

Date:	, , , , , , , , , , , , , , , , , , ,	91	10
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WISH TO SPEAK FORM

CITY OF MADISON

Registra	tion Statement ⁻ -	COMMITTEE	ouncil		
Please Print		PLEASE	PRINT NAME CL	EARLY	
Agenda No\(9	. Name _ Address _	Jenny Yue 311 E Ch Wilwander	icago St. 1,WI 5321	Ste 410
Please check	one:	AND	Please cho	eck:	
Support			Wisl	h to Speak	
Oppose					
Neither !	Support Nor Op	pose			
(If you answered "no of who you represen	cou representing an organ, "STOP; you need no to the next of elephone number of each company.	t complete the rest of uestion.)	f this form. If you an	swered "yes," p	☐ No provide the name
Are you appearing as	or your representation? spart of your other paid	duties for this perso t complete the rest o	on or organization? f this form. If you an	Yes Yes swered "yes," s	□ No □No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3	minutes		

(SEE BACK)

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
	red "yes" to the question, STOP. 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.)
If you are bei that:	ng 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?
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)
Date	Signature Jers Serry Yvan



WISH TO SPEAK FORM

CITY OF MADISON

Registration Statement -	COMMITTEE	ouncil		
Please Print	PLEASE Name	PRINT NAME CLEARLY		
Agenda No. 16 Walgroers	Address _	17 MERRILL CREST		
Please check one:	AND	Please check:		
Support		Wish to Speak		
Oppose				
Neither Support Nor Oppose				
At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next que. Name, address and telephone number of each	complete the rest og uestion.)	f this form. If you answered "yes," provide the name		
		·		
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.)		n or organization? Yes No f this form. If you answered "yes," go on to the next		
Speaking Limits: Public Hearing (Communication Hearing Other Items	3 1	minutes		

(SEE BACK)

 (If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must significantly this form. If you answered "no" to the question, go on to the next question.) If you are being paid for your representation, or if your appearance is part of other paid duties, please be advise that: Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk. 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
 Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting
 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
City Clerk. 3. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting
remainder of the calendar year?
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office of Room 103 of the City-County Building, Madison, for more information.)
Date Signature
Print Name



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registration Statement	- Common Council			
Agenda No	PLEASE PRINT CLEARLY Name RICKY LOGGE Address 2804 Amorican legion 121 Cross Flams 102 53528			
Please check one:	AND Please check:			
Support Oppose	Available to answer questions			
Neither Support Nor Oppose				
(If you answered "no," STOP; you need to of who you represent and go on to the nex	rganization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide the name at question.) ach person or organization you are representing:			
3710 E Washington	the 1.2012			
Madron WI 53704	608.742-9362			
Are you being paid for your representation	1? Yes No			
Are you appearing as part of your other pa (If you answered "no," STOP; you need no question.)	nid duties for this person or organization? Yes No not complete the rest of this form. If you answered "yes," go on to the next			
Information Hearing	ommon Council)5 minutes ng			

Are you an eleother governm		e who is appea	ring solely on behalf of your	office or for you	ur municipality or
	red "yes" to the question, ou answered "no" to the c		eed not complete the rest of to the next question.)	his form, except i	hat you must sign
If you are bei that:	ng paid for your represen	ntation, or if y	our appearance is part of ot	her paid duties,	please be advised
1.	Before you engage in lowith the City Clerk.	obbying as a lo	bbyist, you or your principal	l must file an aut	horization
2.	Your principal is not pe City Clerk.	ermitted to aut	horize you to lobby unless y	ou are registered	i with the
3.	<i>y</i> 1 * *	principal mus	nore than \$1,000 for lobbying title expense statements w	-	
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)					
Date Nov	9-10	Signature Print Name	Ploger Ricky Loger		

Date: 11/9/10



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registration Statement - Common Council				
			PRINT CLEARLY	
Agenda No	9		TIM ME Murtry II 1749 N. Prospect Ave.	
Please check	one:	AND	Please check:	
Support Oppose	· ·		Available to answer questions	
Neither	Support Nor Opp	ose		
(If you answered "n of who you represen	at and go on to the next que telephone number of each	complete the rest of uestion.)	f this form. If you answered "yes," provide to this form are representing:	the name
Are you being paid	for your representation?		☐ Yes ☐ No	
	s part of your other paid on the state of your need not		n or organization? LYES No fthis form. If you answered "yes," go on to	the next
Speaking Limits:	Public Hearing (Comr Information Hearing Other Items	3 т		

Are you an eleother government		e who is appear	ring solely on behalf of your o	ffice or for you Yes	ir municipality or
	red "yes" to the question, ou answered "no" to the q		ed not complete the rest of this to the next question.)	form, except t	hat you must sign
If you are being that:	ng paid for your represer	ntation, or if yo	our appearance is part of othe	r paid duties, p	please be advised
1.	Before you engage in lo with the City Clerk.	obbying as a lol	obyist, you or your principal m	ust file an autl	norization
2.	Your principal is not per City Clerk.	ermitted to auth	norize you to lobby unless you	are registered	I with the
3.		principal must	ore than \$1,000 for lobbying s file expense statements with		
	the City Clerk's websii he City-County Building,		nadison.com/clerk/index.html (nore information.)	or go to the (Clerk's Office at
Date \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1/10	Signature Print Name	Lim YMEMUL Tin McHortry	Hy II	



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registration S	Statement - Common Committee	ouncil		
Agenda No		PRINT CLEARLY CAMERON BIKCH 7941 TREE IN MADISON WI		
Please check one:	AND	Please check:		
✓ Support☐ Oppose		Available to answer questions		
Neither Support Nor Oppose				
(If you answered "no," STO of who you represent and go Name, address and telephone		this form. If you answered "yes," provide the name		
Are you being paid for your	representation?	✓ Yes □ No		
	your other paid duties for this person P; you need not complete the rest of	n or organization? Yes No Yes No No this form. If you answered "yes," go on to the next		
Inform	c Hearing (Common Council)5 mation Hearing	ninutes		

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?

Yes No

other governmental body?

		red "yes" to the question, STOP. 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.)
If you that:	are bei	ing paid for your representation, or if your appearance is part of other paid duties, please be advised
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		the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)
Date _	// .	19/2010 Signature AMEDION K. BIRCH
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