Date: 6/2/09

CITY OF MADISON

Registration Statement -	Common Council		
	COMMITTEE		
Please Print	PLEASE PRINT CLEARLY		
<i>f</i> 2	Name Udaivi	Singl	Sirohi
Agenda No. A5	Address 6410 M	illipoon	dRd
Please check the appropriate boxes: Support Oppose Neither Support Nor Oppose	and ☐ Wish to spea☐ Do not wish ☐ Available to	to speak	tions
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. If you answ	Yes vered "yes,"	☐ No provide the name
Name, address and telephone number of each	h person or organization you are representi	ing:	
JUS LLC	· ·	<u> </u>	.
Are you being paid for your representation?		Yes	DNo
Are you appearing as part of your other paid (If you answered "no," STOP; you need not question)		Yes wered "yes,"	WNo go on to the next
Information Hearing	amon Council) 5 minutes 3 minutes 3 minutes		

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		elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body? Yes No
		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	u are b	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 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name