ID# 06572
Date: 2-5-0%

CITY OF MADISON

Registration Statement - Common Council

	COM	MITTEE			
Please Print					
		PLEASE F	PRINT NAME CLE	ARLY	
		Name	JAMES	Mura	かのと
Agenda No.		Address	226 5	STATE	<u>5</u> 5
Please check the appr	ropriate box:		Please check the	ne appropriat	e box:
Support Oppose Neither Su	oport Nor Oppose	AND	☐ Wish to spe☐ Do not wish☐ Available to		ions
(If you answered "no,	n representing an organization of the company of the next question of the next question.	lete the rest of			☐ No provide the name
	ephone number of each person				
CL13	= FISHFOR	But	un ST L	1	
Are you being paid for	your representation?			Yes	No
	part of your other paid duties "STOP; you need not comp			Yes wered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Common of Information Hearing Other Items	3 1	minutes minutes minutes		

Are you an elother 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:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
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 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?
	to 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 2	-5-09 Signature (/-
	Print Name JAY175 MARDOR

	the second of th
	CITY OF MADISON
Registration Statement	Common Council
	COMMITTEE
Please Print	
	PLEASE PRINT NAME CLEARLY
	Name Bert Still
Agenda No.	Address 120 S. Franklin St
	53703
Please check the appropriate box:	Please check the appropriate box:
Support	Wish to speak
Oppose	AND Do not wish to speak
Neither Support Nor Oppose	Available to answer questions
	hree Berger - Parker kale berger
(1) H Fisher	person of organization you are representing.
fisher Development	POBy 1601 - Madison - 537 01
608213 2828	
Are you being paid for your representation?	□Yes □ No
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 To complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mon Council) 5 minutes 3 minutes 3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	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:	being paid for your representation, or if your appearance is part of other paid duties, please be advised
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 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?
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at fifther fifther of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

J0#06572

Date: 2/5/02

CITY OF MADISON

Registration Statement -Common Council COMMITTEE Please Print PLEASE PRINT NAME CLEARLY Agenda No. Please check the appropriate box: Please check the appropriate box: Wish to speak Support AND Do not wish to speak **Oppose** Available to answer questions **Neither Support Nor Oppose** At this meeting are you representing an organization or a person other than yourself: (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: Are you being paid for your representation? Yes □No Yes Are you appearing as part of your other paid duties for this person or organization? (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

		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 that:	ı are be	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
	14,	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?
		to 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
		Print Name

Date: 2/5/2008

CITY OF MADISON

Registration Statement - Common Council

Please Print		OMMITTEE			
1 lease 1 lin		PLEASE P	RINT NAME CLEA	IRLY	
Agenda No.		Name	EDELL ZEL 510 N. CARK	LERS COLL S	st.
·				·	
Please check the ap	propriate box:		Please check the	e appropriat	e box:
Support Oppose Neither St	apport Nor Oppose	AND	Wish to spea Do not wish Available to	to speak	tions
(If you answered "no	ou representing an organiz o, " STOP; you need not co t and go on to the next ques	mplete the rest of	other than yourself: this form If you answ	Yes yered "yes,"	No provide the name
Name, address and to	elephone number of each p	erson or organizat	ion you are representi	ng:	
				·	
Are you being paid f	or your representation?			Yes	□ No
Are you appearing as (If you answered "no question.)	s part of your other paid du p," STOP; you need not co	ties for this person complete the rest of	n or organization? Tthis form If you answ	☐ Yes wered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Commo	3 r	minutes		

	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body? Yes No
	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question)
If you are that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
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 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
	Print Name

Date: 1/5/65

CITY OF MADISON

Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print		PLEASE PR	INT NAME CLEA	RLY	
Agenda No		Address 🚄	SEASE ANSU L	DEVITION OF STORY	À,
Please check the appr	opriate box:		Please check the	e appropriate box:	
Support Oppose Neither Sup	pport Nor Oppose	AND	Wish to spea Do not wish Available to		ı
(If you answered "no," of who you represent a	u representing an organize of some of the country of the second of the second of the second phone number of each property.	omplete the rest of the stion.)	nis form. If you answ		ie name
Are you being paid for	your representation?			☐ Yes ☐ No	
	part of your other paid do "STOP; you need not c			Yes No wered "yes," go on to	the next
Speaking Limits:	Public Hearing (Comm Information Hearing	3 mi	inutes		

Are you an elected official or emporther governmental body?	loyee who is appearing solely on behalf of your office or for your municipality or Yes Yo			
	tion, STOP. You need not complete the rest of this form, except that you must sign the question, go on to the next question)			
If you are being paid for your repthat:	resentation, or if your appearance is part of other paid duties, please be advised			
Before you engage with the City Clerk	in lobbying as a lobbyist, you or your principal must file an authorization			
2 Your principal is n City Clerk	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
, , , ,	ends or will owe more than \$1,000 for lobbying services in any reporting the principal must file expense statements with the City Clerk for the lendar year?			
	vebsite <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ling, Madison, for more information.			
Date	Signature			
•	Print Name () EV ()			

Date: 2/5/08

CITY OF MADISON

Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print		PLEASE	E PRINT NAME CLEA	\RLY	
Agenda No.		Name Address	THY LARTOST 309 N TYANKI MAP	ER INST	
Please check the app	oropriate box:		Please check the	e appropria	te box:
Support Oppose Neither Su	apport Nor Oppose	AND	Wish to spea Do not wish Available to	to speak	tions
(If you answered "no of who you represent	ou representing an organiza," STOP; you need not con and go on to the next quest	nplete the resi tion.)	t of this form If you answ		No provide the name
Name, address and te	lephone number of each pe	rson or organ	zation you are representi	ng:	
Are you being paid for	or your representation?			Yes	□No
Are you appearing as (If you answered "no question)	s part of your other paid dut o, "STOP; you need not con	ies for this pe mplete the res	rson or organization? t of this form If you answ	☐ Yes wered "yes,"	☐ No ' go on to the next
Speaking Limits:	Public Hearing (Common Information Hearing				

Are you an el other governn	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question)
If you are beithat:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
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 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
	Print Name

10#06572 Date: 2/5/08

CITY OF MADISON

Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print		PLEASI	E PRINT NAME CLEA		
Agenda No		Name Address	Er.K Min 21 N Butle Madison	ton er St	
Please check the app	ropriate box:		Please check th	ie appropria	te box:
Support Oppose Neither Su	pport Nor Oppose	AND	Wish to spea □ Do not wish □ Available to		stions
(If you answered "no,	ou representing an organiza "STOP; you need not column and go on to the next quest	mplete the res	on other than yourself: t of this form. If you answ	☐ Yes wered "yes,"	₩ No provide the name
Name, address and tel	ephone number of each pe	erson or organ	ization you are represent	ing:	
Are you being paid fo	r your representation?			Yes	№ No
Are you appearing as (If you answered "no, question)	part of your other paid du " STOP; you need not co	ties for this pe implete the re	erson or organization? Set of this form If you ans	Yes Yes,'	No go on to the next
Speaking Limits:	Public Hearing (Commo		3 minutes		

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?		
	ed "yes" to the question, STOP . You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question)		
If you are bei that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised		
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 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?		
	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		
	Print Name		

				Date: 2-5-08	
		CITY OF MAI	DISON		
Registration	Statement	Common C	ouncil		
Please Print			EPRINT NAME CL Buck Su Axky B	그러움을 제작하는 사람들이 되는 것을 모르는 것이 없다.	
Agenda No. <u>/ M</u>		Address	Axky Bi	ryne/su	
Please check the approp	priate box:		Please check	the appropriate box:	
Support Oppose Neither Supp	oort Nor Oppose	AND		beak sh to speak to answer questions	
At this meeting are you r (If you answered "no," I of who you represent and	STOP; you need not c	complete the rest		Yes No nswered "yes," provide the no	те
Name, address and telep	hone number of each	person or organi	zation you are represe	nting:	
R.H.	St. LLC	(C1)	4 F./.		
7)0116			1.5kg		- 1 () - 1 ()
Are you being paid for y	our representation?			14 Yes □ No	
Are you appearing as par (If you answered "no," I question)				Yes No nswered "yes," go on to the 1	ıext
	ublic Hearing (Comm nformation Hearing				

	elected official or employee who is appearing solely on behalf of your office or for your municipality or Yes No
(If you ans this form I	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign If you answered "no" to the question, go on to the next question)
If you are that:	being paid for your representation, or if your appearance is part of other paid duties, please be advised
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 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?
(Please go Room 103	o to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)
Date	508 Signature Buch Vivery
The state of the s	the Monte of the second of the Print Name of the All I at I are the second of the second of the Second of the second

Date:	FEB	05 '08

CITY OF MADISON

Registrat	ion Statement	Common C	ouncil	
Please Print		PLEASE P	RINT CLEARLY	
		Name _	GARY TIPL	ar .
Agenda No.		Address	807 VENI	OC
			807 JENU MADISON	53703
Please check the appr	opriate boxes:			
Support		a	nd 🛮 Wish to spe	
Oppose			Do not wish	to speak answer questions
Neither Su	ipport Nor Oppose		Available to	answer questions
(If you answered "no of who you represent	ou representing an organity," STOP; you need not a and go on to the next quality of each	complete the rest (estion)	of this form. If you ans	wered "yes," provide the name
	ER STREET !			
Are you being paid for	or your representation?			✓ Yes □ No
	part of your other paid of," STOP; you need not o			Yes No wered "yes," go on to the next
Speaking Limits:	Public Hearing (Comn Information Hearing Other Items	non Council) 5	minutes minutes minutes	

	elected official or empl nmental body?	oyee who is appearing	g solely on bel	nalf of your office or for your municipality or
• •	vered "yes" to the quest You answered "no" to			the rest of this form, except that you must sign ion.)
If you are l that:	peing paid for your rep	esentation, or if your	appearance i	s part of other paid duties, please be advised
1.	Before you engage with the City Clerk.	in lobbying as a lobby	yist, you or yo	ur principal must file an authorization
2.	Your principal is no City Clerk.	ot permitted to author	ize you to lob	by unless you are registered with the
3.		the principal must fi		for lobbying services in any reporting atements with the City Clerk for the
	to the City Clerk's w of the City-County Build			<u>k/index.html</u> or go to the Clerk's Office at)
Date	4506	Signature	a Ju	il L
		Print Name	0	BARY TIPLER

Date: 2-5-06

CITY OF MADISON

Registrati	on Statement	Common	Counc			
		COMMITTEE				
Please Print		DIFASE	PRINT C	Y FARI Y		
			\bigcirc		$\mathcal{L}_{\mathcal{L}}$	PI
		Name	ME	$\leq > \subset$	13	1C V
Agenda No.	, 0	Address		7 N.	Hanz	OCK ST
Please check the appro	opriate boxes:					
Support			and	Wish to	speak vish to speak	
Oppose				Do not v	vish to speak e to answer qu	
Neither Su	pport Nor Oppose	e			e to answer qu	estions
At this meeting are vo	ou representing an orga	nization or a ner	son other	than yoursel	f Xves	□No
(If you answered "no,	" STOP; you need not	complete the re	st of this	form. If you d	answered "yes	," provide the name
of who you represent	and go on to the next q	uestion)				
Name, address and tel	ephone number of eacl	h person or organ	nization v	ou are repres	senting:	
Ritler	Ctropt	11.0	,	(1.f.	C F	Ipp
201101	ephone number of each					
A1.::16.					☐ Yes	No
Are you being paid to	r your representation?				□ 163	110
Are you appearing as	part of your other paid	duties for this pe	erson or c	organization?	Yes	,
(If you answered "no, question)	." STOP; you need not	t complete the re	st of this	form. If you	answered "yes	,," go on to the next
Speaking Limits:	Public Hearing (Com	ımon Council)	5 minut	tes		
Spouring Dinnes.	Information Hearing	***************************************	3 minut	es		
	Other Items	***************************************	3 minut	es		

Are you an eleother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)		
If you are bei that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised		
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 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?		
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information)		
Date 2	5-08 Signature Reede W Zashor C		
	Print Name Reese Fisher		

		Date:
	CITY OF MADISON	
Registration Statement -	Common Council	
Please Print	PLEASE PRINT NAM	
4 . 4	Name DAVI) WILLIAMS
Agenda No.	Address 411 /	V. Ingersoll St.
Please check the appropriate box:	Please	check the appropriate box:
Support Oppose Neither Support Nor Oppos	AND	ish to speak o not wish to speak railable to answer questions
At this meeting are you representing an orga (If you answered "no," STOP ; you need not of who you represent and go on to the next q	t complete the rest of this form. I	ourself: X Yes No No you answered "yes," provide the name
Name, address and telephone number of each	h person or organization you are	representing:
	•	
Are you being paid for your representation?		Yes □ No
Are you appearing as part of your other paid (If you answered "no," STOP ; you need no	duties for this person or organiz	ation? X Yes No If you answered "yes," go on to the next

Public Hearing (Common Council) 5 minutes Information Hearing 3 minutes

Other Items 3 minutes

question.)

Speaking Limits:

Are you an ele	ected official or employee who is nental body?	appearing solely on beh	alf of your office or for you Yes	ur municipality or No
	red "yes" to the question, STOP. ou answered "no" to the question,			hat you must sign
If you are being that:	ing paid for your representation,	or if your appearance is	part of other paid duties,	please be advised
1.	Before you engage in lobbying with the City Clerk	as a lobbyist, you or you	r principal must file an aut	horization
2	Your principal is not permitted City Clerk	to authorize you to lobb	oy unless you are registered	d with the
3	If your principal spends or will period (half year), the principa remainder of the calendar year?	-		_
_	o the City Clerk's website <u>www.</u> the City-County Building, Madisor	• •		Clerk's Office at
Date	1-05-08 Signat	ure Dan	t will was	
	Print N	Jame DAUD	WILL HANS	

ID#06572

Date: 2-5-08

CITY OF MADISON

Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print		PLEASE P	RINT NAME CLEA	ARLY	
Agenda No		Name / Z	LEVIN BA	LET Hel	
Please check the app	propriate box:		Please check th	e appropria	te box:
At this meeting are you (If you answered "no	ou representing an organization," STOP; you need not contained and go on to the next quest	mplete the rest of	other than yourself:	to speak answer ques	No
Name, address and te	lephone number of each pe	erson or organizat	ion you are represent	ing:	
Are you being paid for	or your representation?			Yes	No
	part of your other paid dut o," STOP; you need not co			☐ Yes wered "yes,"	☑No ' go on to the next
Speaking Limits:	Public Hearing (Commo Information Hearing		ninutes		

REGISTRATION OF ATEMENT - FAGE 2
Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?
(If you answered "yes" to the question, STOP . You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:
Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk
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?
(Please go to the City Clerk's website www.cityofmadison.com/clerk/index.html or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information) Date
Print Name Keel D Siles

Date: 2-5-08

CITY OF MADISON

Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print		PLEASE P	RINT NAME CLEA	RLY	
Agenda No.	£	Name Address	Tom Gen 122 West Moditory V	Weshing Uz	Story
Please check the app	propriate box:		Please check the	e appropriat	e box:
Support Oppose Neither Su	ipport Nor Oppose	AND	☐ Wish to spea☐ Do not wish☐ Available to	to speak	ions
(If you answered "no of who you represent	ou representing an organization, "STOP; you need not competend go on to the next question elephone number of each personal person	olete the rest of . n.)	this form. If you answ		☐ No provide the name
					,
Are you being paid f	or your representation?			Yes	☐ No
	s part of your other paid duties o," STOP ; you need not comp			☐ Yes vered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Common of Information Hearing	3 n			

.,	n elected official or employee rnmental body?	who is appear	ing solely on behalf of your office or for your municipality or Yes No		
· D -/	swered "yes" to the question, If you answered "no" to the q		ed not complete the rest of this form, except that you must sign to the next question)		
If you are that:	being paid for your represer	ntation, or if yo	our appearance is part of other paid duties, please be advised		
1	Before you engage in lowith the City Clerk.	bbying as a lol	bbyist, you or your principal must file an authorization		
2.	Your principal is not pe City Clerk	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.		principal must	fore than \$1,000 for lobbying services in any reporting till expense statements with the City Clerk for the		
	o to the City Clerk's websi of the City-County Building,		nadison.com/clerk/index.html or go to the Clerk's Office at nore information.)		
Date	2-T-C}	Signature Print Name	Thomps J. Com.		

Date:	2	-5	- () L	- 1			

CITY OF MADISON

Registration Statement	- Common Council COMMITTEE
Please Print	
	PLEASE PRINT CLEARLY
	Name Desiroe Fisher Address 107 N. Hancock St. Madison WI, 53703
Agenda No. 4	Address 107 No Hancock St
	Madison WI, 53703
Please check the appropriate boxes:	
Support	and Wish to speak
Oppose	Do not wish to speak Available to answer questions
Neither Support Nor Oppo	Available to answer questions
	사람들은 보는 보통 보통 등을 하고 있는 것은 모든 모든 모든 모든 것은 것은 것을 받는 것은
At this meeting are you representing an or	ganization or a person other than yourself: Yes V No
	not complete the rest of this form. If you answered "yes," provide the name
of who you represent and go on to the nex	t question)
Name, address and telephone number of e	ach person or organization you are representing:
Are you being paid for your representation	n? Yes No
Are you appearing as part of your other pa	id duties for this person or organization?
Are you appearing as part of your other pa	하는 스타트 스마이스 (1882년 1982년
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question)	id duties for this person or organization? Yes No not complete the rest of this form. If you answered "yes," go on to the next
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question) Speaking Limits: Public Hearing (Co	id duties for this person or organization? Yes No
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question) Speaking Limits: Public Hearing (Co Information Hearing	nid duties for this person or organization? Yes No not complete the rest of this form. If you answered "yes," go on to the next of the nex

Are you an elother governr		ployee who is appeari	ng solely on behalf	of your office or for your municipality or Yes No
		estion, STOP. You nee to the question, go on t		rest of this form, except that you must sign)
If you are be that:	ing paid for your re	presentation, or if yo	ur appearance is pa	rt of other paid duties, please be advised
	Before you engag with the City Cler		byist, you or your p	rincipal must file an authorization
2.	Your principal is City Clerk	not permitted to auth	orize you to lobby	unless you are registered with the
3.		, the principal must		lobbying services in any reporting nents with the City Clerk for the
		website <u>www.cityofm</u> lding, Madison, for m		<u>dex.html</u> or go to the Clerk's Office at
Date 2-5	5-08	Signature	Desurae	M Esher
		Print Name	Desirae	Fisher

	CITY OF MADISON
Registration Statement	Common Council COMMITTEE
<u>Please Print</u>	PLEASE PRINT CLEARLY
Agenda No. 4,6	Name Blake Fisher Address 107 N Hancock St. Madison WI 53703
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 organ (If you answered "no," STOP; you need not of who you represent and go on to the next qu	complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	person or organization you are representing:
Are you being paid for your representation?	☐ Yes ✓ No
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not question)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
_ 1	mon Council) 5 minutes 3 minutes 3 minutes

Date: 2/5/68

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality on nental body?	r
	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)	7
If you are bei that:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised	1
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 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 a the City-County Building, Madison, for more information)	t
Date 2/5/6	Signature Blike Lisher Print Name Blake Lisher	
	Print Name Blake Fisher	 1

	Date: 2-S-08
	CITY OF MADISON
Registration Stateme	ent - Common Council
Please Print	PLEASE PRINT CLEARLY
	Name Jean Fisher
Agenda No. 46	Address 107 N. Hancock St.
	Address 107 N. Hancock St. Madison WI 53703
Please check the appropriate boxes:	
∑ Support	and Wish to speak
Oppose	Do not wish to speak ☐ Available to answer questions
Neither Support Nor C	
At this meeting are you representing a (If you answered "no," STOP; you n of who you represent and go on to the	an organization or a person other than yourself: No eed not complete the rest of this form. If you answered "yes," provide the name next question)
Name, address and telephone number	of each person or organization you are representing:
Are you being paid for your represent	tation? Yes No
Are you appearing as part of your oth (If you answered "no," STOP; you nate question)	ner paid duties for this person or organization? Yes No need not complete the rest of this form. If you answered "yes," go on to the next
and the contract of the contra	g (Common Council) 5 minutes learing 3 minutes

	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 both	eing paid for your representation, or if your appearance is part of other paid duties, please be advised
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 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?
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)
Date	15/08 Signature Jam M. Fisher
	Print Name Jean M. Fisher