00335

Date: Feb 22, 2005

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print		
		Name URlis Stink
Agenda No2=		Address 101 Acadia Dy
		MAdison, WI 5371
Please check the ap	opropriate boxes:	
<b>□</b> Support		☐ Oppose
Wish to		☐ Wish to speak
	wish to speak	Do not wish to speak
[⊠ Availal	ole to answer questions	☐ Available to answer questions
		erson or organization you are representing:
Are you being paid	for your representation?	☐ Yes ☐ No
Are you appearing a		
question)	as part of your other paid du no," STOP; you need not co	ties for this person or organization? Yes No omplete the rest of this form. If you answered "yes," go on to the
question.)  Speaking Limits:	no," <b>STOP;</b> you need not co  Public Hearing	omplete the rest of this form. If you answered "yes," go on to the  5 minutes
question)	no," STOP; you need not co  Public Hearing  Information Hearing	omplete the rest of this form. If you answered "yes," go on to the5 minutes

## Registration Statement - Page 2

Are you ar	elected official who is appearing solely on behalf of your office or for your municipality or other al body?
The state of the s	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 t 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?
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

00335

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Date:	<u>&amp;</u>	<u>- ≪</u>	$\propto$	705	- 1	

## City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print				
Agenda No. 27		Name Rose Address III W	MARY LET WILSON # 108 OJSON	
		MAU	0 550N	
Please check the app	ropriate boxes:			
Support Wish to s Do not w Available	peak ish to speak to answer questions		<b>Oppose</b> ☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer que	estions
(If you answered "no question)	ou representing an organization," STOP; you need not complete lephone number of each person	ete the rest of this fo	orm. If you answered "yes,	☐ No " go on to the next
Are you being paid fo	your representation?		☐ Yes	□No
Are you appearing as (If you answered "no, question.)	part of your other paid duties to "STOP; you need not completed	for this person or orgete the rest of this fo	ganization?	□ No " go on to the next
Speaking Limits:	Public Hearing Information Hearing Other Items	5 minutes		

## Registration Statement - Page 2

Are you an government	elected official who is appearing solely on behalf of your office or for your municipality or other     Yes   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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Date	Signature
	Print Name