Date: 05/19/10

City of Madison Registration Statement - Alcohol License Review Committee

You must register before the ALRC considers your item.

	PLEAS	SE PRINT CL	EARLY		
Agenda No. 2/ Required – Can be obton registration table.		Name J Address	ie Yang -821 Int Madison, U	erlake IL 537	Pass 719
Please check the appro	opriate boxes:				
At this meeting are yo			ther than yourself:	to speak answer ques	☑ No
•	lephone number of each per	son or organizati	on vou are represent	ino	
	copmond named of each per	our or organization	on you are represent.		
				_ .	
Are you being paid fo	r your representation?			Yes	No
Are you appearing as (If you answered "no, question)	part of your other paid dutie "STOP; you need not com	es for this person plete the rest of	or organization? this form. If you ans	☐ Yes wered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing				

Other Items 3 minutes