

CITY OF MADISON
Registration Statement for
Common Council Organizational Committee

Name Rosemary Lee
Address 111 W Wilson St

Date 9-10-88
Item #2 Office Budget

Support
 Oppose
 Neither Support or Oppose

Wish to Speak
 Do Not Wish to Speak
 Available to Answer Questions

At this meeting are you representing an organization or a person other than yourself: Yes No
(If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

Are you being paid for your representation? Yes No

Are you appearing as part of your other paid duties for this person or organization?
(If you answered "no" to both these questions, STOP. You need not complete the rest of this form.
If you answered "yes," turn over to the next question.) Yes No