Date: 3/19/2006

CITY OF MADISON

Registration Statement -	COMMITTEE
Please Print 04209	PLEASE PRINT CLEARLY
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	Name THOMAS MILLER
Agenda No.	Address 29 E. WILSON ST. #507
	MADISON, WI
Please check the appropriate boxes:	
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Support	and Wish to speak ONLY (FNOT ON
Oppose	□ Do not wish to speak CONSCUT
Neither Support Nor Oppose	Available to answer questions AGELLE
(If you answered "no," STOP ; you need not of who you represent and go on to the next que Name, address and telephone number of each	
145 E-BADGER ROA	. The classical probability of the contract of the contract of $m{v}$
M KO1500 W/ 073	0713 608 258 5580
Are you being paid for your representation?	☐ Yes
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.)	duties for this person or organization? Yes No complete the rest of this form If you answered "yes," go on to the next
	mon Council) 5 minutes 3 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, 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 bei that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
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 at the City-County Building, Madison, for more information.)
Date	$\sqrt{9/200}$ Signature Signature
	Print Name 715WAS C. MULL

Date: Sept 19 2006

CITY OF MADISON

Registration Statement	Common Council
요즘 사람이 많은 회장 전기를 받는 것 같은 것을 들었다. 다른 사람들은 사람들은 사람들이 살아 보고 있는 사람들이 있는 사람들이다.	COMMITTEE
Please Print 04209	PLEASE PRINT CLEARLY
	Name NATALIE ROCK
Agenda No. 13	Address 822 HIAWATHA DR
	MADISON W.
Please check the appropriate boxes:	CO TOK 2 110
⊠ Support	and Wish to speak CONSENT AGENDA Do not wish to speak
Oppose	
Neither Support Nor Oppose	e 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 quantity	complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	n person or organization you are representing:
145 F. BADGER	2 KORD
Are you being paid for your representation?	∑ Yes □ No
	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

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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? 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)
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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 he City-County Building, Madison, for more information.)
Date <u>S</u> Q	H19 2006 Signature Natale Bock
	Print Name

	Date: $\frac{9}{19}/0\zeta$
	CITY OF MADISON
Registration Statement -	Common Council
Please Print \$\times \forall 209\$ Agenda No. 13	PLEASE PRINT CLEARLY Name Vonathan Cooper Address 208 S. Henry St. Madison 53703
Please check the appropriate boxes:	사용으로 되었다. 전환 경험 전환 경험 등록 경험 경험을 하는 것은 사용으로 함께 보고 있다. 2008년 - 1일 - 1일 전환 경험
SupportOpposeNeither Support Nor Oppose	and Wish to speak Do not wish to speak 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 qu	complete the rest of this form If you answered "yes," provide the name
Name, address and telephone number of each	있다는 것 같다. 그런 하는데, 하는데 (12) 그런 나는데 그런 그런 그는 그는 이 얼마나는데 그 것이 얼마나 모든
Capital Neighborhoods C	apitol West Phase I Steering Committee
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 question)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
	mon Council) 5 minutes 3 minutes

Other Items 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, 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)
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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	19/06 Signature Jourth D. Cooper Print Name Jonathan D. Cooper
	선물들은 근처를 하는 다른 사람들은 하는 하는 것이 되는 경찰에는 그리면 살아들이 얼마나 하는 일이 살아 부모르는 것을 가는 것이다.

		Date: <u>9-19-06</u>
	CITY OF MADISON	
Registration Statement	Common Council	
Please Print © 4209 Agenda No.	PLEASE PRINT CLEARLY Name HATE HOVAL Address 625 Williamson Medisin W	, st
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	nization or a person other than yourself: complete the rest of this form. If you ans	n to speak o answer questions Yes No
Name, address and telephone number of each	person or organization you are represent	ting:
Mexande Cayan E.	Bage Rd. MAD	sol W 5
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 question)		Yes No No wered "yes," go on to the nex
Speaking Limits: Public Hearing (Com	non Council) 5 minutes	

Information Hearing3 minutesOther Items3 minutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?
If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign his form If you answered "no" to the question, go on to the next question)
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Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information)
Date 9-19-06 Signature 1 / 1 / 1 / 1
Print Name Admin (Com