Date: 9/1/09

CITY OF MADISON

Registration Statement	Common C	Council	
Please Print	PLEASE P	PRINT CLEARLY	
Agenda No. 5	Name _ Address _	PICH ARNESEN 321 E. MAIN ST. MADISON, WI	
1D# 15122		MADISON, WI	
Please check the appropriate boxes: Support Oppose Neither Support Nor Oppose At this meeting are you representing an organia (If you answered "no," STOP; you need not confirm of who you represent and go on to the next que	zation or a person	and Wish to speak Do not wish to speak Available to answer questions on other than yourself: Yes No of this form. If you answered "yes," provide the	ne name
Name, address and telephone number of each posts of a LLC STONER HOUSE DEVELOR		zation you are representing:	
STONER HOUSE DEVEL	opment		
Are you being paid for your representation?		Yes No	
Are you appearing as part of your other paid de (If you answered "no," STOP; you need not c question.)	uties for this pers complete the rest	son or organization? Yes No t of this form. If you answered "yes," go on to the	he next
Speaking Limits: Public Hearing (Comm Information Hearing Other Items			

REGISTRATION STATEMENT - PAGE 2

Are you an e	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answe this form. If	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?
(Please go Room 103 oj	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 5	1-69 Signature

Print Name

Date: 9/1/69

CITY OF MADISON

Registration Statement	
Please Print	PLEASE PRINT CLEARLY
	Name J. PANDY BRUCE Address 760/ UNIVERSITY AVE MIDDLETON, WI 53562
Agenda No. 5	Address 760/ UNIVERSITY AVE
10# 1512Z	MIDDLETON, WI 53562
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 que Name, address and telephone number of each	nization or a person other than yourself: Yes No complete the rest of this form. If you answered "yes," provide the name uestion)
RICH ARNESEN	DOMETAT
STONE HOUSE DEVEL	<u> </u>
UTS 243 UC	
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 No complete the rest of this form. If you answered "yes," go on to the next
	mon Council) 5 minutes 3 minutes 3 minutes

REGISTRATION STATEMENT - PAGE 2

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		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	9/1	Signature Sandy Pome Print Name S. Rayay Brux