Date: 1. 7. 2006

# **CITY OF MADISON**

Registration Statement -	COMMON COUNCIL
	역 (COMMITTEE) 이 경험 등 전략 보고 있다. 이 시간 시간 시간 등 기간 등 전략 기간 시간
Please Print 67455	PLEASE PRINT CLEARLY
	Name THOMAS MILLER
Agenda No. 7	Address 29 F. WILSON ST # 507_ MNO (SOW W)
	MNOISON W
Please check the appropriate boxes:	
Support	and Wish to speak IF NOT ON CONSENT KAGA
Oppose	A voilable to encurer questions
Neither Support Nor Oppose	
	nization or a person other than yourself: Yes No complete the rest of this form. If you answered "yes," provide the name
of who you represent and go on to the next q	
Name, address and telephone number of each	h person or organization you are representing:
THE ALEXANDER CO	WC BERNER BROKE BERNER
145 6 BX015R \$	2p / 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
HADSON WI	2p 573/12
Are you being paid for your representation?	☐ Yes  MNo
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need not question)	duties for this person or organization? Yes No recomplete the rest of this form. If you answered "yes," go on to the next
	mon Council) 5 minutes 3 minutes

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
	red "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)
If you are bei that:	ng 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?
(Please go to Room 103 of t	the City Clerk's website <u>www.cityofmaetison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date	1/2006 Signature Juni A. NIIIA
	Print Name 1H6WV (71 UV)

	Date: 1-17-06
	CITY OF MADISON
Registration Statement	COMMON COUNCIL COMMITTEE
Please Print 02455	PLEASE PRINT CLEARLY
	Name STEFANIE MORITZ
Agenda No. / /	Name STEFANIE MORITZ  Address 530 W DOTT ST
	MADISON 53703
Please check the appropriate boxes:	
Support  Oppose Neither Support Nor Oppose  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 qu	ization or a person other than yourself: Yes XNo complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	
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 of	luties for this person or organization?   Yes   No  complete the rest of this form If you answered "yes," go on to the next

Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes

Other Items 3 minutes

question)

Speaking Limits:

	ected official or employee who is appearing solely on behalf of your office or for your municipality nental body?	y or
	red "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sou answered "no" to the question, go on to the next question)	ign
If you are b that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advi	sed
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.	
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.	
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?	
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office he City-County Building, Madison, for more information)	? at
Date	Signature	
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Date: 01.17.06

# **CITY OF MADISON**

Registration Statement -	
	AN COMMITTEE 설명 등을 발표하는 경험에 발표하는 경험에 들었다. 설명 등을 통해 있는 것은 사람들은 사람들이 모든 사람들이 되었다.
Please Print 02455	PLEASE PRINT CLEARLY
	Name ED FREER JR
Agenda No.	Address 625 WILLIAMSON ST
。這一時中華語表記的一個人的問題也	MADISON, WI.
Place shock the appropriets have	
Please check the appropriate boxes:	아이트 전에 가는 사람들이 되는 것이 되었다. 그는 사람들은 사람들이 되었다. 그는 사람들은 사람들이 되었다. 그는 사람들이 되었다. 사람들이 사용하는 것들은 사람들이 되었다. 그는 사람들이 가장 보는 것이 되었다. 그는 사람들이 되었다.
Support	and ☐ Wish to speak ☐ Do not wish to speak
Oppose	A vailable to answer questions
Neither Support Nor Oppose	
	nization or a person other than yourself: Yes No
(If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next q	complete the rest of this form. If you answered "yes," provide the name uestion.)
	h person or organization you are representing:
THE ALEXANDER	OMPMY
195 EAST BAC	WER POSP
Maniera WI	
$\frac{1}{2}$	
Are you being paid for your representation?	✓ Yes □ No
Are you appearing as part of your other paid	duties for this person or organization? Yes No
(If you answered "no," STOP; you need not	complete the rest of this form. If you answered "yes," go on to the next
question)	
	mon Council) 5 minutes
Information Hearing Other Items	

Are you an eleother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
	red "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question)
If you are bei that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
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	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 01.	17.06 Signature
	Print Name <u>EDUARO</u> J. FREER

	CITY OF MADISON	
Registration Statement	COMMON COUNCIL COMMITTEE	
Please Print 02455	PLEASE PRINT CLEARLY	
Agenda No.	Name NATALIE BOCK Address 822 HIAWATHA DE	
Please check the appropriate boxes:	$-m_{m,sod}$ $\omega$ , 53711	
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 or a person other than yourself:  (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of who you represent and go on to the next question)		
Name, address and telephone number of each	person or organization you are representing:	
Te Clyander	Company	
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 of question)		
	non Council) 5 minutes 3 minutes	

Date: 1 17 06

Other Items 3 minutes

			집통 경영 경영 사람들은 말이 있다고 하고 모양이 되었다. 그렇게 하고 있다.
	elected official or employe mental body?	e who is appeari	ng solely on behalf of your office or for your municipality or Yes No
	ered "yes" to the question you answered "no" to the		ed not complete the rest of this form, except that you must sign to the next question)
If you are be that:	eing paid for your represe	ntation, or if yo	ur appearance is part of other paid duties, please be advised
1	Before you engage in lewith the City Clerk.	obbying as a lob	byist, you or your principal must file an authorization
2.	Your principal is not p City Clerk	ermitted to auth	orize you to lobby unless you are registered with the
3.		principal must	ore than \$1,000 for lobbying services in any reporting file expense statements with the City Clerk for the
	to the City Clerk's webs the City-County Building,		adison.com/clerk/index.html or go to the Clerk's Office at ore information)
Date 1. )	7.06	Signature	Notalu Alach
		Print Name	

	Date: 1-1706
	CITY OF MADISON
Registration Statement	COMMON COUNCIL
	COMMITTEE
Please Print 02455	PLEASE PRINT CLEARLY
	Name Marsha Rummel
Agenda No. 20	Address 1339 Rutlelge St #2
Tid stakeholders	Address 1339 Rutlelge St #2 Madism
Please check the appropriate boxes:  Support Oppose Neither Support Nor Oppose	and X Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an organ If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next qu	complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	person or organization you are representing:
Marquette 1	Jughborhood ASSOC
Are you being paid for your representation?	☐ Yes ☐ XNo

(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next

Yes

Are you appearing as part of your other paid duties for this person or organization?

Public Hearing (Common Council) 5 minutes

Information Hearing 3 minutes
Other Items 3 minutes

question.)

Speaking Limits:

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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)
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	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name