	२	17	10
Date:	<u> </u>		10

City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

	PLEAS	E PRINT CLE	EARLY	11	
Agenda No. <u>Required</u> – Can be of on registration table.	Y-17724 btained from agenda	Name	H/107	w Hor	- ucock
Please check the appr	ropriate boxes:				
At this meeting are you (If you answered "no question.)	speak ish to speak to to answer questions ou representing an organizati o, "STOP; you need not comp	plete the rest of th	ner than yourself: his form. If you answ	to speak answer question Yes wered "yes," go	No

Are you being paid fo	or your representation?			☐ Yes	X No
	part of your other paid dutie, "STOP; you need not comp			∏Yes Â wered "yes," go	No on to the next
Speaking Limits:	Public Hearing. Information Hearing				

Other Items 3 minutes

Registration Statement - Page 2

Are you an governments	elected official who is appearing solely on behalf of your office or for your municipality or other labody?
	ered "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? Yes No
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?
	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

Dațe:	3-	_}-	10	

City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

PLEASE PRINT CLEARLY

	Name Antrowas Harmon
Agenda No. PY-17724	Name Autoway Hackman Address 625 ULRA C+ 46
Required – Can be obtained from agenda	Address 625 VOIA ET 46
on registration table,	MADISON, WZ 57714
3	7,000.33
Please check the appropriate boxes:	
Support	Owners
	Oppose
Wish to speak Do not wish to speak	☐ Wish to speak☐ Do not wish to speak
Available to answer questions	Available to answer questions
At this meeting are you representing an organ (If you answered "no," STOP; you need not question.) Name, address and telephone number of each	complete the rest of this form. If you answered "yes," go on to the next
Are you being paid for your representation?	☐ Yes No
Are you being paid for your representation?	[] 1 c2
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question)	duties for this person or organization? Yes \(\sum \) No complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing	5 minutes
	3 minutes

$Registration\ Statement-Page\ 2$

	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other Yes Wo
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Date	3-17	Print Name ANTOWN MALLMON