

5

Complete this form if you wish to speak before the Board. If you wish to submit written comments and have them entered into the minutes record, please complete and give to the Secretary.

CITY OF MADISON

Registration Statement

BOARD OF PUBLIC WORKS

Name Albert BRYAN
Address 4322 Hillcrest Dr

DATE _____
ITEM NO. 5 ON AGENDA

- Support
- Oppose
- See Written comments for the record

- 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 - you need not complete the remainder of this form.

If you answered Yes to above question please complete:

Name, Address and phone number of each person or organization you are presenting today:

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 YES - continue - on other side please

PLEASE SEE OTHER SIDE

50519



COMMISSION / COMMITTEE REGISTRATION FORM

COMMISSION/COMMITTEE _____ DATE 2/21/18

SUBJECT/ADDRESS/TOPIC Calypso Fremont Resurface AGENDA ITEM NO. _____

YOUR NAME Fred Eggs YOUR ADDRESS 2718 Willard Av

Please check the appropriate boxes:

<input type="checkbox"/> SUPPORT <input checked="" type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions	<input type="checkbox"/> OPPOSE <input type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions	<input type="checkbox"/> NEITHER SUPPORT NOR OPPOSE <input type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions
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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 questions on the back side of this form.



COMMISSION / COMMITTEE REGISTRATION FORM

COMMISSION/COMMITTEE _____ DATE 2/21/18
 SUBJECT/ADDRESS/TOPIC Assessment / other AGENDA ITEM NO. _____

YOUR NAME Vivian Smith YOUR ADDRESS 2505 Fremont Ave

Please check the appropriate boxes:

SUPPORT
 Wish to speak (3 min. limit)
 Do not wish to speak
 Available to answer questions

OPPOSE
 Wish to speak (3 min. limit)
 Do not wish to speak
 Available to answer questions

NEITHER SUPPORT NOR OPPOSE
 Wish to speak (3 min. limit)
 Do not wish to speak
 Available to answer questions

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If you answered "yes," go on to the next questions on the back side of this form.



COMMISSION / COMMITTEE REGISTRATION FORM

COMMISSION/COMMITTEE Public Work DATE Feb 21, 2018
 SUBJECT/ADDRESS/TOPIC Calypso Rd / Fremont Ave AGENDA ITEM NO. _____
Manufacture

YOUR NAME Marie Jacobson YOUR ADDRESS 2718 Willard Ave
2501 Fremont Ave

Please check the appropriate boxes:

SUPPORT
 Wish to speak (3 min. limit)
 Do not wish to speak
 Available to answer questions

OPPOSE
 Wish to speak (3 min. limit)
 Do not wish to speak
 Available to answer questions

NEITHER SUPPORT NOR OPPOSE
 Wish to speak (3 min. limit)
 Do not wish to speak
 Available to answer questions

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COMMISSION / COMMITTEE REGISTRATION FORM

15518
18093
40933
50519

Madison

COMMISSION/COMMITTEE <u>Dept. of Public Works</u>	DATE <u>2/21/17</u>
SUBJECT/ADDRESS/TOPIC <u>Hillcrest Drive Resurfacing</u>	AGENDA ITEM NO. _____

YOUR NAME <u>Darrin Landes</u>	YOUR ADDRESS <u>3705 Hillcrest Dr.</u>	
Please check the appropriate boxes:		
<input type="checkbox"/> SUPPORT <input type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions	<input type="checkbox"/> OPPOSE <input type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions	<input checked="" type="checkbox"/> NEITHER SUPPORT NOR OPPOSE <input checked="" type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions

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