

Date: \_\_\_\_\_

**CITY OF MADISON**

**Registration Statement - Common Council**

COMMITTEE

Please Print

05580  
05547

PLEASE PRINT CLEARLY

Name Will Sandstrom  
Address 2621 Moland St  
Madison WI

Agenda No. 4

Please check the appropriate boxes:

Support  
 **Oppose**  
 Neither Support Nor Oppose

and  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," provide the name of who you represent and go on to the next question.)

Name, address and telephone number of each person or organization you are representing:  
Fish & Wildlife Unlimited

Are you being paid for your representation?  Yes  No

Are you appearing as part of your other paid duties for this person or organization?  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.)

Speaking Limits: Public Hearing (Common Council)..... 5 minutes  
Information Hearing..... 3 minutes  
Other Items..... 3 minutes

(SEE BACK)

Handwritten initials/signature

**REGISTRATION STATEMENT - PAGE 2**

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?  Yes  No

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Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date: 2/6/07

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

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05547

PLEASE PRINT CLEARLY

Name Patrick McDonnell

Address 441 N. Paterson

Agenda No. <u>4</u>	<u>#05580</u>
<u>Streetcar</u>	

Please check the appropriate boxes:

- Support
- Oppose**
- Neither Support Nor Oppose

- and
- Wish to speak
  - Do not wish to speak
  - Available to answer questions

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

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Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date: 6 FEB 07

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

Please Print 05547  
05580

PLEASE PRINT CLEARLY

Name RAY ALLEN  
Address 26 Sumter Ct  
MAD

Agenda No. 4

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- Wish to speak
  - Do not wish to speak
  - Available to answer questions

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Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date: 02-06-07

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

Please Print

05547  
05580

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Name ROSEMARY LEE

Address 111 W WILSON ST #102  
MADISON 53702

Agenda No. 4-REFERENDUM

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- Wish to speak
  - Do not wish to speak
  - Available to answer questions

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_



Date: \_\_\_\_\_

**CITY OF MADISON**

**Registration Statement - Common Council**

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**PLEASE PRINT CLEARLY**

Agenda No. 4

Name

Peter Munro

Address

4102 Meadow Valley  
Madison WI 53704

Please check the appropriate boxes:

- Support**  
 **Oppose**  
 **Neither Support Nor Oppose**

and

- Wish to speak**  
 **Do not wish to speak**  
 **Available to answer questions**

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Date: \_\_\_\_\_

CITY OF MADISON

Registration Statement - Common Council  
COMMITTEE

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05580  
05547

PLEASE PRINT CLEARLY

Agenda No. 8 127

Name PETER MURPHY  
Address 41102 Meadow Valley Dr  
Madison 53704

Please check the appropriate boxes:

- Support
- Oppose
- Neither Support Nor Oppose

- and
- Wish to speak
  - Do not wish to speak
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Print Name \_\_\_\_\_