

Date: 10/20/10

City of Madison  
Registration Statement – Alcohol License Review Committee

*You must register before the ALRC considers your item.*

PLEASE PRINT CLEARLY

Agenda No. 20092 18  
Required – Can be obtained from agenda on registration table.

Name Pat Burke  
Address 724 S GAMMON RD

Please check the appropriate boxes:

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

**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:  
The New Old Town Pub

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.....5 minutes  
Information Hearing.....5 minutes  
Other Items.....3 minutes

(See Back)

Date: 10/20/10

### City of Madison Registration Statement – Alcohol License Review Committee

*You must register before the ALRC considers your item.*

PLEASE PRINT CLEARLY

Agenda No. 2009Z 18  
Required – Can be obtained from agenda on registration table.

Name Lori Zenz  
Address 724 S Gammon Rd  
6313 Westin Dr  
Madison WI 53719

Please check the appropriate boxes:



**Support**

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



**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:

The New Old town Pub, LLC 724 S Gammon 515-1093

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.....5 minutes  
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(See Back)