Date: 20100105

CITY OF MADISON

Common Council

Registration Statement -

COMMITTEE Please Print PLEASE PRINT CLEARLY Name Agenda No. Address Please check the appropriate boxes: Support Wish to speak 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 Are you appearing as part of your other paid duties for this person or organization? Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question) Public Hearing (Common Council)....... 5 minutes Speaking Limits: Other Items 3 minutes

REGISTRATION STATEMENT - PAGE 2

Are you an elected official or employee who is appearing solother governmental body?	ely on behalf of your office or for your municipality or Yes No
(If you answered "yes" to the question, STOP. You need not a this form. If you answered "no" to the question, go on to the r	
If you are being paid for your representation, or if your app that:	earance is part of other paid duties, please be advised
 Before you engage in lobbying as a lobbyist, with the City Clerk. 	you or your principal must file an authorization
2. Your principal is not permitted to authorize y City Clerk.	ou to lobby unless you are registered with the
3. If your principal spends or will owe more that period (half year), the principal must file extremainder of the calendar year?	n \$1,000 for lobbying services in any reporting spense statements with the City Clerk for the
(Please go to the City Clerk's website www.cityofmadisor Room 103 of the City-County Building, Madison, for more in	
Date Signature	
Print Name	