		Date:
	CITY OF MADISON	
Registration Statement	Common Council	
Please Print ©539205-41		
US 372 () S	I DELLOW TE	=MKM
Agenda No. 7+53		
Agenda No.	Address 2313 SUGAR VERONA, C	DIVER RI
Please check the appropriate boxes:		
⊠ Support	and Wish to spea	ık
Oppose	Do not wish	
Neither Support Nor Oppose	Available to	answer questions
At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next que	complete the rest of this form. If you answ	Yes No No vered "yes," provide the name
Name, address and telephone number of each	person or organization you are representi	ng:
55M Health Care - 258	5-6730	
Are you being paid for your representation?		Yes No
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not question)	duties for this person or organization? complete the rest of this form If you answ	Yes No Yes No vered "yes," go on to the next
Speaking Limits: Public Hearing (Comm	non Council)5 minutes	
	3 minutes	

REGISTRATION STATEMENT - PAGE 2

	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	ered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question.)
If you are be that:	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?
	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information)
Date (LL)	Signature WWW CF F
	Din Name Hackley 1 Mark Clark

Date: 2-27-07

CITY OF MADISON

Registration Statement	Common Council COMMITTEE
Please Print	
05392,05413	PLEASE PRINT CLEARLY
7/2	Name Dennis Davidsaver Address 624 West Shore Dr. Madison 53715
Agenda No. 7453	Address 624 West Shore Dr.
	Madison 53715
Please check the appropriate boxes:	BANG BERKERANG BERKERANG BERKERANG BERKERANG BERKERANG. BERKERANG BERKERANG
Support Oppose Neither Support Nor Oppose	and Wish to speak Do not wish to speak Available to answer questions
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Name, address and telephone number of each	n person or organization you are representing:
NA	
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid (If you answered "no," STOP; you need not	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
question)	
	mon Council) 5 minutes 3 minutes

REGISTRATION STATEMENT - PAGE 2

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Date	Signature
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Date: 2/27/07

CITY OF MADISON

Please Print 0 5392, 05413	PLEASE PRINT CLEARLY
	일 보는 그래프를 하는 것 같아. 그렇게 하고 있는 것은 그를 모든 것이다.
Agenda No. 7 and 53	Name Tim Anderson Address 717 Vohn Nolen Prive
	Madum W1 53713
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppose	and Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organization (If you answered "no," STOP; you need not complete of who you represent and go on to the next question	ete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each person $SSMHC$	n or organization you are representing:
Are you being paid for your representation?	∑?Yes ☐ No
Are you appearing as part of your other paid duties (If you answered "no," STOP; you need not complet question)	for this person or organization?
Speaking Limits: Public Hearing (Common Co Information Hearing Other Items	3 minutes

REGISTRATION STATEMENT - PAGE 2

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Date	Signature Imon 4 au Print Name Tim Anders	
	Print Name 71m Anderson	