Date: 7/0/09

Registration Statement	Common Council
Please Print 10# 14735	PLEASE PRINT CLEARLY
Agenda No.	Name J. PANDY BRUCE Address 7601 UNIVERSITY AVE. MIDDLETON
Please check the appropriate boxes: Support Oppose Neither Support Nor Oppose 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 que Name, address and telephone number of each	and Wish to speak Do not wish to speak Available to answer questions West of this form. If you answered "yes," provide the name uestion)
	INC 2 SOUTH BEDFORD LLC ID MEIER, JOHN MEIER
Are you being paid for your representation? Are you appearing as part of your other paid (If you answered "no," STOP; you need not question.) Speaking Limits: Public Hearing (Com Information Hearing)	□ Yes □ No

	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.)
u are b	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)
1	Signature Rench Ome Print Name O RANGE BLUE
	govern u answ form. If u are b 1. 2. 3. use go in 103 o

Date:	1	1-7-09		
tari da ka	77.7	Maria de la companya del companya de la companya del companya de la companya de l	And the first of the second	

Registra	tion Statement -	Common C	>ouncil	
Please Print				
		PLEASI	E PRINT NAME CLEARLY	
		Name	David Meier	
Agenda No.		Address	Badger By Depot	
			25 Ded 1 ova	::
Please check the ap	ppropriate box:		Please check the appropriate box:	
Support			■ Wish to speak	: . : .
Oppose		AND	Do not wish to speak	
	Support Nor Oppos	e in a land to	Available to answer questions	٠ <u>.</u> .٠.
	nt and go on to the next of each		ization you are representing:	
				T.
Are you being paid	for your representation?		☐ Yes ★No	
	as part of your other paid to one of your need no		rson or organization?	t
Speaking Limits:	Public Hearing (Cor Information Hearing Other Items	uning and a suppression of the s	3 minutes	
医耳耳氏试验检 医乙酰苯酚二氏菌		化物工工作 化苯基磺基 化邻		. :

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? Yes No
	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
	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

Registrati	on Statement	t - Common Council			
Please Print					
		PLEASE	PRINT NAMI	E CLEARLY	
		Name	John	Mele.	
Agenda No6		Address	2.5	Bedford	<u>. </u>
Places short the					
Please check the app	ropriate box:		Please c	heck the appropri	ate box:
 				to speak	
Oppose		AND		ot wish to speak	
Neither Su	pport Nor Oppose		∐ Avai	lable to answer que	SHORS
of who you represent (" STOP; you need not and go on to the next q	complete the rest uestion)	of this form If y	ou answered "yes,'	
Name, address and tel	ephone number of each	n person or organiz	ation you are re	presenting:	
Are you being paid for	your representation?			☐ Yes	☑ No
Are you appearing as [(If you answered "no, question.)	part of your other paid "STOP; you need not	duties for this pers complete the rest	on or organization of this form. If y	on?	No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	same i mannes samas numbrani e	3 minutes		

	하는데 보고 하는데 하는데 보고 있는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 되었다.
Are you an el other governm	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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 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?
	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	$\sqrt{2707}$ Signature $\sqrt{200}$
	Print Name / Talan & Mane

		그 사회들이 가게 그를 다 만나 했다.		Date:	1.01
		CITY OF MAI	DISON		
Registra	tion Statement -	Common C	ouncil		
Please Print					
		PLEASE	PRINT NAME CI	LEARLY	
		Name	Kasemary	Coo	
Agenda No.		Address	Kasemaya	<u> </u>	
			Madison 5	3703	
Please check the ap	propriate box:		Please checl	k the appropri	ate box:
Support			Wish to s	speak	
Oppose		AND	Do not w	ish to speak	
	upport Nor Oppos	se .	- Available	e to answer que	stions
of who you represen	o," STOP; you need not and go on to the next selephone number of each	question)			' provide the name
Are you being paid	for your representation?	?		☐ Yes	□No
Are you appearing a (If you answered "n question.)	s part of your other paids, "STOP; you need no	d duties for this per ot complete the rest	son or organization? of this form. If you o	☐ Yes answered "yes,	□ No " go on to the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items	g ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	the second secon		

	elected 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 bothat:	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 fithe City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Registrati	on Statement -	Common Council
Please Print		
		PLEASE PRINT NAME CLEARLY
		Name Angela Black, Michael Bes
Agenda No	0	Address 15. Pinckney St. Ste 70
		Mcd:302 " \$53703
Please check the app	ropriate box:	Please check the appropriate box:
Support		Wish to speak
Oppose		AND Do not wish to speak
	pport Nor Oppos	Available to answer questions
		anization or a person other than yourself:
of who you represent		
Name, address and te	lenhone number of eac	ch person or organization you are representing:
-baager C	oaches, =	
Are you being paid for	or your representation?	? □ Yes □ No
Are you annearing as	part of your other pair	d duties for this person or organization?
		ot complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing (Cor	mmon Council) 5 minutes
	Information Hearing	g
	Other Items	minutes 3 minutes

	and the strong section of REGISTRATION STATEMENT, FAGE 200 and the first of the strong section in the section The strong section is a strong section of the section of the section of the section is the section of the			
Are you an ele	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental 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 7/	7/09 Signature Ingle Black Print Name Angela Black			
	This value of the second secon			

Registration Statement	Common C	ouncil		
	COMMITTEE			
Please Print	PLEASE	PRINT CLEARLY		
	Name	BARBARA	SMITH	T danishi
Agenda No.	Address	31 SHERM		
		MADISON	and the state of the second the s	
Please check the appropriate boxes:				
☐ Support		and Wish to spe		
Oppose		Do not wis	h to speak o answer questior	ns
Neither Support Nor Oppose				
At this meeting are you representing an organic (If you answered "no," STOP; you need not co	zation or a perso	on other than yourself:		No No ide the name
of who you represent and go on to the next que		of this form. If you alls	mereu yes, pro	
Name, address and telephone number of each p	oerson or organi	zation you are represen	ting:	
	was		· · · · · · · · · · · · · · · · · · ·	
	· .			
Are you being paid for your representation?			Yes [□No
Are you appearing as part of your other paid do			Yes [No
(If you answered "no," STOP ; you need not c question)	omplete the rest	of this form. If you an	wered "yes," go	on to the next
Speaking Limits: Public Hearing (Comm Information Hearing				
Other Items	**************************************	3 minutes		

	n elected official or employee who is appearing solely on behalf of your office or for your municipality or municipality or least the solely?
	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 g 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	Signature
	Print Name

Date:	7/	7/	9	9		

	CITY OF MADISON
Registration Statement -	Common Council COMMITTEE
Please Print	PLEASE PRINT CLEARLY
Agenda No. #16	Name Beth Harper Address 2105 Rowley Ave Madison W1 53711
Please check the appropriate boxes:	
Support Oppose Neither Support Nor Oppos	and Wish to speak Do not wish to speak Available to answer questions
At this meeting are you representing an org (If you answered "no," STOP; you need no of who you represent and go on to the next	anization or a person other than yourself: Yes No of complete the rest of this form. If you answered "yes," provide the name question)
Name, address and telephone number of each	ch person or organization you are representing:
Are you being paid for your representation	? Yes No
Are you appearing as part of your other pai (If you answered "no," STOP; you need no question)	d duties for this person or organization? Yes No ot complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mmon Council)5 minutes g3 minutes 3 minutes

		elected official or employee who is appearing mental body?	g solely on behalf of your office	or for your municipality or Yes No
,		ered "yes" to the question, STOP. You need you answered "no" to the question, go on to		n, except that you must sign
If you	ı are be	eing paid for your representation, or if you	r appearance is part of other paid	d duties, please be advised
	1.	Before you engage in lobbying as a lobb with the City Clerk	yist, you or your principal must f	ile an authorization
	2.	Your principal is not permitted to autho City Clerk.	rize you to lobby unless you are	registered with the
	3.	If your principal spends or will owe more period (half year), the principal must fremainder of the calendar year?		
		to the City Clerk's website <u>www.cityofma</u> the City-County Building, Madison, for mo		o to the Clerk's Office at
12 (4) 4 (12)				
Date		Signature		
		Print Name		

Date: 7 J4 (89_

Registration Statement -	Common Council
Please Print	
	PLEASE PRINT CLEARLY
	Name Javo (grvis
Agenda No.	Address 645 SKYVIEW Place 710
	Madison W) 527/3
Please check the appropriate boxes:	
Support	and Wish to speak Do not wish to speak
Oppose	Do not wish to speak
Neither Support Nor Oppos	e Available to answer questions
At this meeting are you representing an orga	nization or a person other than yourself: Yes No
(If you answered "no," STOP; you need not	t complete the rest of this form. If you answered "yes," provide the name
of who you represent and go on to the next q	uestion)
Name, address and telephone number of each	h person or organization you are representing:
A 1 - i 1 - f	☐ Yes ☐ No
Are you being paid for your representation?	
Are you appearing as part of your other paid	
(If you answered "no," STOP; you need not question.)	t complete the rest of this form. If you answered "yes," go on to the next
	nmon Council)5 minutes
	3 minutes

		ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
(If you this for	answer m. If yo	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 that:	are bei	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?
Room		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

Registra	tion Statement -	Common C	Council
Bloom Buint		COMMITTEE	
Please Print		PLEASE	SE PRINT NAME CLEARLY
		Name	TIM WONG
Agenda No.	16	Address	tim WONG 161 JACKSON
Please check the ap	opropriate box:		Please check the appropriate box:
☐ Support ☐ Oppose		AND	
Neither S	upport Nor Oppos	se .	Available to answer questions
(If you answered "n of who you represer	no," STOP; you need no nt and go on to the next	ot complete the rest question)	son other than yourself: Yes No set of this form If you answered "yes," provide the name inization you are representing:
Are you being paid	for your representation?		☐ Yes ☑ No
Are you appearing a (If you answered "n question)	as part of your other paid to," STOP; you need no	d duties for this per ot complete the rest	erson or organization?
Speaking Limits:	Public Hearing (Cor Information Hearing Other Items	g cainmaniaasiininsiiaaainnan coon	3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign f 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?
· ·	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	Signature
	Print Name

Registration	Statement	Common C	Council		
Please Print	_	· · · · · · · · · · · · · · · · · · ·	PRINT CLEARLY		
Agenda No/6		Name Address	Signed 615 W Madeso	Knute Mair	- - 52 -
Please check the appropria	ate boxes:		_	,	
Support Oppose Neither Suppo	ort Nor Oppose			peak ish to speak e to answer ques	ations
At this meeting are you re (If you answered "no," So of who you represent and	TOP; you need not c	complete the res	on other than yourself t of this form. If you a	: ☐ Yes nswered "yes,"	No provide the name
Name, address and telepho	one number of each	person or organ	ization you are represe	enting:	
Are you being paid for yo	our representation?		11/2 1991	☐ Yes	□ No
Are you appearing as part (If you answered "no," S question)	of your other paid d TOP; you need not d	luties for this pe complete the res	erson or organization? st of this form. If you c	Yes Yes,"	Tho go on to the next
In	ıblic Hearing (Comn formation Hearing ther Items	n - n o t-cumpacularia - cooraania - c	3 minutes		

•		eted 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 answered "no" to the question, go on to the next question)
If you are that:	e bein	g 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 e City-County Building, Madison, for more information)
Date	····	Signature
		Print Name

		CITY OF MADISON
Registra	tion Statement -	Common Council COMMITTEE
Please Print		
		PLEASE PRINT NAME CLEARLY
	12	Name HV/D KNVTI
Agenda No/	\mathcal{O}	Address 615 WEST MAIN Sq. #301
		MADISON WI 53703
Please check the ap	propriate box:	Please eneck the appropriate box:
Support		Wish to speak
Oppose		AND Bo not wish to speak
Neither S	upport Nor Oppos	e Available to answer questions
(If you answered "n		anization or a person other than yourself: \[Yes \] \[No \] It complete the rest of this form. If you answered "yes," provide the name question)
	<i>*</i> \ <i>^</i>	ch person or organization you are representing: ROUP, 222 South HAMULTON
7 VZ	.,,,,,	
Are you being paid	for your representation?	☐ Yes No
		d duties for this person or organization? Yes No ot complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:	Information Hearing	mmon Council) 5 minutes 3 minutes 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 are be that:	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 the City-County Building, Madison, for more information)
Date	Signature
	And the second of the second o

Date: $\frac{7}{7}$ | $\frac{2009}{}$

Registration Statement -	Common Council COMMITTEE	
Please Print		
	PLEASE PRINT CLEA	
	Name Carl	Du Kocher
Agenda No.	Address 144	Du Rocher 1 Williamson St
	Mad	ison WI
Please check the appropriate boxes:		
□ > Support	and	Wish to speak Do not wish to speak
Oppose		Do not wish to speak Available to answer questions
Neither Support Nor Oppose		
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	yourself: Yes No If you answered "yes," provide the name
Name, address and telephone number of each		re representing:
Traine, address and totophone names of sales		
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 question)		
	nmon Council) 5 minutes 3 minutes	

	elected official or employee who is appearantal body?	aring solely on behalf of your office or for your municipality or Yes No
	ered "yes" to the question, STOP. You n you answered "no" to the question, go o	need not complete the rest of this form, except that you must sign n to the next question)
If you are be that:	eing paid for your representation, or if	your appearance is part of other paid duties, please be advised
	Before you engage in lobbying as a lwith the City Clerk	obbyist, you or your principal must file an authorization
2.	Your principal is not permitted to au City Clerk.	thorize you to lobby unless you are registered with the
3.	If your principal spends or will owe period (half year), the principal muremainder of the calendar year?	more than \$1,000 for lobbying services in any reporting st file expense statements with the City Clerk for the
	to the City Clerk's website <u>www.cityo</u> f the City-County Building, Madison, for	fmadison.com/clerk/index.html or go to the Clerk's Office at more information)
Date	Signature	
	Print Name	

Date: ((\G\)

Registra	tion Statement - ַ	Common C	ouncil	
Please Print				
Tigaso I I mt		PLEASE	E PRINT NAME CLEARLY	
		Name	SISAN DE VOS	
Agenda No	6	Address		
			Malisy 53705	
Please check the ap	opropriate box:		Please check the appropriate box:	
☐ Support			■ Wish to speak	
Oppose		AND	☐ Do not wish to speak ☐ Available to answer questions	
Neither S	upport Nor Oppos		Available to allswel questions	
(If you answered "n	you representing an orga to," STOP; you need not not and go on to the next q	complete the rest	on other than yourself: Yes No tof this form. If you answered "yes," provide the n	ame
Name, address and	telephone number of eac	h person or organiz	zation you are representing:	
Are you being paid	for your representation?		☐ Yes ☐ No	
Are you appearing a (If you answered "n question)	ns part of your other paid no," STOP; you need no	duties for this pers t complete the rest	rson or organization? \[\sum \text{Yes} \sum \subseteq \text{No} \] If you answered "yes," go on to the restriction of the r	next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items		3 minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body? Yes No
	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 b that:	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	Signature
	de la companya de la La companya de la co

Date: 1/7/09

Registrati	on Statement	COMMITTEE	
Please Print			
		PLEASI	E PRINT NAME CLEARLY
		Name	LOYER WILLAMS
Agenda No. [🕻		Address	2437 FOX HUR
			Madson 6371
Please check the app	ropriate box:		Please check the appropriate box:
☐ Support			Wish to speak
Oppose		AND	☐ Do not wish to speak☐ Available to answer questions
[] Neither Su	pport Nor Oppose		
			on other than yourself: Yes No
(If you answered "no, of who you represent	." STOP; you need not and go on to the next qi	complete the res	t of this form. If you answered "yes," provide the name
Name, address and te	lephone number of each	person or organ	ization you are representing:
Are you being paid for	r your representation?		☐ Yes ☐ No
	part of your other paid." STOP; you need not		rson or organization? Yes No st of this form. If you answered "yes," go on to the next
Speaking Limits:	Public Hearing (Com		
	Information Hearing Other Items	ener ennountingenousseurseur Turk ennountingenousseurseurseur	3 minutes
	OMET HEMS.		Communication of the communica

Are you an el other governr	lected official or employee who is appearing solely on behalf of your office or for your municipality or nental 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?
	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: JUly 2000

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 PRINT NAM	ECLEARLY ~
	Agenda No.	Name Ahy= Address BAO	Kidd-(Durst 9 Kipling Dr son, W. 5370
	Please check the appropriate box		ck the appropriate box:
	Support Oppose Neither Support No	registrant bosition wishing to	t wish to speak able to answer questions
	At this meeting are you representi (If you answered "no," STOP; yo of who you represent and go on to	wishing to	self: Yes No nu answered "yes," provide the name
	Name, address and telephone nur		presenting:
7	to we can burp Are you being paid for your representation?	ose on the	real buses; as
	Are you appearing as part of your other paid dutie (If you answered "no," STOP; you need not compaestion)	es for this person or organiza plete the rest of this form. If	tion? Yes No you answered "yes," go on to the next
	Speaking Limits: Public Hearing (Common Information Hearing Other Items	a minutes	
	10/05/07-E/Clcommon\Council Documents\Registration Form 2007 - early public comment do	SEE BACK) LOOS	Jey 3074 -404

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 be	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

Registrat	ion Statement -		ouncil
		COMMITTEE	
Please Print		PLEASE	PRINT NAME CLEARLY
			Harry Richardson
Agenda No16			18 Sherman Ter. No. 4
		Address _	Madison
			Tripidi 2011
Please check the app	propriate box:		Please check the appropriate box:
☐ _Support			☐ Wish to speak
Oppose		AND	Do not wish to speak
Neither Su	pport Nor Oppos	se	☐ Available to answer questions
of who you represent	and go on to the next	question)	of this form. If you answered "yes," provide the name ation you are representing:
A11 C			
Are you being paid to	or your representation		∐ Yes ☐ No
	s part of your other pai o, " STOP; you need no		on or organization?
Speaking Limits:	Public Hearing (Con	mmon Council)5	minutes
	Information Hearing	3	minutes
	Other Items		minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental 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 t that:	peing 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
	and the same state of the same of the same of the same state of the same state of the same state of the same s And the same state of