_	/ /s	
Date:	6.09	

	CITY OF MADISON		
Registration Statement	Common Council COMMITTEE		
Please Print			
	PLEASE PRINT NAME CLE	ARLY	
	Name ERIK MADISE	<u>. </u>	
Agenda No	Address 828 N. Brook	DWAY	
	MILWAUREE, W	No. of the second	27
Please check the appropriate box:	Please check th		
Support Oppose Neither Support Nor Oppose	AND Wish to spea	to speak	stions
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 answ	Yes vered "yes,"	No provide the name
Name, address and telephone number of each	person or organization you are representi	ng:	
WILDE FAMILY LIMITED	PARTNENSHIP	and the second	

Are you being paid for your representation?		Yes	□ No
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not a question.)	luties for this person or organization? complete the rest of this form If you answ	☐ Yes vered "yes,"	☐ No go on to the next
Information Hearing	non Council) 5 minutes 3 minutes 3 minutes		

Are you an electe other government	d official or employee al body?	e who is appear	ing solely on b	ehalf of your offi	ce or for your mynici	
(If you answered this form. If you a	"yes" to the question, nswered "no" to the o	STOP. You need question, go on the stion, go on the stion, go on the stick that	ed not complete to the next que	e the rest of this fo stion)	orm, except that you n	ıust sign
If you are being that:	paid for your represer	ntation, or if yo	ur appearance	is part of other p	oaid duties, please be	advised
	efore you engage in lotth the City Clerk	obbying as a lob	byist, you or y	our principal mus	t file an authorization	1
	our principal is not po ty Clerk	ermitted to auth	orize you to lo	obby unless you a	re registered with the	>
pe	your principal spends briod (half year), the mainder of the calend	principal must				
	e City Clerk's websi City-County Building,				go to the Clerk's C	Iffice at
Date 1-6-6	29	Signature	Sit L.	Merlie		
		Print Name	ERIK L.	Merlie MADISEN		

	Date:	
	CITY OF MADISON	
Registration Statement	- Common Council COMMITTEE	
Agenda No.	PLEASE PRINT NAME CLEARLY Name Kevin Delovey Address 33 & Mainst, Svite 900	
工2 11616	Madison, WI 53703	
Please check the appropriate box:	Please check the appropriate box:	
Support Oppose Neither Support Nor Oppo At this meeting are you representing an ore	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," provide the nan	ne
Name, address and telephone number of ea	ach person or organization you are representing:	
Are you being paid for your representation	n? Yes No	
Are you appearing as part of your other pa (If you answered "no," STOP; you need r question)	aid duties for this person or organization? Yes No not complete the rest of this form. If you answered "yes," go on to the ne	ext
Information Hearing	ommon Council) 5 minutes ng 3 minutes 3 minutes	

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		ected official or employee ental body?	who is appearing	ng solely on behalf of your o	office or for you	r municipality or 🔀 No
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If you a that:	are beir	ng paid for your represen	tation, or if you	ir appearance is part of other	er paid duties, p	blease be advised
	1	Before you engage in lol with the City Clerk	bbying as a lobl	oyist, you or your principal r	nust file an auth	norization
	2	Your principal is not pe City Clerk.	rmitted to autho	orize you to lobby unless yo	u are registered	l with the
	3.		principal must	re than \$1,000 for lobbying file expense statements wit		
	-	the City Clerk's websit he City-County Building, I		adison.com/clerk/index.html ore information)	or go to the	Clerk's Office at
Date	01	06/09	Signature	Ke Oul	\sim	
			Print Name	Kevin A Delor	rey	
)	

CITY OF MADISON

Registration Statement	COMMITTEE COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No	Name Sharon Bloom Wilde Antomotive Mando Address 1710 A day 164 Wankesha, WI, 53186
Please check the appropriate box:	Please check the appropriate box:
of who you represent and go on to the next q	nization or a person other than yourself: Yes No complete the rest of this form If you answered "yes," provide the name
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 t complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	amon Council) 5 minutes 3 minutes 3 minutes

		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental 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 a that:	re beir	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
}	l	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk
2	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 he City-County Building, Madison, for more information)
Date	<i>j</i>	16/09 Signature Reconfe Bloom

Date: 1/6/09

CITY OF MADISON

Registration Statement - Common Council

	Ç	OMMITTEE.			
Please Print		PLEASE F	PRINT NAME CLEA	RLY	
Agenda No.	11616		PATRICK J 1710 A H WANKESA	-ry 164	
Please check the app	propriate box:		Please check the	e appropriate box	x:
At this meeting are y (If you answered "no of who you represent	ou representing an organizar, "STOP; you need not contain and go on to the next quest elephone number of each pe	mplete the rest of tion.)	other than yourself: this form. If you answ	to speak answer questions Yes pered "yes," provi	n No
Are you appearing as	or your representation? s part of your other paid dut o," STOP; you need not con	ies for this perso mplete the rest o	n or organization? f this form. If you ansv	☐ Yes ☐ Yes ☐ Yes Ø o	No
Speaking Limits:	Public Hearing (Commo Information Hearing Other Items	3 1	minutes		

Are you a	an ele ernm	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental 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 that:	e beir	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.	a.	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 g Room 10:	go to 3 of th	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ne City-County Building, Madison, for more information.)
Date	1/	06/09 Signature Flague

Print Name

PAMICK I DONAHUE

Date: 1/6/09

CITY OF MADISON

Registrati	on Statement -	COMMITTEE	ouncii		
Please Print		PLEASE	PRINT NAME CLEA	ARLY	
Agenda No.	14	-	JORGE F. 20 DUNBAR CHASWICK,		
Please check the app	ropriate box:		Please check th		
Support Oppose Neither Su	pport Nor Oppos	AND	☐ Wish to spec ☐ Do not wish ☐ Available to	ak I to speak I answer ques	stions
(If you answered "no, of who you represent	," STOP; you need no and go on to the next	ot complete the rest question.)	n other than yourself: of this form. If you answ zation you are represent	wered "yes,"	No provide the name
Are you being paid fo	or your representation?	?		☐ Yes	⊠ No
Are you appearing as (If you answered "no question.)			son or organization? of this form. If you ans		⊠ No " go on to the next
Speaking Limits:	Public Hearing (Cor Information Hearing Other Items	g	3 minutes		

Are you an el other governr	lected 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 be that:	ing 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?
	o 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/	Signature Jose F. Whales Print Name JORGE F. 4109260