Date: 6/19/2007

City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

| Please Print Maria Garda | PRINT NAME CLEARLY |
|--|--|
| Agenda No. 2 | Name Tres Amigos Address 6722 Odona RA Madison, Wi |
| Please check the appropriate boxes: | |
| question) | ☐ Oppose ☐ Wish to speak ☐ Do not wish to speak ☐ Available to answer questions ganization or a person other than yourself: ☐ Yes ☐ No not complete the rest of this form If you answered "yes," go on to the next ch person or organization you are representing: |
| | |
| | |
| Are you being paid for your representation | ? ☐ Yes ☐ No |
| Are you appearing as part of your other pai (If you answered "no," STOP; you need no question) | d duties for this person or organization? Yes No ot complete the rest of this form If you answered "yes," go on to the next |
| Speaking Limits: Public Hearing Information Hearin Other Items | g 5 minutes |

Registration Statement - Page 2

| Are you an o | lected official who is appearing solely on behalf of your office or for your municipality or other body? |
|---------------------|--|
| | ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question) |
| If you are be that: | ng 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? |
| | ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's In 103 of the City-County Building, Madison, for more information) |
| Date | Signature |
| | Print Name |

| Date: | | 0/ | 19 | /(| 01 | 1 | | |
|-------|---|----|----|----|----|---|------|---|
| Date. | - | | | | | 1 | | - |

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| Please Print | Tiga Herno | ndez 1 | PRINT NAME CLEARLY |
|--------------------------------|---|---------------------------|---|
| Agenda No. | <u>L</u> | Name V-US Address 677 | : Amgos 22 odona Rd |
| Please check the appro | opriate boxes: | | |
| At this meeting are yo | sh to speak to answer questions ou representing an organiza | tion or a person other | Oppose Wish to speak Do not wish to speak Available to answer questions than yourself: Yes No form If you answered "yes," go on to the next |
| Name, address and te | ephone number of each pe | erson or organization yo | ou are representing: |
| | | | |
| | | | |
| Are you appearing as | or your representation? part of your other paid dut | ties for this person or o | ☐ Yes ☐ No rganization? ☐ Yes ☐ No |
| (If you answered "no question) | ," STOP; you need not co | mplete the rest of this , | form If you answered "yes," go on to the nex |
| Speaking Limits: | Public Heating Information Heating | 5 minute | |

Registration Statement - Page 2

| Are you an egovernmental | elected official who is appearing solely on behalf of your office or for your municipality or other body? |
|--------------------------|--|
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| Date | Signature |
| | Print Name |