

Date: 10-20-09

**CITY OF MADISON**

**Registration Statement - Common Council**  
COMMITTEE

Please Print

Agenda No. 55-Nuovone  
15806

**PLEASE PRINT CLEARLY**

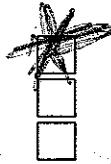
Name

Rosemary Lee

Address

111 W Wilson  
MADISON

Please check the appropriate boxes:



**Support**  
**Oppose**  
**Neither Support Nor Oppose**

and

Wish to speak leaving  
 Do not wish to speak ←  
 Available to answer questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," 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:

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Are you being paid for your representation?

Yes  No

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

Speaking Limits:

Public Hearing (Common Council).....	5 minutes
Information Hearing.....	3 minutes
Other Items.....	3 minutes

**(SEE BACK)**

## REGISTRATION STATEMENT - PAGE 2

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

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

If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised 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 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 the City Clerk's website [www.cityofmadison.com/clerk/index.html](http://www.cityofmadison.com/clerk/index.html) or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)*

Date \_\_\_\_\_

Signature \_\_\_\_\_

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

Date: 10/20/09

**CITY OF MADISON**

**Registration Statement - Common Council**

COMMITTEE

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Agenda No. 55  
15806

**PLEASE PRINT CLEARLY**

Name

Address

Nancy Jensen

702 N. High Point Rd  
Madison, WI

Please check the appropriate boxes:

Support *Repeal of sunset of CNO*  
 Oppose *Version 2*  
 Neither Support Nor Oppose

and

Wish to speak  
 Do not wish to speak  
 Available to answer questions *if not too late*

At this meeting are you representing an organization or a person other than yourself:  Yes  No

*(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," 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:

Apartment Association of South Central WI  
702 N. High Point Rd  
Madison, WI

Are you being paid for your representation?

Yes  No

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Date 10/20/09

Signature Nancy Jensen

Print Name Nancy Jensen

Date: 10/20/09

**CITY OF MADISON**

**Registration Statement -**

**Common Council**  
COMMITTEE

**Please Print**

Agenda No.

*Chronic #55  
Museum  
15806*

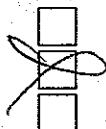
**PLEASE PRINT CLEARLY**

Name

Address

*Brenda Konul  
30 W Hurle*

Please check the appropriate boxes:



**Support**  
**Oppose**  
**Neither Support Nor Oppose**

and

Wish to speak  
 Do not wish to speak  
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Date \_\_\_\_\_

Signature \_\_\_\_\_

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