几二二
Madison

Date:	//-	9	 10	

WISH TO SPEAK FORM

CITY OF MADISON

Registration	on Statement -	COMMITTEE	Council		
Please Print 200	88 <u>/</u>	Name		NA PRONI	
Please check on	ie:	AND	Please	check:	
Support Oppose	ipport Nor Op		V V	Vish to Speak	
At this meeting are you (If you answered "no, of who you represent a Name, address and tele	" STOP; you need not nd go on to the next q	t complete the rest uestion.)	of this form. If yo	nu answered "yes,"	No provide the name
Are you being paid for	vour representation?			☐ Yes	No
Are you appearing as p (If you answered "no," question.)	art of your other paid	duties for this persecutive duties for this persecutive the rest	son or organizatio of this form. If yo	n?	No go on to the next
	Public Hearing (Com Information Hearing. Other Items		3 minutes		

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2

-		ected official or employee v	who is appear	ing solely on behalf of your offi		unicipality or No
		red "yes" to the question, S ou answered "no" to the qu		ed not complete the rest of this for to the next question.)	orm, except that y	you must sign
If you that:	are bei	ing paid for your represent	ation, or if yo	ur appearance is part of other p	oaid duties, pleas	se be advised
	1.	Before you engage in lob with the City Clerk.	bying as a lob	byist, you or your principal mus	st file an authoriz	zation
	2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
	3.		rincipal must	ore than \$1,000 for lobbying ser file expense statements with the		
•	_	o the City Clerk's website the City-County Building, M		adison.com/clerk/index.html or ore information.)	go to the Cleri	k's Office at
Date _	11-0	9-10	Signature	expl.		
		j	Print Name	EKELERINA ,	PRONING	f