Date: $\frac{1}{1400}$

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. 37-02436 Amendment No. 37-02436 Amendment No. Amendment No. Amendment No.	Name Address 309 Hermine St Madizon W153714
Please check the appropriate boxes: Support Oppose Neither Support Nor Oppose At this meeting are you representing an organize (If you answered "no," STOP; you need not cot of who you represent and go on to the next quest of who address and telephone number of each personness.	mplete the rest of this form. If you answered "yes," provide the name tion.)
question.) Speaking Limits: Public Hearing (Commo	on Council)5 minutes
Information Hearing	2 minutes

REGISTRATION STATEMENT - PAGE 2

Are you an el other governr	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?		
	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 be that:	sing paid for your representation, or if your appearance is part of other paid duties, please be advised		
	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 you are registered with the City Clerk		
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?		
	o the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information)		
Date	Signature		
	Harris Barrier (1997)		

Date: ___(\(\frac{14/06}{}{}\)

CITY OF MADISON Registration Statement - Common Council 2007 OPERATING BUDGET

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Please Print			
		PLEASE PRIN	
Amendment No	6 02403	Name	Lori Nitel
Amendment No	8-02405	Address	3109 Hermina St.
Amendment No.	9-02406		3109 Hermina St. Madison W 537/4
Amendment No.	12 02409		
Amendment No.	18.02415		
Please check the app	propriate boxes:		
☐ Support		and	
Oppose			Do not wish to speak Available to answer questions
Neither S	upport Nor Oppose		Available to answer questions
of who you represen	o," STOP; you need not c t and go on to the next que elephone number of each	estion)	this form. If you answered "yes," provide the name ion you are representing:
Are you being paid 1	for your representation?		☐ Yes ☐ No
	s part of your other paid do," STOP; you need not co	-	or organization? Yes No this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ninutes

REGISTRATION STATEMENT - PAGE 2

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Date	Signature		
	Print Name		