, <b>STOP.</b> You need not complete the rest of this form, except that you must sign e question, go on to the next question.)	7
If you that:	are bei	ng paid for your repres	sentation, or if your appearance is part of other paid duties, do you understand	f
	1	Before you engage in with the City Clerk?	lobbying as a lobbyist, you or your principal must file an authorization  Yes  No	
	2.	Your principal is not with the City Clerk?	permitted to authorize you to lobby unless the principal is registered  Yes No	
	3.	2 1 1	nds or will owe more than \$500 for lobbying services in any reporting ter), the principal must file expense statements with the City Clerk for s of the calendar year?	
			last three questions, please call the City Clerk at 266-4601 or go to the Clerk's y Building, Madison, for more information.)	;
Date _	9-	20-05	Signature  Print Name  Destin Hermonson	

### City of Madison Registration Statement - Common Council

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Agenda No. 29	Name Brenda Lange Address 2010 Holman RD Deerfield NI 5333/				
Agenda No. 29	Addı	tess 2010 FTOIME			
		Decrirela	·W/ 5333/		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support	TOTOTOMOUNT				
Oppose		W			
Neither support nor oppose					
I wish to speak					
Available for information only					
Are you being paid for your representa	ation?		☐ Yes No		
Are you appearing as part of your other (If you answered "no," STOP; you ne question.)	or paid duties for thinged not complete the	s person or organization? erest of this form. If you a	Yes Nonswered "yes," go on to the next		
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	(See	Back)			
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		יאדי אוני	TO A NOTE #		
		KLGIS	TRANT #		

Are you an elected official governmental body?	who is appearing solely on behalf of your office or for your municipality or other  Yes  No
	ne question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign no" to the question, go on to the next question.)
If you are being paid for you that:	our representation, or if your appearance is part of other paid duties, do you understand
1. Before you e with the City	engage in lobbying as a lobbyist, you or your principal must file an authorization Clerk?
2 Your princip with the City	oal is not permitted to authorize you to lobby unless the principal is registered Clerk?
period (caler	ipal spends or will owe more than \$500 for lobbying services in any reporting idar quarter), the principal must file expense statements with the City Clerk for quarters of the calendar year?
	y of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's ty-County Building, Madison, for more information.)
Date 4-20-05	Signature Buda Can Language Print Name 3.4.4

### City of Madison Registration Statement - Common Council

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#### PRINT NAME CLEARLY

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	Nam	e Kristi Gi	Imore
Agenda No. 29	Addı	ress 2621 Dat	ile St.
			Wi 53704
		1910013011.	WI WITO
Please check the appropriate boxes:			
Control of the Contro	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			X
Oppose	+	*	<u>-</u>
Neither support nor oppose			
I wish to speak			
Available for information only	×	$\sim$	× •
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_	ou an el mental l	lected official who is apbody?	opearing solel	y on behalf of you	n office or for		pality or other No
		ed "yes" to the question, u answered "no" to the q				rm, except tha	t you must sign
If you that:	are beir	ng paid for your represer	ntation, or if y	our appearance is p	part of other pa	id duties, do y	you understand
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	2.	Your principal is not powith the City Clerk?	ermitted to au	nthorize you to lobb	by unless the p		ristered No
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(If you Office o	answere at Room	ed "no" to any of the las 103 of the City-County I	t three questic Building, Mad	ons, please call the ison, for more infor	City Clerk at 2 mation.)	66-4601 or go	to the Clerk's
Date _	9-	20-05	Signature Print Name	Husti d	2. Cilm L. Gilm	ore	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		<u> </u>	THE CELETATION
Agenda No. 29	Nam Add	241 0.	VERSIDE DR
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			
		f **	₹′
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.)	r paid duties for thi ed 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	
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REGISTRANT #			
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Are you ar	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 I 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?  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?
	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.

en er en	Nam		NIGUEN			
Agenda No. 29	Add	Address 7437 SAWMELL RO MADERDA, WIS 53717				
	Address / ( ) / ( )					
		MADE JOA, WI SSA				
Please check the appropriate boxes:		•				
rouse energy and appropriate concess						
	01880	01881	01985			
	Referendum	Hardship Exemption	Repealing smoking ban			
Support	X		X			
Oppose	-	X				
Neither support nor oppose						
I wish to speak						
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		red "yes" to the question ou answered "no" to the		ed not complete the rest of to the next question.)	this form, except t	hat you must sign
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	1.,	Before you engage in lewith the City Clerk?	obbying as a lol	obyist, you or your principa	al must file an auti	norization  No
	2.	Your principal is not p with the City Clerk?	permitted to aut	horize you to lobby unless	s the principal is a	registered No ,
	3.		r), the principal	nore than \$500 for lobbying must file expense statemed rear?		
				ns, please call the City Cle on, for more information)		go to the Clerk's
Date _	9-	20-5	Signature Print Name	Van Ch	A I G L I A	
	. 40 Mr 24 mr 46 ·	****				

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

1985 g smoking ban	01985 Repealing smoki	rest of this form. If you	01880 Referendum  organization or a ped not complete the	Agenda No. 29  Please check the appropriate boxes:  Support Oppose Neither support nor oppose I wish to speak Available for information only  At this meeting are you representing a (If you answered "no," STOP; you no question)  Name, address and telephone number
1985 g smoking ban	01985 Repealing smoki	O1881 Hardship Exemption  Decision other than yourse rest of this form. If you	01880 Referendum  organization or a ped not complete the	Support Oppose Neither support nor oppose I wish to speak Available for information only  At this meeting are you representing a (If you answered "no," STOP; you no question.)
smoking ban	Repealing smoki	Hardship Exemption  Decision other than yourse rest of this form. If you	Referendum  n organization or a ped not complete the	Oppose Neither support nor oppose I wish to speak Available for information only  At this meeting are you representing a (If you answered "no," STOP; you no question.)
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	enting.	gamanan jou uro ropro		Traine, accress and telephone number
☐ No	Yes N		tion?	Are you being paid for your representa
No no on to the next				Are you appearing as part of your other (If you answered "no," STOP; you need question.)
		4 minutes	•••••	Speaking Limit:
		Back)	(See J	
				REGISTRANT #
		ŕ	·	REGISTRANT #

	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	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 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 Brendon D.	ybdaW	
Agenda No. 29	Add	Name Brendon Dybdahl Address 6750 Park Ridge Dr., B		
8		Madison, WI 53719		
		Madison, W	/1 > > ///	
79. 1.1.1.				
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support				
Oppose	<b>X</b>	*	<u> </u>	
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 nee question.)  Name, address and telephone number o	ed not complete the	e rest of this form. If you ar	nswered "yes," go on to the next	
At this meeting are you representing an (If you answered "no," STOP; you nee question.)  Name, address and telephone number o	f each person or or	e rest of this form. If you ar	nting:	
At this meeting are you representing an (If you answered "no," STOP; you nee question.)  Name, address and telephone number o	f each person or or	e rest of this form. If you ar	nswered "yes," go on to the next	
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At this meeting are you representing an (If you answered "no," STOP; you nee question.)	f each person or	ganization you are represent sperson or organization?  e rest of this form. If you are	nting:  Yes No	

	ou an e nmental	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)
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		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.

		IMINITA	WIE CLEAKET	
Agenda No. 29	Nam Add	ress 114 Prias C Madiron	ret st.	
		Madiron	UI 53704	
Please check the appropriate boxes:				
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support		_	<u> </u>	
Oppose	×	<u> </u>		
Neither support nor oppose			W T West	
I wish to speak				
Available for information only				
Are you being paid for your represent	ration?		☐ Yes ☐ No	
The you being para for your represent				
Are you appearing as part of your oth (If you answered "no," STOP; you n question.)	er paid duties for thi eed 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		
	(See	Back)		
REGISTRANT #	_			
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Are you an	elected official who is appearing solely on behalf of your office or for your municipality or other labody?
	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 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?  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?
	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
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### City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

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Agenda No. 29	Add	ress 71 na He	Hermina St.	
	7 ldd.			
en jaret 18 maa yn 18 mae de skriver op gewond 18 de 18 maart yn 18 mae 18 18 18 mae 19 gewond 18 18 18 mae 19		Madism	, W/1 53714	
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				
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	d not complete the	e rest of this form. If you a	nswered "yes," go on to the next	
At this meeting are you representing an (If you answered "no," STOP; you need question)  Name, address and telephone number of	each person or or	e rest of this form. If you a	nswered "yes," go on to the next	
At this meeting are you representing an (If you answered "no," STOP; you need question)  Name, address and telephone number of	each person or or	e rest of this form. If you a	nswered "yes," go on to the next	
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At this meeting are you representing an (If you answered "no," STOP; you need question)	each person or or or on?  paid duties for this d not complete the	rest of this form. If you are represed ganization you are represed as person or organization?	nswered "yes," go on to the next  nting:  Yes No	

Are you governm		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 arthat:	re bei	ing paid for your representation, or if your appearance is part of other paid duties, do you understand	
1	<b>1</b>	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Yes No	
2	2	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes No	
3	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 a Office at	nswer 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.

·		<u> </u>		
general and the second	Nam	e Alfred A	Natano	
Agenda No. 29	A 11.		Rose Ct.	
Agenda No. 29	Addi	Address 3745 Ross St.		
		<u>Machison</u>	W 53705	
	<del></del> ,	•		
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				
Available for information only				
			Clar. Santa	
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)	paid duties for thi	s person or organization? rest of this form. If you a	Yes No nswered "yes," go on to the next	
Speaking Limit:		4 minutes		
	(\$40	Back)		
REGISTRANT #	(btt	<i>back</i> ,		
		REGIS	TRANT #	

•	ou an e mental	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 u 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
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1 2 2		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
	٠	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Agenda No. 29	Nam Add	e Mike F	ME CLEARLY  laherly  ostrut ly	
Please check the appropriate boxes:				
	01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban	
Support				
Oppose	X	X	K	
Neither support nor oppose				
I wish to speak				
Available for information only				
Wisconsin Ave, N	edism	ganization you are represe		
Are you being paid for your representation?  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 ar	☐ Yes 🗶 No	
(If you answered "no," STOP; you need	not complete the	e rest of this form. If you ar	☐ Yes 🗶 No	
(If you answered "no," STOP; you need question.)	not complete the	e rest of this form. If you ar	☐ Yes 🗶 No	
(If you answered "no," STOP; you need question.)	not complete the	rest of this form. If you ar4 minutes Back)	Yes No nswered "yes," go on to the next	

-		elected official who is appearing solely on behalf of your office or for your municipality or other labody?
		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)
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		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.

01880 Referendum	e STEVEN Coress 360 W. U. HS14 MAD.  O1881 Hardship Exemption  Derson other than yourself:	O1985 Repealing smoking ban
01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
01880 Referendum	01881 Hardship Exemption	01985 Repealing smoking ban
Referendum	Hardship Exemption	Repealing smoking ban
Referendum	Hardship Exemption	Repealing smoking ban
Referendum	Hardship Exemption	Repealing smoking ban
nnization or a p	X	
anization or a p	person other than yourself:	Ves ₩ No
anization or a p	person other than yourself:	□ Ves M No
nnization or a p	person other than yourself:	□ Ves ► No
nnization or a p	person other than yourself:	□ Ves M No
nnization or a p	person other than yourself:	□ Ves M No
nnization or a p	person other than yourself:	□ Ves <b>▼</b> No
		☐ Yes ☑ No
		1 C31 140
duties for this t complete the	s person or organization? rest of this form. If you an	☐ Yes ☐ No aswered "yes," go on to the ne
***********	4 minutes	
(See l	Back)	
(500)		
	l duties for this t complete the	I duties for this person or organization?  t complete the rest of this form. If you an  4 minutes  (See Back)

Are you governm			vho is ap	opearing solely	y on behalf	of your off	ice or for	your muni	cipality or other No
		ed "yes" to the u answered "no					t of this for	m, except ti	hat you must sign
If you and that:	re bein	ig paid for your	represen	ntation, or if yo	our appeara	nce is part o	f other pai	d duties, de	you understand
1	<b>L</b>	Before you engwith the City C	-	bbying as a lo	bbyist, you	or your prin	cipal must	file an auth	orization  No
2	2.	Your principal with the City C		ermitted to au	thorize you	to lobby un	less the pr	incipal is 1	egistered  No
3	<b>3</b> ,	If your princip period (calenda the remaining of	ar quarter	), the principa	l must file	500 for lobb expense state	oying servi ements wit	ces in any h the City	reporting Clerk for \[ \] No
(If you at Office at	nswere Room	ed "no" to any 103 of the City	of the las -County I	t three questio Building, Madi	ns, please c son, for mor	all the City ( e informatio	Clerk at 26 on.)	66-4601 or	go to the Clerk's
Date				Signature			,		
				Print Name				·····	de de la constante de la const

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		TRIVI WAME CLEARD			
		e JANERA			
Agenda No. 29	Add	ress 14 LANS	11NG ST		
Ü		MADISON	WI 53714		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support					
Oppose	X	X	X		
Neither support nor oppose					
I wish to speak					
Available for information only					
(If you answered "no," <b>STOP;</b> you need question)	d not complete the	e rest of this form. If you a	inswered "yes," go on to the ne		
(If you answered "no," <b>STOP;</b> you need question)	d not complete the	e rest of this form. If you a	inswered "yes," go on to the ne		
At this meeting are you representing an (If you answered "no," STOP; you need question.)  Name, address and telephone number of Are you being paid for your representati	d not complete the	e rest of this form. If you a	inswered "yes," go on to the ne		
(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 (If you answered "no," STOP; you need "no," STO	d not complete the feach person or or or one	grest of this form If you a ganization you are representation you are representation?	enswered "yes," go on to the nextenting:  Yes No		
(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 (If you answered "no," STOP; you need question.)	d not complete the feach person or	ganization you are represent ganization you are represent of organization?  The rest of this form If you are rest of this form.	enswered "yes," go on to the nextenting:  Yes No		
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	ou an e nmental		no is appearing solely	on behalf of your of	fice of for your n	
(If you this fo	answei rm If yo	ed "yes" to the quou answered "no"	uestion, <b>STOP</b> . You ne to the question, go on	ed not complete the res to the next question.)	t of this form, exce	pt that you must sign
If you that:	are bei	ng paid for your r	epresentation, or if yo	ur appearance is part of	of other paid duties	s, do you understand
	1	Before you enga with the City Cle		byist, you or your prin	ncipal must file an	
	2	Your principal i with the City Cle		horize you to lobby u	nless the principal	
	3.	period (calendar		nore than \$500 for lob must file expense state ear?		ity Clerk for
				ns, please call the City on, for more informati		or go to the Clerk's
Date _	•••		Signature			
			Print Name			
		- 4 + - 4 +			**************	***

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Name KEN VANDER WAAL			
Agenda No. 29	Add	ress 30 \nst	LIA CIR	
		MATTISA	W - 23-114	
Please check the appropriate boxes:		•		
	01880	01881	01985	
	Referendum	Hardship Exemption	Repealing smoking ban	
Support			\	
Oppose	X	X		
Neither support not oppose				
I wish to speak				
Available for information only	<u> </u>			
If you answered "no," <b>STOP;</b> you nee question)	d not complete the	e rest of this form. If you a	nswered "yes," go on to the nex	
If you answered "no," <b>STOP</b> ; you nee question.)  Name, address and telephone number or	d not complete the	e rest of this form. If you a	nswered "yes," go on to the nex.	
(If you answered "no," <b>STOP</b> ; you nee question.)  Name, address and telephone number or	d not complete the	e rest of this form. If you a	nswered "yes," go on to the nex	
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If you answered "no," STOP; you need question.)  Name, address and telephone number of the control of the contr	f each person or	e rest of this form. If you are represe ganization you are represe s person or organization? e rest of this form. If you are4 minutes	nswered "yes," go on to the nex	
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-	ou an menta	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.)
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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	10000	Hantle venout hh we s 3204
Please check the appropriate boxes:			
·	01000	01001	01985
	01880 Referendum	01881 Hardship Exemption	Repealing smoking ban
Support	Keterchaan	TIAIUSIID DAOIIDEGOID	Land Sing Sing
Oppose	2		
Neither support nor oppose			
I wish to speak	<del>- </del>		
Available for information only			
Name, address and telephone number of		B	· · · · · · · · · · · · · · · · · · ·
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.)	paid duties for this d 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 #	(See	Back)	
		REGIS'	TRANT #

-		elected official who is l body?	appearing solely or	ı behalf of your	office or for	your munic	cipality or other  No
		red "yes" to the questic ou answered "no" to th				m, except th	at you must sign
If you that:	are be	ing paid for your repres	sentation, or if your	appearance is pa	rt of other pa	id duties, do	you understand
	1	Before you engage in with the City Clerk?	lobbying as a lobby	ist, you or your p	orincipal must	file an autho	orization No
	2	Your principal is not with the City Clerk?	permitted to author	ize you to lobby	unless the p	rincipal is re	gistered No
	3	If your principal sper period (calendar quar the remaining quarter	ter), the principal m	ust file expense s			
		red "no" to any of the and the 103 of the City-Count				66-4601 or g	o to the Clerk's
Date _		····	Signature	, , , , , , , , , , , , , , , , , , ,			1444 P. 1444 P
			Print Name		an bitan and district		
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Alan Ude	11 + Stephonie Ud usion HillAure m 53719
Agenda No. 29	Addı	ess <u>8217 Ma</u>	usion HillAve
		Madiso	m 53719
Please check the appropriate boxes:			• • • • • • • • • • • • • • • • • • •
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose		<u> </u>	
Neither support nor oppose			
I wish to speak			
Available for information only			
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.)	naid duties for thi	s person or organization? rest of this form. If you o	Yes No answered "yes," go on to the next
Speaking Limit:	**************	4 minutes	
	(See	Back)	
REGISTRANT #	`	·	
		PECIS	TRANT#

	ou an e nmental		is appearing solely	on behalf of your office	or for your municipality or other  Yes No
			stion, <b>STOP.</b> You nee the question, go on t		his form, except that you must sign
If you that:	are bei	ng paid for your rep	resentation, or if you	or appearance is part of oth	ner paid duties, do you understand
	1.	Before you engage with the City Clerk		byist, you or your principal	must file an authorization Yes No
	2	Your principal is a with the City Clerk		orize you to lobby unless	the principal is registered  Yes No
	3.	period (calendar qu		must file expense statemen	s services in any reporting ats with the City Clerk for Yes No
				s, please call the City Clerk on, for more information.)	k at 266-4601 or go to the Clerk's
Date _			Signature		The Parks of the State of the S
			Print Name		
	*	******			

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Address   Address   Address   Address   Address   Address   Address   MADSON, WI \$3714   1 01985  Repealing smoking ban   A control of the rest of this form. If you answered "yes," go on to the new an organization you are representing:
O1881  Hardship Exemption  Repealing smoking ban  A STITE OF THE PROPERTY OF T
O1881  Hardship Exemption  Repealing smoking ban  A STITE OF THE PROPERTY OF T
O1881  Hardship Exemption  Repealing smoking ban  A  T a person other than yourself:  The rest of this form. If you answered "yes," go on to the new
Hardship Exemption Repealing smoking ban  X  Y  The a person other than yourself: Yes No  The rest of this form. If you answered "yes," go on to the ne
Hardship Exemption Repealing smoking ban  X  Y  The a person other than yourself: Yes No  The rest of this form. If you answered "yes," go on to the ne
Hardship Exemption Repealing smoking ban  X  Y  The a person other than yourself: Yes No  The rest of this form. If you answered "yes," go on to the ne
r a person other than yourself: Yes No the rest of this form. If you answered "yes," go on to the ne
the rest of this form. If you answered "yes," go on to the ne
the rest of this form. If you answered "yes," go on to the ne
the rest of this form. If you answered "yes," go on to the ne
the rest of this form. If you answered "yes," go on to the ne
the rest of this form. If you answered "yes," go on to the ne
the rest of this form. If you answered "yes," go on to the ne
☐ Yes ☐ No
105
this person or organization?  Yes No the rest of this form. If you answered "yes," go on to the ne
4 minutes
See Back)

•	ou an e mental	lected official who is appearing sobody?	olely or	n behalf of	your office of	for your mun	icipality or other  No
		red "yes" to the question, <b>STOP</b> . You answered "no" to the question, g				is form, except t	hat you must sign
If you that:	are beii	ng paid for your representation, or	if your	арреатапсе	is part of othe	r paid duties, de	you understand
	1.,	Before you engage in lobbying as with the City Clerk?	a lobby	rist, you or y	our principal i	must file an auth	norization No
	2.,	Your principal is not permitted to with the City Clerk?	o author	rize you to	lobby unless th	he principal is 1	egistered No
	3	If your principal spends or will or period (calendar quarter), the princ the remaining quarters of the calen	cipal m	ust file expe			
		ed "no" to any of the last three que a 103 of the City-County Building, M				at 266-4601 or	go to the Clerk's
Date _		Signature	e				
		Print Nan	ne				
*		***********			*****	******	

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

	Nam	e Brenda	Baker
Agenda No. 29	Add		indler Ave.
	1100	Madica	11/ 522/1
		MAGISUM	7
Please check the appropriate boxes:	•		,
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			1 3
Oppose	×	X	X
Neither support nor oppose			
I wish to speak			
Available for information only			
Name, address and telephone number of a MADISM CHILDREN'S MV		ganization you are represented to the control of th	root, Madlon, W 52703
Are you being paid for your representatio	n?		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? rest of this form. If you d	Yes No inswered "yes," go on to the next
Speaking Limit:		4 minutes	
	(See	Back)	
REGISTRANT #			
		DECIC	TRANT #

Are you an e governmental	lected 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?
(If you answer Office at 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 Sel	1-20, 2005 Signature Brenda Bakev  Print Name Brenda Bakev

# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

		PRINT NA	AME CLEARLY		
	Nam	e Amanda	Fick		
Agenda No. 29	Add	Address 28 Sherman Terrace #5 Madison, WI 53704			
and the second s		Madison	Wi July		
Please check the appropriate boxes:					
	01880	01881	01985		
	Referendum	Hardship Exemption	Repealing smoking ban		
Support			144,004,004		
Oppose	X	X	<u> </u>		
Neither support nor oppose					
I wish to speak					
Available for information only					
A 1	ation9		☐ Yes     No		
Are you being paid for your representa	ation?		Yes No		
Are you appearing as part of your othe (If you answered "no," STOP; you ne question)	er paid duties for this red not complete the	s person or organization? rest of this form. If you a	Yes Mo nswered "yes," go on to the next		
Speaking Limit:	•••••••••	4 minutes			
	(See ]	Back)			
REGISTRANT #		<b>-</b> ,			
		<b>REGIS</b>	TRANT #		

	ou an e nmental	elected official who is appearing solely on behalf of your office or body?	for your muni	cipality or other  No
		red "yes" to the question, <b>STOP</b> . You need not complete the rest of this jou answered "no" to the question, go on to the next question.)	form, except th	at you must sign
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 mu with the City Clerk?	ist file an auth	orization No
	2.	Your principal is not permitted to authorize you to lobby unless the with the City Clerk?	principal is r	egistered No
•	3.	If your principal spends or will owe more than \$500 for lobbying serperiod (calendar quarter), the principal must file expense statements the remaining quarters of the calendar year?		
		red "no" to any of the last three questions, please call the City Clerk at n 103 of the City-County Building, Madison, for more information.)	266-4601 or g	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.

		FRINT INF	AVIE CLEARLI		
	Nam		185		
Agenda No. 29	Add	Address 300 N. Pineline St			
		Madison, W. 53703			
300		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	· ·		
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					
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.)	paid duties for thi d 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			
	(See	Back)			
REGISTRANT #	(233	<b>,</b>			
*************************					
		<b>REGIS</b> '	TRANT#		

	ou an e mental	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 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?
	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 a 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 Add	ress 300 N. Modison	ROTHE PINCENCES St. WI S3403
Please check the appropriate boxes:			•
	01880	01881	01985
	Referendum	Hardship Exemption	Repealing smoking ban
Support			
Oppose	×	×	<b>X</b>
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	enting:
		ganization you are represe	
Name, address and telephone number of  Are you being paid for your representati		ganization you are represe	enting:
Are you being paid for your representation  Are you appearing as part of your other (If you answered "no," STOP; you need	ion?	s person or organization?	
	ion?  paid duties for thi  d not complete the	s person or organization? erest of this form. If you a	
Are you being paid for your representation.  Are you appearing as part of your other (If you answered "no," STOP; you need question.)	ion? paid duties for thi d not complete the	s person or organization? erest of this form. If you a	

-		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?  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.

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Agenda No. 29	Addi	ress 程 125 N H	amilton St 4602
		Madisa	amilton St #602 W1 53703
and the state of t		11 (6-20-20-20-20-20-20-20-20-20-20-20-20-20-	
Disease shoot the ammonists hower			
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			
(If you answered "no," <b>STOP;</b> you nee question.)	d not complete the	e rest of this form. If you a	nswered "yes," go on to the next
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
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 the control o	d not complete the	e rest of this form. If you a	nswered "yes," go on to the next
At this meeting are you representing an (If you answered "no," STOP; you nee question.)  Name, address and telephone number of the control of	d not complete the feach person or or or or or or or or or or?	ganization you are represes person or organization?	nswered "yes," go on to the next
At this meeting are you representing an (If you answered "no," STOP; you need question.)  Name, address and telephone number of the control o	d not complete the feach person or	ganization you are represess person or organization?  rest of this form. If you are	nswered "yes," go on to the next
At this meeting are you representing an (If you answered "no," STOP; you need question.)  Name, address and telephone number of the control o	f each person or or or one one one or	ganization you are represess person or organization?  rest of this form. If you are rest of this form. If you are	nswered "yes," go on to the next
At this meeting are you representing an (If you answered "no," STOP; you nee question.)  Name, address and telephone number of	f each person or or or one one one or	ganization you are represess person or organization?  rest of this form. If you are	nswered "yes," go on to the next  nting:  Yes No

Are you a	n 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 If you answered "no" to the question, go on to the next question.)
If you are 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?  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?
	wered "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.

Agenda No. 29	Nam Add	tess 106 W.  Madis	Milsfed Mifflin St. Dr., Wi 5370
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			
At this meeting are you representing an of (If you answered "no," STOP; you need question.)  Name, address and telephone number of	not complete the	e rest of this form. If you a	nswered "yes," go on to the next
At this meeting are you representing an of (If you answered "no," STOP; you need question)	each person or or on?	ganization you are represe sperson or organization?	nting:  Yes No
At this meeting are you representing an of (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 to the part of your other part of your answered "no," STOP; you need to the part of your other part of your other part of your answered "no," STOP; you need to the part of your other part of your need you ne	each person or or on?  on?  onid duties for this not complete the	ganization you are represess person or organization?  e rest of this form. If you are	nting:  Yes No

Are you as governmen	n elected official who is a tal body?	appearing sole	ly on behalf of	your office or fo	or your mun	icipality or other
	wered "yes" to the question f you answered "no" to the				orm, except t	hat you must sign
If you are I that:	being paid for your represe	entation, or if	your appearance	is part of other p	oaid duties, d	o you understand
1	Before you engage in l with the City Clerk?	lobbying as a l	obbyist, you or y	our principal mu	st file an autl	norization No
2.	Your principal is not pwith the City Clerk?	permitted to a	uthorize you to l	obby unless the	principal is	registered No
3	If your principal spend period (calendar quarters the remaining quarters	er), the princip	al must file expe			
	vered "no" to any of the la com 103 of the City-County				266-4601 or	go to the Clerk's
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# City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

01880 Ferendum  Fation or a pomplete the	01881 Hardship Exemption  person other than yourself:	O1985 Repealing smoking ban  Yes No nswered "yes," go on to the nex
01880 Ferendum  Fation or a pomplete the	01881 Hardship Exemption  person other than yourself: e rest of this form. If you are	01985 Repealing smoking ban  V  Yes No nswered "yes," go on to the nex
01880 Ferendum  Fation or a pomplete the	01881 Hardship Exemption  person other than yourself: e rest of this form. If you are	01985 Repealing smoking ban  V  Yes No nswered "yes," go on to the nex
erendum  v v v v v v v v ation or a p omplete the	O1881 Hardship Exemption  person other than yourself: e rest of this form. If you are	01985 Repealing smoking ban  V  Yes No nswered "yes," go on to the nex
erendum  v v v v v v v v ation or a p omplete the	Hardship Exemption  person other than yourself: e rest of this form. If you are	Repealing smoking ban  V  Yes No  nswered "yes," go on to the nex
erendum  v v v v v v v v ation or a p omplete the	Hardship Exemption  person other than yourself: e rest of this form. If you are	Repealing smoking ban  V  Yes No  nswered "yes," go on to the nex
vation or a pomplete the	person other than yourself: e rest of this form. If you are	√  ☐ Yes ☐ No  nswered "yes," go on to the nex
cation or a j	e rest of this form. If you ar	nswered "yes," go on to the nex
cation or a j	e rest of this form. If you ar	nswered "yes," go on to the nex
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omplete the	e rest of this form. If you ar	nswered "yes," go on to the nex
omplete the	e rest of this form. If you ar	nswered "yes," go on to the nex
omplete the	e rest of this form. If you ar	nswered "yes," go on to the nex
		☐ Yes ☐ No
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ties for this implete the	s person or organization? erest of this form. If you ar	☐ Yes ☐ No nswered "yes," go on to the nex
	4 minutes	
(See	Back)	
7	mplete the	ties for this person or organization?  mplete the rest of this form. If you ar  minutes  (See Back)

	ou an e mental	lected official who is appearing solely on behalf of your office or for your municipality or other body?
(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 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?
	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 eall 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
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