Date:	11	-08-	05	
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City of Madison Registration Statement - Common Council

You must register before the Council considers your item.

Please Print		${f P}$	RINT NAME CLI	EARLY
Agenda No. <u>/ φ</u>	22		SEMAPRY LZE W WILSON #108)ISON 53903	
			Oppose ☐ Wish to speak ☐ Do not wish to spea ☐ Available to answer	
(If you answered "question)	you representing an organization," STOP; you need not contact telephone number of each pe	mplete the rest of thi	is form. If you answered "	tes ANO yes," go on to the next
Are you being paid	for your representation?		□ Y	′es □ No
	as part of your other paid dut no," STOP; you need not con			the contract of the trace of the contract of t
Speaking Limits:	Public Hearing Information Hearing Other Items	5 mim 5 mim 3 mim	ıtes	

Are you ar	elected official who is appearing solely on behalf of your office or for your municipality or other al body?
(If you answ this form. If	vered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign you answered "no" to the question, go on to the next question)
If you are b that:	eing paid for your representation, or if your appearance is part of other paid duties, do you understand
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 the principal is registered with the City Clerk?
3	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
If you answ Office at Roo	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Yes

City of Madison Registration Statement - Common Council

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Are you being paid for your representation?

Please Print

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 3 minutes

Are you an government	elected official who is appearing solely on behalf of your office or for your municipality or other body?
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Date: //-08-05 ~

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Please Print		PRINT NAM	E CLEARLY
		Name <u>WALTER</u>	BOROWSK
Agenda No.		Address <u>5/26 7</u>	MAHAWK TR
		<u>m A01501</u>) at
Please check the a	ppropriate boxes:		
Support		☐ Oppose	
☐ Wish t		Wish to sp	eak
Do not	wish to speak	Do not wis	h to speak
/ Availa	wish to speak ble to answer questions		o answer questions
At this meeting are	Woll representing an organis	zation or a person other than yourself:	₩Yes □No
		omplete the rest of this form. If you an	
question.)			
	왕이 되었는 중요한 사람이 되었다. 그 아이는 사람들은 사람들이 얼마나 없다는 것 같아.	erson or organization you are represen	ting:
MA1519	NS Kest		
Q1 1.	n's Rest VIVERSOLF	$\mathcal{C}\mathcal{D}$	
0000			
Are you being paid	for your representation?		∰ Yes □ No
Are you appearing:	es part of your other paid du	ties for this person or organization?	↑ Yes □ No
		mplete the rest of this form. If you an:	
Speaking Limits:	Public Hearing	5 minutes	
	Information Hearing	5 minutes	
	Other Items	3 minutes	

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Date	Signature
	Print Name

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Please Print		PRINT NAM	TE CLEARLY
Agenda No. <u>/ (</u>	5 02022	Name <u>W///AM</u> Address <u>/47 WES</u> <u>MAPISOR</u>	WETZ T Wylson ST #20 J, WI
Please check the ap	ppropriate boxes:		
At this meeting are (If you answered "question.)	o speak wish to speak ble to answer questions you representing an organiz no, "STOP; you need not co	Oppose Wish to specific Do not with Available station or a person other than yourself: somplete the rest of this form. If you are represented as the control of the contro	sh to speak to answer questions Yes No nswered "yes," go on to the next
Are you being paid	for your representation?		☐ Yes ☐ No
		ties for this person or organization? mplete the rest of this form. If you ar	☐ Yes ☐ No nswered "yes," go on to the next
Speaking Limits:	Public Hearing Information Hearing Other Items	5 minutes	

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