

Date: 4-21-09

### City of Madison Registration Statement – Alcohol License Review Committee

*You must register before the ALRC considers your item.*

# 18081

PLEASE PRINT CLEARLY

Agenda No. <u>49</u> Required – Can be obtained from agenda on registration table.
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Name David Baehr  
 Address ~~2616~~ 3392 Brooks Dr.  
Sun Prairie, WI 53590

Please check the appropriate boxes:

- Support**
- Wish to speak
  - Do not wish to speak
  - Available to answer questions

- Oppose**
- Wish to speak
  - Do not wish to speak
  - Available to answer questions

At this meeting are you representing an organization or a person other than yourself:  Yes  No  
 (If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Name, address and telephone number of each person or organization you are representing:

Sieger LLC

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  No

(If you answered "no," **STOP**; you need not complete the rest of this form. If you answered "yes," go on to the next question.)

Speaking Limits:

Public Hearing	.....	5 minutes
Information Hearing	.....	5 minutes
Other Items	.....	3 minutes

(See Back)

Date: 4.21.10

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PLEASE PRINT CLEARLY

Agenda No. <u>49</u> Required – Can be obtained from agenda on registration table.
---

Name SLEETER  
 Address 73 white oak  
Madison

Please check the appropriate boxes:

- Support**
- Wish to speak
  - Do not wish to speak
  - Available to answer questions

- Oppose**
- Wish to speak
  - Do not wish to speak
  - Available to answer questions

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 Other Items ..... 3 minutes

(See Back)