Date:	7/21	110
	<b>-</b>	, ·

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

You must register before the ALRC considers your item.

## PLEASE PRINT CLEARLY

Agenda No Required – Can be a con registration table	btained from agenda	Name Ado Address 304 Mac	y Dieckman Parkwood In Ap Uson, WI 5371	t7 4
Please check the app	propriate boxes:			
Availabl	vish to speak e to answer questions	<del></del>	Oppose  Wish to speak  Do not wish to speak  Available to answer qu	
(If you answered "n question)	you representing an organizat o, "STOP; you need not com	plete the rest of this	form If you answered "yes	
<u>.</u>				
Are you being paid f	or your representation?		Yes	<b>U</b> No
	s part of your other paid dutie o, "STOP; you need not com	<u> </u>		
Speaking Limits:	Public Hearing Information Hearing Other Items	5 minu	tes	

## Registration Statement - Page 2

_	ou an e mental	elected official who is ap body?	pearing solely	on behalf of your	office or for	your mum	cipality or other
		red "yes" to the question, ou answered "no" to the q				rm, except ti	hat you must sign
If you that:	are bei	ng paid for your represen	tation, or if yo	our appearance is pa	=		o you understand
	1.	Before you engage in lo with the City Clerk?	bbying as a lo	obyist, you or your p	principal mus	t file an autl ☐ Yes	notization No
	2	Your principal is not powith the City Clerk?	ermitted to aut	horize you to lobby	y unless the p	orincipal is	registered
	3	If your principal spends period (calendar quarter the remaining quarters of	), the principa	l must file expense			
		red "no" to any of the las n 103 of the City-County I		· -	•	266-4601 or	go to the Clerk's
Date	7/	21/10	Signature	Albu E	Rucke	in	
-			Print Name	Alba Die	ckmai	7 .	