

Date: 5/16/06

CITY OF MADISON

Registration Statement - Common Council

COMMITTEE

Please Print

03483

Agenda No. 88

PLEASE PRINT CLEARLY

Name

Ron Trachterberg

Address

2 East Mifflin St #200  
Madison WI

Please check the appropriate boxes:

☒  
☐  
☐

**Support**

**Oppose**

**Neither Support Nor Oppose**

and

☐

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," provide the name of who you represent and go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

Rich Mckay

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 (Common Council).....5 minutes

Information Hearing.....3 minutes

Other Items.....3 minutes

(SEE BACK)