#16769

Date:	Date: 1-19-10
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CITY OF MADISON

Registration Statement	Common Council	
	COMMITTEE	
Please Print	PLEASE PRINT CLEARLY	
\boldsymbol{o}	Name ALEX W	E15
Agenda No.	Name ALEX WEST	BELTLINE
Please check the appropriate boxes:		
Support	and Wish to	o speak wish to speak
	- Availal	ole 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	complete the rest of this form. If you uestion.)	answered "yes," provide the name
ivalite, address and telephone number of each	porson of organization you are represented	
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 complete the rest of this form. If you	? Yes No answered "yes," go on to the next
Information Hearing.	mon Council) 5 minutes 3 minutes	
Other Items	3 minutes	

REGISTRATION STATEMENT - PAGE 2

Are you an elected official or employee who is appearing solely on behalf of your o other governmental body?	ffice or for your municipality or Yes No
(If you answered "yes" to the question, STOP. You need not complete the rest of this this form. If you answered "no" to the question, go on to the next question)	s form, except that you must sign
If you are being paid for your representation, or if your appearance is part of othe that:	r paid duties, please be advised
1. Before you engage in lobbying as a lobbyist, you or your principal mowith the City Clerk.	nust file an authorization
2. Your principal is not permitted to authorize you to lobby unless you City Clerk.	a are registered with the
3. If your principal spends or will owe more than \$1,000 for lobbying speriod (half year), the principal must file expense statements with remainder of the calendar year?	
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> Room 103 of the City-County Building, Madison, for more information)	or go to the Clerk's Office at
Date 1-19-10 Signature	
Print Name ALEX J. WEIS	

	Date: $l-(q-l)$
	CITY OF MADISON
Registration Statement	Common Council
	COMMITTEE
Please Print	PLEASE PRINT CLEARLY
	医乳腺上腺 网络斯马克马斯克 化二氯基氯 医克尔二氏试验 医二氯甲烷二氯甲烷 医电影 医电影 医电影 医电影 医外腺
Agenda No.	Address 55 Shuman Blvd
	Name Dan Walsh Address 55 Shuman Bld Naperville, 12 60563
Please check the appropriate boxes:	
Support Support	and Wish to speak Do not wish to speak
OpposeNeither Support Nor Oppose	Available to answer questions
of who you represent and go on to the next q	complete the rest of this form. If you answered "yes," provide the name
Are you being paid for your representation?	☐ Yes ☐ No
	duties for this person or organization? Yes No to complete the rest of this form. If you answered "yes," go on to the next
question)	
	nmon Council) 5 minutes 3 minutes

Other Items3 minutes

REGISTRATION STATEMENT - PAGE 2

	an elected official or emplo ernmental body?	yee who is appearing solely or	h behalf of your office or for your municipality or Yes \sum No
	· ·	on, STOP. You need not comp ne question, go on to the next q	lete the rest of this form, except that you must sign uestion)
If you are that:	e being paid for your repre	sentation, or if your appearan	ace is part of other paid duties, please be advised
1	Before you engage in with the City Clerk	ı lobbying as a lobbyist, you o	r your principal must file an authorization
2.	Your principal is not City Clerk.	permitted to authorize you to	o lobby unless you are registered with the
3.		he principal must file expens	000 for lobbying services in any reporting e statements with the City Clerk for the
-		bsite <u>www.cityofmadison.com.</u> ig, Madison, for more informa	<u>/clerk/index.html</u> or go to the Clerk's Office at tion.)
Date		Signature	
		Print Name	

Date: 01 · 19 · 10

CITY OF MADISON

Registration Statement	Common C	ouncil				
Please Print		PRINT CLE	ARLY			
	Name	LIFE	= (200	DHAR	<u>r </u>	
Agenda No.	Address	272	= G00 W.WA	SHING	ron,	HVE
Please check the appropriate boxes:						
⊠ Support		and \square	Wish to spea Do not wish			
OpposeNeither Support Nor Oppose		×	Available to		ions	
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 qu	complete the resi estion)	t of this for	m. If you answ		∏ No provide th	ne name
Name, address and telephone number of each	person or organi	ization you	are representi	ing:		
LIVESEY COMPAN	9					
LIVESEY COMPAN EPPSTEIN LIHEN	ARCHI	てたこて	5		· 	
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				•		
Are you being paid for your representation?		•		X.Yes	∐ No	
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not question)	duties for this pe complete the res	rson or orga t of this for	anization? m If you ansi	☑ Yes wered "yes,"	□ No go on to	the next
Speaking Limits: Public Hearing (Communication Hearing Other Items	полониционня опросооння воли					

REGISTRATION STATEMENT - PAGE 2

-	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 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 1.	19 10 Signature Mywlm
	Print Name CLIFF GOODHAR