Date: 3/3/10

## CITY OF MADISON

Registration Statement -	HOUSING COMMITTEE
Please Print	COMMITTEE
	PLEASE PRINT CLEARLY
	Name David Sparer
Agenda No.	Address 16 N. Carrol St
	M/W 53703
Please check the appropriate boxes:	
Support	and Wish to speak
<b>Oppose</b>	<sup>2</sup> ☐ Do not wish to speak
Neither Support Nor Oppose	Available to answer questions
(If you answered "no," STOP; you need not of who you represent and go on to the next q	n person or organization you are representing:
1202 Williams	
M/W	53703
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
Information Hearing.	mon Council) 5 minutes 3 minutes 3 minutes

Are you an ele	cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
	ed "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)
If you are beir that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
1.0	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 a lee Clerk's Office at lee City-County Building, Madison, for more information.)
Date 3	Signature Java Aparer Print Name David R Sporter

Date: 3/3/10

### **CITY OF MADISON**

Registration Statement	HOUSING COMMITTEE
	COMMITTEE
Please Print	
Flease Fillit	PLEASE PRINT CLEARLY
Coron Have	그 경우 문제 돌아들다. 그녀는 그들은 그 일 때 그는 그 집안 말라 없어지요?
Agenda No.	Name Gabriel Heck - MCC
Agenda No.	Address 1202 Williamson St. Sk.
	Address 1202 Williamson St. Sk.
	1601.50
Please check the appropriate boxes:	소문을 하면 말을 보고 있는데 가는데 하면 하면 하는데
🔀 Support	and Wish to speak  Do not wish to speak  Available to answer questions
Oppose Oppose	Do not wish to speak
Neither Support Nor Oppose	Available to answer questions
그는 보호의 사용하는 사람들이 가는 보호 중에 되는	
	ization or a person other than yourself: Yes No
of who you represent and go on to the next qu	complete the rest of this form. If you answered "yes," provide the name
of who you represent that go on to the next qu	
Name, address and telephone number of each	person or organization you are representing:
THE MAN AND THE CO	
1100120	ommenty Cooperative
Are you being paid for your representation?	X Yes □ No
Are you appearing as part of your other paid	duties for this person or organization? Yes No
	complete the rest of this form. If you answered "yes," go on to the next
question.)	그리 하면 눈으로 보면 말이 되는 말을 하지 않는다고 있는다.
Smalling Limits	
	non Council)5 minutes 3 minutes
	3 minutes

Are you an elected official or other governmental body?	employee who is appearing solely on behalf	of your office or for your municipality or Yes No
	question, <b>STOP.</b> You need not complete the r " to the question, go on to the next question.,	
If you are being paid for your that:	representation, or if your appearance is pa	rt of other paid duties, please be advised
Before you eng     with the City C	age in lobbying as a lobbyist, you or your p lerk.	rincipal must file an authorization
2. Your principal City Clerk.	is not permitted to authorize you to lobby t	ınless you are registered with the
period (half ye	al spends or will owe more than \$1,000 for I ear), the principal must file expense statem e calendar year?	
	's website <u>www.cityofmadison.com/clerk/in.</u> Building, Madison, for more information.)	dex.html or go to the Clerk's Office at
Date	Signature	
	Print Name	

	CITY OF MADISON
Registration Statement	HOUSING COMMITTEE
Please Print	COMMITTEE  PLEASE PRINT CLEARLY
Agenda No. Cor Husing	Name JEFFREY BESCHER  Address 1820 SUMMIT AVENUE  Madison, CUI
Please check the appropriate boxes:	
<ul><li>Support</li><li>□ Oppose</li><li>□ Neither Support Nor Oppose</li></ul>	and Wish to speak  Do not wish to speak  Available to answer questions
(If you answered "no," STOP; you need not of who you represent and go on to the next q	nization or a person other than yourself:   Yes No complete the rest of this form. If you answered "yes," provide the name uestion.)  person or organization you are representing:
Are you being paid for your representation?  Are you appearing as part of your other paid (If you answered "no," STOP; you need not	☐ Yes ☑ No  duties for this person or organization? ☐ Yes ☒ No  complete the rest of this form. If you answered "yes," go on to the next
Information Hearing.	mon Council)5 minutes3 minutes3 minutes

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Are you an elected official or en other governmental body?	iployee who is appearii	ng solely on behalf of your office or for your municipality o
(If you answered "yes" to the qu this form. If you answered "no" i	estion, <b>STOP.</b> You need to the question, go on to	d not complete the rest of this form, except that you must sig o the next question.)
If you are being paid for your rethat:	epresentation, or if you	ur appearance is part of other paid duties, please be advise
Before you engage with the City Clean	ge in lobbying as a lobb rk.	oyist, you or your principal must file an authorization
2. Your principal is City Clerk.	not permitted to author	orize you to lobby unless you are registered with the
	), the principal must t	re than \$1,000 for lobbying services in any reporting file expense statements with the City Clerk for the
(Please go to the City Clerk's Room 103 of the City-County Bui	website <u>www.cityofma</u> Iding, Madison, for mo	adison.com/clerk/index.html or go to the Clerk's Office a ore information.)
Date <u>8/3/2010</u>	Signature _	AJIN -
	Print Name	JEFF BESSMENC

Date: 3/3/10

# CITY OF MADISON

Registration Statement	HOUSING COMMITTEE
	COMMITTEE
Please Print	<u> 고마스 전기 : 이 [12 - 17 ] 하고 그를 살았다. 그 가는 주민당.</u>
	PLEASE PRINT CLEARLY
	Name JUSTICA BNOWLECK
Agenda No.	Name Jessia Brodbelle Address 25 E. Late Jawn Place
	Madison, WI 53703
Please check the appropriate boxes:	
<b>Support</b>	and Wish to speak
Oppose	Do not wish to speak
☐ Neither Support Nor Oppose	Available to answer questions
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
Information Hearing	2
Other Items	3 minutes

Are you an eleother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?  Yes No
	red "yes" to the question, <b>STOP.</b> 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.)
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Date	Signature
	Print Name