Date: 3 3 09

CITY OF MADISON

Registration Statement -	Common Council
Please Print TD#14026	PLEASE PRINT CLEARLY
	Name Bill White
Agenda No	Address 2708 Lateland Arl
Please check the appropriate boxes:	
	and Wish to speak
Support	and Wish to speak Do not wish to speak
	Available 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. If you answered "yes," provide the name
Name, address and telephone number of eac	th person or organization you are representing:
	258-5580
Are you being paid for your representation?	U-Yes No
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question)	I duties for this person or organization? Yes No to complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	nmon Council) 5 minutes 3 minutes 3 minutes

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		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	. • ".	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
that:	*,	
	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	3/	

Print Name