

Date: 11-14-06

**CITY OF MADISON
Registration Statement - Common Council
2007 OPERATING BUDGET**

You must register before the Council considers your item.

Please Print

PLEASE PRINT CLEARLY

Amendment No.	<u>1 02398</u>
Amendment No.	_____
Amendment No.	_____
Amendment No.	_____
Amendment No.	_____

Name LORI KIEF

Address 4413 DOE CROSSING TR
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

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:

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

(SEE BACK)

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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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?

(Please go to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)

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Amendment No.	<u>1 - 02398</u>
Amendment No.	<u>10 - 02407</u>
Amendment No.	<u>13 - 02410</u>
Amendment No.	<u>26 - 02424</u>
Amendment No.	<u>30 - 02428</u>

Name JUSCIA ROBINSON

Address 2007 JENIFER ST 53704

Please check the appropriate boxes:

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

- and
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 - Do not wish to speak
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Amendment No.	<u>1-02398</u>
Amendment No.	<u>10-02407</u>
Amendment No.	<u>13-02410</u>
Amendment No.	<u>26-02424</u>
Amendment No.	<u>30-02428</u>

Name Steve Herick

Address 2007 Janifer
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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Amendment No.	<u>3-02400</u>
Amendment No.	<u>10-02407</u>
Amendment No.	<u>23-02421</u>
Amendment No.	<u>27-02425</u>

Name SATYA RHODES-COMMY
 Address 2642 HOARD ST

Please check the appropriate boxes. 30,40 02428, 02438

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

- and
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