

18440 18445 18443 18446 18444 18448 WISH TO SPEAK FORM

Date: 6-15-10

CITY OF MADISON

Registrat	ion Statement -	Common Cou	ncil		
Please Print Agenda No.	L 10 thue 14	Name Ro	RINT NAME CLEA DSEMARY L WWISON 3703	-EE	
Please check the apport Support Oppose	propriate box:	AND	Please check the Wish	e appropriat to speak	
Neither S At this meeting are y (If you answered "no of who you represent	Support Nor Op ou representing an orga o, "STOP; you need no f and go on to the next of elephone number of each	anization or a person of the complete the rest of the question.)	his form. If you answ		Do provide the name
Are you being paid f	or your representation?			☐ Yes	□ No
Are you appearing as	s part of your other paid o, " STOP; you need no	l duties for this person		☐ Yes	□No
Speaking Limits:		nmon Council) 5 m			

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2

Are you an e	lected 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:	sing 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	Signature			
	Print Name			