



Date: 3-29-11

## **WISH TO SPEAK FORM**

Registration Statement	- Common C	Council
Please Print  Agenda No.	PLEASI Name Address	Eric Sindquist 2215 Keyrs Ave Madison
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor O	ppose	
At this meeting are you representing an or (If you answered "no," STOP; you need no f who you represent and go on to the next.  Name, address and telephone number of each	not complete the rest t question.)	t of 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 pa (If you answered "no," STOP; you need no question.)		rson or organization?  Yes No t of this form. If you answered "yes," go on to the next
Information Hearin	mmon Council)	3 minutes

	n elected official or employee who is appearing solely on behalf of your office or for your municipality or rnmental body?
	wered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign If you answered "no" to the question, go on to the next question.)
If you are that:	being 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?
	o to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date: 3/29/2010

# **WISH TO SPEAK FORM**

Registration Statement	- Common C	Council
Please Print (2)	COMMITTEE	E PRINT NAME CLEARLY
Agenda No. 15932	Name Address	Nate Warnke 13.02 Chandle 5%. Wadison W = 5.3715
Please check one:	AND	Please check:
Support	-	Wish to Speak
<b>Oppose</b>		
Neither Support Nor O	ppose	
of who you represent and go on to the next	ot complete the rest question.)	t of this form. If you answered "yes," provide the name
Name, address and telephone number of ea	= =	
Marsh Green bush	Nighbo	-hood Association.
+ Self		
Are you being paid for your representation	?	☐ Yes ☐ No
Are you appearing as part of your other part (If you answered "no," STOP; you need n question.)	-	rson or organization?
	mmon Council)5 g3	3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
	ered "yes" to the question, <b>STOP.</b> 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 b that:	eing 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



Date:	
Daw.	

# **WISH TO SPEAK FORM**

Registra	ation Statement -	Common Co	ouncil	· · · · · · · · · · · · · · · · · · ·	
Please Print  Agenda No.	)	PLEASE  Name  Address	PRINT NAI Dohi	ME CLEARLY n Schlaefer Kendall A	r N2
Please check	one:	AND	Pleas	se check:	
<b>Suppor</b>	t			Wish to Spea	k
Oppose					
<b>Neither</b>	Support Nor Op	pose			
(If you answered "i of who you represe	you representing an organo," <b>STOP;</b> you need not and go on to the next question telephone number of each	t complete the rest o nuestion.)	f this form. If	f you answered "yes,	⊮∑ No " provide the name
	for your representation?	duties for this nerso	n or organiza	Yes Tyes	  ∑  No  ₹  No
	as part of your other paid to," <b>STOP;</b> you need not				
Speaking Limits:	Public Hearing (Com Information Hearing.	3			

•	ected official or employee who is appearing solely on behalf of your office or for yourntal body?	our municipality or No
	red "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except ou answered "no" to the question, go on to the next question.)	that you must sign
If you ar 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 au with the City Clerk.	thorization
2.	Your principal is not permitted to authorize you to lobby unless you are registered City Clerk.	ed with the
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any period (half year), the principal must file expense statements with the City Cleremainder of the calendar year?	
	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the he City-County Building, Madison, for more information.)	Clerk's Office at
Date	Signature	
	Print Name	

Date: 8/3/2010

### **CITY OF MADISON**

## Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print		PLEASE F	PRINT NAME CLE	ARLY	
Agenda No	1	Name Address	RED	WOHS OWSIP	A C
Please check the ap	propriate box:		Please check th	ne appropriate box:	
Support Oppose Neither S	upport Nor Oppos	AND	Wish to spe  Do not wish  Available to	ak i to speak o answer questions	
(If you answered "no of who you represent	you representing an orga o, " <b>STOP;</b> you need no t and go on to the next of elephone number of eac	t complete the rest of question.)	this form. If you answ		o the name
Are you being paid f	or your representation?			Yes N	0
• • • •	s part of your other paid o, " <b>STOP;</b> you need no		_	☐ Yes ☐ Nowered "yes," go on t	
Speaking Limits:	Public Hearing (Com Information Hearing	nmon Council)5 n			

Are you an e other govern	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
100	ered "yes" to the question, <b>STOP.</b> 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:	ing 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?
	o 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

Date:			

### **CITY OF MADISON**

## Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print	PLEASE P	RINT NAME CLEARLY
Agenda No2	Name	MIKE SLAVHEY  4824 SHERWOOD RD  MANISON, WI 53711
Please check the appropriate box:		Please check the appropriate box:
Support Oppose Neither Support Nor Oppose At this meeting are you representing an organ	nization or a person o	
of who you represent and go on to the next qu	uestion.)	this form. If you answered "yes," provide the name
Name, address and telephone number of each	person or organizati	on you are representing:
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.)		or organization? Yes No this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Communication Hearing		

	n elected official or empl rnmental body?	oyee who is appearing solely on behalf	f of your office or for your municipality or Yes No
	• •	tion, <b>STOP.</b> You need not complete the the question, go on to the next question	rest of this form, except that you must sign
If you are that:	being paid for your rep	resentation, or if your appearance is p	art of other paid duties, please be advised
1.	Before you engage with the City Clerk.	in lobbying as a lobbyist, you or your	principal must file an authorization
2.	Your principal is no City Clerk.	ot permitted to authorize you to lobby	unless you are registered with the
3.		ends or will owe more than \$1,000 for the principal must file expense stater lendar year?	
		ebsite <u>www.cityofmadison.com/clerk/ii</u> ling, Madison, for more information.)	ndex.html or go to the Clerk's Office at
Date		Signature	
٠		Print Name	



Date: 3 29/11

# **WISH TO SPEAK FORM**

Registration Statement -	Common C	Council		
	COMMITTEE			
Please Print	DIEACE	E PRINT NAME	CLEADLY	
		PRINT NAIME ΛιΙ	LEARLY (	
$\bigcirc$	Name	Allen	Avute	ser
Agenda No.	Address	851	S. <u>S</u> l	LONE NL
		1 achie	on WI	53712
Please check one:	AND	Please	check:	
Support		$\triangleright$ w	ish to Speal	K
0	0 5		ion to Spour	•
Oppose Amenha	~ 0			
■ Neither Support Nor Op	pose			
At this meeting are you representing an orga (If you answered "no," STOP; you need not of who you represent and go on to the next quality Name, address and telephone number of each of the company of th	t complete the rest uestion.)	of this form. If you	u answered "yes,"	☐ No " provide the name
1 & Cilman	54	Je		
Madison	4			
Are you being paid for your representation?			Yes	☐ No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need not question.)				No on to the next
Speaking Limits: Public Hearing (Com Information Hearing. Other Items		3 minutes		

REGIONATION OF A PLINE N T AGE 2
Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?
If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign his form. If you answered "no" to the question, go on to the next question.)
f you are being paid for your representation, or if your appearance is part of other paid duties, please be advised hat:
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?
Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Coom 103 of the City-County Building, Madison, for more information.)
Date 329 Signature
Print Name Allen Auntsen



Date: 3-29-2011

# **WISH TO SPEAK FORM**

Registration Statement -	Common C	Council	
Please Print		DOINT NA	ME CLEARLY
$\approx$	Name		- B. THORNTON
Agenda No.	Address	1104	JENIFER ST
		M	MOISON
Please check one:	AND	Plea	ise check:
Support Amon Somet	(1		Wish to Speak
Oppose			
Neither Support Nor Op	nose		
(If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next q  Name, address and telephone number of each	uestion.)		
2	•	•	•
MARGUETTE NEIGHTSC	KLHOOD H		
Are you being paid for your representation?			Yes Wo
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need not question.)		_	
Speaking Limits: Public Hearing (Com- Information Hearing. Other Items	3	3 minutes	

Are you an ele other governme	cted official or employee ental body?	who is appearing	solely on behalf o	of your office or for your Yes	our municipality or No
	ed "yes" to the question, <b>S</b> u answered "no" to the qu			est of this form, except	that you must sign
If you are being that:	ng paid for your represent	tation, or if your	appearance is part	t of other paid duties,	please be advised
1.	Before you engage in lob with the City Clerk.	bying as a lobby	ist, you or your pri	ncipal must file an au	thorization
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	If your principal spends of period (half year), the premainder of the calendar	rincipal must fil			
	the City Clerk's website ne City-County Building, M			ex.html or go to the	Clerk's Office at
Date 3-2	9-2011	Signature	SIT	2.2	
		Print Name	Scorr B	· HERRITA	J



# **WISH TO SPEAK FORM**

Registra	tion Statement -	COMMITTEE	Council		
Please Print		PLEASI	E PRINT NA	ME CLEARLY	
Agenda No. 2	nent	Name Address	AMY 1315 Madiso	Rountree Hoven Ct on W1 5:	3715
Please check of	one:	AND	Plea	ase check:	
<b>Support</b>			abla	Wish to Spea	k
<b>Oppose</b>					
Neither S	Support Nor Op	pose			
(If you answered "no of who you represent	you representing an orgo," STOP; you need not and go on to the next belephone number of each	ot complete the rest question.)	of this form.	If you answered "yes,	
Are you being paid for	or your representation?	)		☐ Yes	□ No
Are you appearing as (If you answered "no question.)	s part of your other paid o, " <b>STOP;</b> you need no	d duties for this per ot complete the rest	son or organize of this form.	zation?	□ No " go on to the next
Speaking Limits:	Public Hearing (Cor Information Hearing Other Items	,	3 minutes		

-	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
100	vered "yes" to the question, <b>STOP.</b> 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 b that:	being 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 f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date: 3/29/1(

# **WISH TO SPEAK FORM**

Registration	on Statement	COMMITTEE	ouncil		
Please Print  Agenda No.	2	PLEASE  Name  Address	PRINT NAME CLI David P 16 N Carr Madeson	Swer	
Please check on	e:	AND	Please che	eck:	
Oppose	Amendment  pport Nor Opp	oose	☐ Wish	n to Speak	
At this meeting are you (If you answered "no," of who you represent at Name, address and tele	' <b>STOP;</b> you need not nd go on to the next qu	complete the rest of uestion.)	f this form. If you an		☐ No rovide the name
Ma	dison Comme 202 Willia	unity Coopera	tive	A STATE OF THE STA	· · ·
	202 Willia	imson W	Ladison		
Are you being paid for	your representation?			Yes [	□ No
Are you appearing as p (If you answered "no," question.)	art of your other paid of STOP; you need not	duties for this perso complete the rest o	on or organization? If this form. If you an	☐ Yes [ eswered "yes," go	☐ No o on to the next
	Public Hearing (Comr Information Hearing Other Items	3	minutes		

Are you an elected official or employee who is appearing solely on behalf of your office or for your munici other governmental body?  Yes No							
100		ed "yes" to the question, we answered "no" to the q		-		rm, except t	hat you must sign
If you and that:	re bein	ng paid for your represen	tation, or if yo	our appearance is	part of other pa	aid duties, p	please be advised
1		Before you engage in lot with the City Clerk.	bbying as a lol	obyist, you or you	r principal must	file an auth	norization
2	2	Your principal is not per City Clerk.	rmitted to auth	norize you to lobb	oy unless you ar	e registered	with the
3		If your principal spends period (half year), the premainder of the calendar	orincipal must	•		•	. •
	_	the City Clerk's website e City-County Building, M				go to the (	Clerk's Office at
Date	3/2	29/11	Signature Print Name	Davi	IR Spe	vor	



Date:	3/	a'	1/	11	

# **WISH TO SPEAK FORM**

Registration Statement -	COMMITTEE	Council
Agenda No. Ha Amend Ment	PLEASE Name Address	EPRINT NAME CLEARLY  CYMUNA KOSCHMANN  1157 EMERALL ST  53715
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose  Neither Support Nor Op  At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of	nnization or a perso t complete the rest	on other than yourself: Yes No of this form. If you answered "yes," provide the name
Name, address and telephone number of eac	h person or organi	zation you are representing:
Are you being paid for your representation?		☐ Yes ☑ No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need no question.)	duties for this per t complete the rest	son or organization?
Speaking Limits: Public Hearing (Com Information Hearing Other Items		3 minutes

-	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
, , ,	vered "yes" to the question, <b>STOP.</b> 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 l that:	being 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 f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date:	3/	
		-

# **WISH TO SPEAK FORM**

Registra	tion Statement -	Common C	Council	
Please Print			EPRINT NAME CLEARLY	1
Agenda No. 2	-		4221 School	ol RJ.
Please check of		AND	Please check:	
Support	amendone	ent 11	Wish to S	peak
Oppose				
Neither S	Support Nor Op	pose		
(If you answered "no of who you represent	o," <b>STOP;</b> you need not t and go on to the next q	t complete the rest uestion.)	on other than yourself:  of this form. If you answered  zation you are representing:	
Are you being paid for	or your representation?			Yes No
	part of your other paid p," STOP; you need not		son or organization?	Yes No No "yes," go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items		3 minutes	

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mmental body?  Yes No
	wered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign fyou answered "no" to the question, go on to the next question.)
If you are that:	being 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 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date: 3-29-11

## **WISH TO SPEAK FORM**

Registration Staten	nent - Common Co	ouncil
Please Print		PRINT NAME CLEARLY
Agenda No. <u>A</u> Amd+ 11	Address	Leslie Fields 1144 Erin Street
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support N	or Oppose	
At this meeting are you representing (If you answered "no," STOP; you of who you represent and go on to to Name, address and telephone numbers.	need not complete the rest of he next question.)	f this form. If you answered "yes," provide the name
Are you being paid for your represe	entation?	☐ Yes ☐ No
Are you appearing as part of your o (If you answered "no," STOP; you question.)	ther paid duties for this person need not complete the rest of	on or organization?
1 0	ing (Common Council)5 n Hearing3 n	

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
100	vered "yes" to the question, <b>STOP.</b> 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 t that:	being 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 f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date:	3	29	(1)	

# **WISH TO SPEAK FORM**

Registration State	ment - Common Co	ouncil
Please Print  Agenda No.	PLEASE Name Address	PRINT NAME CLEARLY SETH NOWAK 930 E. DAYTON ST MADISON, WI 53703
Please check one:	AND	Please check:
Support AMEN D	NENT II	Wish to Speak
Oppose		
Neither Support N	or Oppose	
At this meeting are you representing (If you answered "no," STOP; you of who you represent and go on to Name, address and telephone numbers.	u need not complete the rest of the next question.)	of this form. If you answered "yes," provide the name
		•
Are you being paid for your represe	entation?	☐ Yes ☐ No
Are you appearing as part of your of (If you answered "no," <b>STOP</b> ; you question.)		on or organization?  Yes No No of this form. If you answered "yes," go on to the next
Information	ring (Common Council)5 n Hearing	minutes

_		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?  Yes No
		ed "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)
If you a	are bein	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 the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name



Date:	_3	-)	7-1	1	
				7	

# **WISH TO SPEAK FORM**

Registration St	atement - <u>Common</u>	ı Council
J	COMMITTEE	
Please Print	DIEA	SE DDINT NAME OF EADLY
	PLCA	SE PRINT NAME CLEARLY
	. Name	ROSEMARY LEE
Agenda No	Addres	ss /// W W/950N
		53903
Please check one:	AND	Please check:
	<del> </del>	
<b>Support</b>		Wish to Speak
Oppose		
Neither Suppor	rt Nor Onnose	
Neither Suppor	Tt 1101 Oppose	
•		1 2
At this meeting are you repres	senting an organization or a pe	erson other than yourself: Yes XNo
		est of this form. If you answered "yes," provide the nam
of who you represent and go o	n to the next question.)	
Name, address and telephone	number of each person or orga	anization you are representing:
Are you being paid for your re	presentation?	☐ Yes ☐ No
Are you appearing as part of y (If you answered "no," STOP question.)	our other paid duties for this property; you need not complete the re	person or organization? Yes No rest of this form. If you answered "yes," go on to the nex
Speaking Limits: Public	Hearing (Common Council)	5 minutes
Inform	ation Hearing	3 minutes
Other 1	Items	3 minutes

-		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?  Yes No
		red "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question.)
If you that:	are bein	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
		Print Name



Date:	3/2	9/11	
		11.1	

# **WISH TO SPEAK FORM**

Registration Statement	- Common C	Council
Please Print  Aganda No.	PLEASE Name	EPRINT NAME CLEARLY
Agenda No.	Address	Madison, WC 53703
Please check one:	AND	Please check:
Support # (		Wish to Speak
Oppose + 10		
Neither Support Nor O	ppose	
of who you represent and go on to the next	not complete the rest t question.) ach person or organi	of this form. If you answered "yes," provide the name zation you are representing:
Magneth	Neighborn	rood Association
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 a question.)	id duties for this per not complete the rest	son or organization? Yes Mo of this form. If you answered "yes," go on to the next
Information Hearin	ommon Council)	3 minutes

-		cted official or employed ental body?	e who is appear	ring solely on behalf o	of your office or for Ye	<u> </u>
, , ,		ed "yes" to the question, u answered "no" to the q		_	est of this form, exce	ept that you must sign
If you a that:	re bein	ng paid for your represen	ntation, or if ye	our appearance is part	of other paid duti	es, please be advised
	1.	Before you engage in lowith the City Clerk.	obbying as a lo	bbyist, you or your pri	ncipal must file an	authorization
2	2.	Your principal is not pe City Clerk.	ermitted to autl	horize you to lobby ur	nless you are regist	tered with the
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 websit e City-County Building,			ex.html or go to t	he Clerk's Office at
Date	3(20	1 ( 1	Signature	Julie	A Spean	Υ
			Print Name	<u>Udulie</u>	Spears	



Date: 31911

# **WISH TO SPEAK FORM**

Registration Statement -	COMMITTEE	ouncil		
Please Print  Agenda No.	PLEASE NameAddress	PRINT NAM	ME CLEARLY	È
Please check one:	AND	Pleas	se check:	
Support		X	Wish to Speak	ζ.
Oppose				
Neither Support Nor Op	pose			
At this meeting are you representing an orga (If you answered "no," STOP; you need not of who you represent and go on to the next quality Name, address and telephone number of each	t complete the rest of question.)	of this form. If	f you answered "yes,'	X  No ' 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," <b>STOP</b> ; you need not question.)	duties for this person to complete the rest of	on or organiza of this form. I	ation?  \[ Yes \]  If you answered "yes,"	☐ No " go on to the next
Speaking Limits: Public Hearing (Com Information Hearing)	3			

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?  Yes No
	wered "yes" to the question, <b>STOP.</b> 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 that:	being 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 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date:  $\frac{5/2.9}{11}$ 

# **WISH TO SPEAK FORM**

Registration State	ment - Common Co	uncil
Please Print	And Annual Control of the Control of	RINT NAME CLEARLY
Agenda No. 2 , Section 1	Name Address	Brian Jordan
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support N	Nor Oppose	
of who you represent and go on to	u need not complete the rest of the next question.)	this form. If you answered "yes," provide the name
Name, address and telephone num	ber of each person or organizat	ion you are representing:
102	patia Housing Core E. Go-hum St.	peratist
Mad.	304, W	(608) 257-1195
Are you being paid for your repres	sentation?	☐ Yes ☐ No
Are you appearing as part of your (If you answered "no," STOP; yo question.)	other paid duties for this person u need not complete the rest of	n or organization?
Informatio	nring (Common Council)5 r n Hearing3 r s3 r	minutes

-	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
	vered "yes" to the question, <b>STOP.</b> 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 b	being 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 f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date: 3 29 - 11

# **WISH TO SPEAK FORM**

Registration Statement -		ouncil		
	COMMITTEE			
Please Print  Agenda No.	PLEASE Name Address	PRINT NAME	School	FFCC radinu 53575
Please check one:	AND	Please	check:	
Support		v	Vish to Speak	
Oppose				
Neither Support Nor Op	pose			
/ <del></del>				
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," provide the name of who you represent and go on to the next question.)				
Name, address and telephone number of each	ch person or organiz	zation you are rep	resenting:	
Smort Grav	th Oce	atec A	<u>bdison</u>	
701 e Wast	537	203	1	
Are you being paid for your representation?	•		∑¥'es	□ No
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)				No go on to the next
Speaking Limits: Public Hearing (Cor Information Hearing Other Items	ŗ	3 minutes		

Are you an elected official or employed other governmental body?	vee who is appearing solely on behalf of your office or for your municipa  Yes No	lity or
(If you answered "yes" to the question this form. If you answered "no" to the	n, <b>STOP.</b> You need not complete the rest of this form, except that you muse question, go on to the next question.)	st sign
If you are being paid for your representat:	sentation, or if your appearance is part of other paid duties, please be ac	dvised
1. Before you engage in l with the City Clerk.	lobbying as a lobbyist, you or your principal must file an authorization	
2. Your principal is not p City Clerk.	permitted to authorize you to lobby unless you are registered with the	
	ds or will owe more than \$1,000 for lobbying services in any reporting e principal must file expense statements with the City Clerk for the dar year?	
(Please go to the City Clerk's webs Room 103 of the City-County Building,	site <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Off. z, Madison, for more information.)	ìce at
Date 329-1/	Signature M	
	Print Name Corole Schoeffer	



# **WISH TO SPEAK FORM**

Registration Statement -	Common C	council
Please Print	PLEASE	PRINT NAME CLEARLY
Agenda No		PETER FIALA 225 E LAKE LAWWPL MADISON, WI
Please check one:	AND	Please check:
Support AMENDMENT#	**Tuttimonia	Wish to Speak
Oppose		
☐ Neither Support Nor Op	pose	
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of Name, address and telephone number of each	ot complete the rest question.)	of 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 no question.)	d duties for this per ot complete the resu	son or organization?  Yes No t of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Cor Information Hearing Other Items	ş	3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
	vered "yes" to the question, <b>STOP.</b> 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 I that:	peing 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 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date:	

# **WISH TO SPEAK FORM**

Registra	tion Statement -	Common C	Council		
		COMMITTEE			
Please Print		PLEASE	E PRINT NA	ME CLEARLY	
Agenda No.	<u></u>	Name Address	EDWA 405 MADIS	ED KUNAPSK SIDNEY ST.	
Please check of	one:	AND	Plea	se check:	
Support			A	Wish to Spea	k
Oppose			,		
Neither S	Support Nor Op	pose			
(If you answered "no of who you represent	ou representing an orga o," STOP; you need not t and go on to the next quelephone number of each	t complete the rest uestion.)	of this form. I	If you answered "yes,	No "provide the name
Are you being paid for	or your representation?			☐ Yes	
	part of your other paid paid, "STOP; you need not				No no to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items				

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
	ered "yes" to the question, <b>STOP.</b> 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:	eing 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?
, –	o 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



# **WISH TO SPEAK FORM**

Registration Statement -	Common Co	ouncil
_	COMMITTEE	
Please Print	PLEASE	PRINT NAME CLEARLY
Agenda No.	. Name Address	Man Johnstoff 1 210 Marinetty Tr
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Op	ppose	
At this meeting are you representing an org (If you answered "no," <b>STOP</b> ; you need no of who you represent and go on to the next	ot complete the rest o	n other than yourself: Yes No of this form. If you answered "yes," provide the name
Name, address and telephone number of each	ch person or organiz	ation you are representing:
Jaa W. Wa	M.	
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 no question.)	d duties for this person to complete the rest	on or organization? Yes No No of this form. If you answered "yes," go on to the next
Information Hearing	mmon Council)5 g3	minutes

• •			
elected official or employee mental body?	who is appear	_	or for your municipality or Yes No
-			except that you must sign
eing paid for your represen	tation, or if y	our appearance is part of other paid	duties, please be advised
Before you engage in lob with the City Clerk.	bbying as a lo	bbyist, you or your principal must fil	e an authorization
Your principal is not per City Clerk.	rmitted to au	horize you to lobby unless you are r	egistered with the
period (half year), the p	orincipal mus		
			to the Clerk's Office at
29-11	Signature Print Name	Susan Schn	nely
	mental body?  ered "yes" to the question, you answered "no" to the question in grain paid for your representation.  Before you engage in low with the City Clerk.  Your principal is not perceived.  If your principal spends period (half year), the premainder of the calendate of the City Clerk's website.	mental body?  Tred "yes" to the question, STOP. You not you answered "no" to the question, go on ing paid for your representation, or if y  Before you engage in lobbying as a lowith the City Clerk.  Your principal is not permitted to aut City Clerk.  If your principal spends or will owe meriod (half year), the principal must remainder of the calendar year?  The City Clerk's website www.cityofn the City-County Building, Madison, for meriod in the City-County Building	Before you engage in lobbying as a lobbyist, you or your principal must fil with the City Clerk.  Your principal is not permitted to authorize you to lobby unless you are recity Clerk.  If your principal spends or will owe more than \$1,000 for lobbying service period (half year), the principal must file expense statements with the City Clerk's website <a href="https://www.cityofmadison.com/clerk/index.html">www.cityofmadison.com/clerk/index.html</a> or go the City-County Building, Madison, for more information.)



Date:	

# **WISH TO SPEAK FORM**

Registration Statement -	Common C	Council
Please Print  Agenda No.	PLEASE Name Address	E PRINT NAME CLEARLY  OHN MARTENS  THE HEAG
Please check one:	AND	Please check:
<b>⊠</b> Support		Wish to Speak
Oppose		
Neither Support Nor Op	ppose	
At this meeting are you representing an org (If you answered "no," <b>STOP</b> ; you need no of who you represent and go on to the next Name, address and telephone number of ea	ot complete the rest question.)	st of this form. If you answered "yes," provide the nam
Are you being noid for your representation		☐ Yes X No
Are you being paid for your representation Are you appearing as part of your other pai (If you answered "no," STOP; you need no question.)	d duties for this per	
Speaking Limits: Public Hearing (Con Information Hearing Other Items	g	3 minutes

Are you an e other government	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
	red "yes" to the question, <b>STOP.</b> 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 be that:	ing 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?
,	o 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

Date: 3/2 9/11



# AVAILABLE TO ANSWER QUESTIONS FORM

Registration Statement	Common Council
_	COMMITTEE
Agenda No. 2 Andridad	Name  Address  Name  Address  Name  Name
Please check one:	AND Please check:
Support	<b>Available to answer</b>
Oppose	questions
	2000
Neither Support Nor Opp	Jose
At this meeting are you representing an organ (If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next que Name, address and telephone number of each	complete the rest of this form. If you answered "yes," provide the name uestion.)
M and the common manner of each	( As all)
Madison Camunity 1202 Williamson Stry 1 608-251-2667	nnd36 WI
Are you being paid for your representation?	Yes No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need not question.)	duties for this person or organization?
Information Hearing	mon Council)5 minutes

Are you an e	lected official or employee whental body?	ho is appearing	ng solely on behalf of	f your office o	or for you ] Yes	r municipality or \(\sum_No\)
	ered "yes" to the question, <b>ST</b> you answered "no" to the ques			st of this form,	except th	nat you must sign
If you are be that:	eing paid for your representat	tion, or if you	r appearance is part	of other paid	duties, p	lease be advised
1.	Before you engage in lobby with the City Clerk.	ying as a lobb	yist, you or your prii	ncipal must fil	e an auth	orization
2.	Your principal is not perm City Clerk.	nitted to autho	rize you to lobby un	less you are r	egistered	with the
3.	If your principal spends or period (half year), the principal remainder of the calendar y	ncipal must f				
	o the City Clerk's website $\underline{y}$ the City-County Building, Ma			<u>x.html</u> or go	to the C	Elerk's Office at
Date <u>37</u> 29		ignature	My	4		
	Pr	rint Name	Horan Jor	10%		

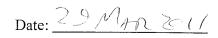




# AVAILABLE TO ANSWER QUESTIONS FORM

Registration Statement	- Common Council	-
	PLEASE PRINT CLEARLY	
Agenda No. 2	Name Jerry E. M.Adow  Address 740 Regard St.  Modison WI	
Please check one:	AND Please check:	
<ul><li>✓ Support</li><li>✓ Oppose</li></ul>	X Available to answer questions	
Neither Support Nor C	ppose	
At this meeting are you representing an o (If you answered "no," STOP; you need of who you represent and go on to the next	rganization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide to question.)	he name
Name, address and telephone number of a	each person or organization you are representing:	
Are you being paid for your representation	n? \\\\\\Yes \\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Are you appearing as part of your other p	,	the next
Information Heari	ommon Council)5 minutes ng3 minutes3 minutes	

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
	ered "yes" to the question, <b>STOP.</b> 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?
	o 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





# DO NOT WISH TO SPEAK FORM

# CITY OF MADISON

Registra	tion Statement	COMMITTEE	uncil	
Please Print		PLEASE P	RINT NAME CLEARLY	
Agenda No.		Name P	ADISON 53703	
Please check of		AND	Please check:	
<b>Oppose</b>	SUPPONT AME OPPOSE AME  Support Nor Opp		<b>Do not wish to spe</b>	ak
(If you answered "no of who you represent	you representing an organ o, " <b>STOP;</b> you need not t and go on to the next qu elephone number of each	complete the rest of t uestion.)	this form. If you answered "yes," prov	No vide the name
Are you being paid for	or your representation?		Yes	No
	part of your other paid on, "STOP; you need not		or organization?	No on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 mi	inutes	

(SEE BACK)

Are you an elected officia other governmental body?	l or employee who is appearing solely on behalf of your office or for your municipality or Yes No
(If you answered "yes" to this form. If you answered	the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign "no" to the question, go on to the next question.)
If you are being paid for that:	your representation, or if your appearance is part of other paid duties, please be advised
1. Before you with the C	engage in lobbying as a lobbyist, you or your principal must file an authorization ity Clerk.
2. Your princ City Clerk	cipal is not permitted to authorize you to lobby unless you are registered with the
period (ha	ncipal spends or will owe more than \$1,000 for lobbying services in any reporting lf year), the principal must file expense statements with the City Clerk for the of the calendar year?
(Please go to the City C Room 103 of the City-Cou	Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at entry Building, Madison, for more information.)
Date	Signature
-	Print Name



n n	MOT	MICH	TA	CDEA		

Date: \_\_\_\_\_

Registra	tion Statement -	Common Co	ouncil		
Please Print		PLEASE	PRINT NAME CLE	ARLY	
Agenda No. <u>2</u> –	Joning_	Name _ Address _	Peter Wil 547 S. R Madesir		
Please check	one:	AND	Please chec	ek:	
Support			Do not	t wish to s	speak
Oppose		Ame	Iment /	1 (Ku	mme/)
Neither !	Support Nor Op				
(If you answered "n of who you represen	you representing an orga o," <b>STOP;</b> you need no t and go on to the next of elephone number of eac	ot complete the rest of question.)	f this form. If you ansv	wered "yes,"	☑No provide the name
Are you being paid	for your representation?	1		Yes	[] No
Are you appearing a (If you answered "n question.)	s part of your other paid o, " <b>STOP;</b> you need no	I duties for this person of complete the rest of	on or organization? of this form. If you ans	☐ Yes wered "yes,"	No No go on to the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items	g3	minutes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	vered "yes" to the question, <b>STOP.</b> 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 b that:	being 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 f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date:	_
-------	---

# DO NOT WISH TO SPEAK FORM

Registrat	ion Statement -	COMMITTEE	ouncil		
Please Print		PLEASE	PRINT NAME CLEA	ARLY	
Agenda No		Name Address	Jason, B. Z/OG Sh Madisan	sk com	W
Please check of	ne:	AND	Please chec	k:	/
Support Support	·		Do not	wish to spe	eak
<b>Oppose</b>					
Neither S	upport Nor Op	pose			
(If you answered "no, of who you represent	ou representing an organistic of the contract of the next of the next of the next of the next of each	complete the rest o uestion.)	f this form. If you answ	· ·	No vide the name
				,	
Are you being paid for	r your representation?			Yes [	 ] No
	part of your other paid "STOP; you need not			Yes vered "yes," go	] No on to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 1	ninutes	)	

Are you an ele	ected official or employee who is appearing solely on behalf of your office or for your municipality or lental body?
	red "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question.)
If you are beinthat:	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
	Print Name



# DO NOT WISH TO SPEAK FORM

Date: \_\_\_\_\_

Registrati	on Statement -	Common C	ouncil		
Please Print		PLEASE I	PRINT NAME C	LEARLY	
Agenda No. 2 Amendo	nent 10	Name _ Address _	1315 Hou Madisen	antree en Wi	53.775
Please check or	ıe:	AND	Please cl	neck:	
Support			Do 1	ot wish t	o speak
Oppose					
Neither S	upport Nor O <sub>l</sub>	ppose			
At this meeting are yo (If you answered "no, of who you represent of whom, address and telements are your meeting are your whom you represent to the property of the property	" STOP; you need no and go on to the next	ot complete the rest ( question.)	of this form. If you d	answered "ye	<u> </u>
Are you being paid for	r vour rapracantation	7		☐ Ye	s $\square$ No
Are you appearing as justified (If you answered "no, question.)	part of your other pai	d duties for this pers		☐ Ye	s 🗌 No
Speaking Limits:		mmon Council)5 g3			

	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
100	ered "yes" to the question, <b>STOP.</b> 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?
	o 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

Date: 3/29/11
---------------



# DO NOT WISH TO SPEAK FORM

Registrat	ion Statement	COMMITTEE	ouncil		
Please Print  Agenda No. #2	Amendment	PLEASE Name Address	PRINT NAME CLE. CYNTHIA KOSC 1157 EMEVA	ARLY hmann dST 53715	
Please check o	ne:	AND	Please chec		1-
Support Oppose Neither S	upport Nor Opp	oose	Do not	wish to	speak
(If you answered "no, of who you represent	ou representing an organ "STOP; you need not and go on to the next quephone number of each	complete the rest of uestion.)	of this form. If you ansv	·	No provide the name
A					
	part of your other paid of "STOP; you need not			☐ Yes ☐ Yes wered "yes,"	No No go on to the next
Speaking Limits:	Public Hearing (Comr Information Hearing Other Items	3	minutes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form. If	vered "yes" to the question, <b>STOP.</b> 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 b	eing 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 f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date.	

## CITY OF MADISON

DO NOT WISH TO SPEAK FORM

Registration Statement -	Common Council	
Registration Statement	COMMITTEE	-,

		COMMITTEE			
Please Print	,	PLEASE	PRINT NAME CLE	ARLY	
		Name	Reter Wi	11; ans	
Agenda No. Z	2ming	Address	547 5 16	Pandall	=
	. ,		Madis	ir	
Please check	one:	AND	Please che	ck:	
Support			Do no	t wish to speak	
Oppose		Ame	ndment	10 (km)	
Neither	Support Nor Op				
(If you answered "n of who you represen	you representing an organic, "STOP; you need not at and go on to the next quelephone number of each	complete the rest of uestion.)	f this form. If you ans	· · · · ·	
	-				
Are you being paid	for your representation?			Yes No	
	s part of your other paid o," STOP; you need not			Yes No wered "yes," go on to	
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3	minutes		

(SEE BACK)

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answ this form. If	ered "yes" to the question, <b>STOP.</b> 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 bothat:	eing 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?
(Please go Room 103 oj	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date: 29 May

# DO NOT WISH TO SPEAK FORM

Registration Statement -	Common Council
	COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name Dave Carrig  Address 645 Avvew 416
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose 10	$\nu$
Neither Support Nor Op	ppose
of who you represent and go on to the next of	ot complete the rest of this form. If you answered "yes," provide the name question.)
Name, address and telephone number of each	ch person or organization you are representing:
Strongly Sypported	<u>- 6-095 Should be</u>
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need no question.)	d duties for this person or organization? Yes No st complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	nmon Council)5 minutes 3 minutes 3 minutes

Are you an el other governn	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, <b>STOP.</b> 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 beithat:	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			
	Print Name			



# DO NOT WISH TO SPEAK FORM

Registrati	on Statement -	Common Co	ouncil		
Please Print			PRINT NAME CLE		
Agenda No. 2		Name _ Address _	JESDE TO	n St	
Please check or	ie:	AND	Please che	ck:	ine
Support			Do no	t wish to sp	eak
Oppose					
Neither S	upport Nor Op	pose			
At this meeting are yo (If you answered "no, of who you represent of whom, address and tell	" <b>STOP;</b> you need no and go on to the next o	nt complete the rest of question.)	f this form. If you ans	wered "yes," pr	No No rovide the name
Are you being paid fo				☐ Yes	☑ No
Are you appearing as (If you answered "no, question.)	part of your other paid " STOP; you need no	d duties for this person of complete the rest of	on or organization? of this form. If you ans	Yes swered "yes," g	∐ No to on to the next
Speaking Limits:	Public Hearing (Cor Information Hearing Other Items	g3	minutes		

Are you an e	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
(If you answe this form. If y	red "yes" to the question, <b>STOP.</b> 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 be that:	ing 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?
	o 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

Date:  $\frac{3/29/2011}{}$ 



# DO NOT WISH TO SPEAK FORM

Registrati	on Statement	Common Co	uncil		
Please Print  Agenda No.		Name	PRINT NAME CLEA Kathleen 636 Langdo	Wilcox n St.	
Please check of Support  Oppose  Neither S	ne: upport Nor Opp	AND	Madison M  Please check  Do not		
(If you answered "no, of who you represent	" STOP; you need not and go on to the next qu	complete the rest of uestion.)	other than yourself:  f this form. If you answe tion you are representin	ered "yes," pro	☑ No ovide the name
	part of your other paid		n or organization? f this form. If you answe	☐ Yes ☐ ☐ Yes ☐ ered "yes," go	No No no to the next
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3 r	ninutes		

Are you an e other governi	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	red "yes" to the question, <b>STOP.</b> 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 be that:	ing 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 the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date:  $\frac{3/29/11}{}$ 

# DO NOT WISH TO SPEAK FORM

Registra	tion Statement -	Common Co	ouncil	
Please Print			PRINT NAME CLEA	
Agenda No	2	Name	Floyd A H 588 Bandin Madison W	umme   ng Ln. JI 53704
Please check	one:	AND	Please chec	k:
<b>Support</b>			Do not	wish to speak
Oppose				
<b>Neither</b>	Support Nor Op	pose		
(If you answered "n of who you represen	you representing an orga o," STOP; you need not that and go on to the next que telephone number of each	t complete the rest o guestion.)	f this form. If you answ	ered "yes," provide the name
Are you being paid	for your representation?			Yes No
	s part of your other paid o," STOP; you need not			Yes No No vered "yes," go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3 1	ninutes	

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?
	vered "yes" to the question, <b>STOP.</b> 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 l that:	being 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 fifthe City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date: 3() 1/1(



# DO NOT WISH TO SPEAK FORM

Registrat	ion Statement	Common Committee	ouncil		NAMES AND ADDRESS OF THE PARTY
Please Print  Agenda No.	fmed. [[	PLEASE  Name  Address	PRINT NAME CLE Duniel K 249 N. Mylson W	EARLY UND(07 Lukelan 2 5370	-n M
Please check of	ne:	AND	Please che	ck:	
Support Oppose			Do no	t wish to s	peak
(If you answered "no of who you represent	ou representing an orgar o, " <b>STOP;</b> you need not and go on to the next que elephone number of each	complete the rest of uestion.)	of this form. If you ans		No provide the name
, ,,	or your representation?  part of your other paid	duties for this perso	on or organization?	☐ Yes	No No
	," STOP; you need not			wered "yes," ş	go on to the next
Speaking Limits:	Public Hearing (Coming Information Hearing Other Items	3	minutes		

are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?				
(If you answered "yes" to the this form. If you answered "no	question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign o'' to the question, go on to the next question.)			
If you are being paid for you that:	r representation, or if your appearance is part of other paid duties, please be advised			
1. Before you en with the City (	gage in lobbying as a lobbyist, you or your principal must file an authorization Clerk.			
2. Your principa City Clerk.	is not permitted to authorize you to lobby unless you are registered with the			
period (half y	oal spends or will owe more than \$1,000 for lobbying services in any reporting ear), the principal must file expense statements with the City Clerk for the the calendar year?			
(Please go to the City Cler Room 103 of the City-County	k's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Building, Madison, for more information.)			
Date 3()4(1(	Signature Janua Kudhilia			
	Print Name Daniel Kunkler			





# DO NOT WISH TO SPEAK FORM

Registrat	ion Statement	COMMITTEE	ouncil		-
Please Print		PLEASE	PRINT NAME CLI	EARLY	
Agenda No. Amw	endwent II	Name	Ava Ting ZAA W. Pl. Madis	ha Lakelaun San, WL 5:	370
Please check o	ne:	AND	Please che	eck:	
Support			Do no	ot wish to speak	
Oppose	•				
Neither S	upport Nor Oppo	ose			
(If you answered "no, of who you represent	ou representing an organize of the control of the control of the next que the next	omplete the rest o	f this form. If you an	swered "yes," provide t	he name
Are you appearing as	r your representation?	ities for this nerso	n or organization?	☐ Yes ☐ No	
	" STOP; you need not co				the next
Speaking Limits:	Public Hearing (Commo Information Hearing Other Items	3	minutes		

Are you an elected other governmenta	I official or employee who is appearing solely on behalf of your office or for your municipality or labody?	
	'yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign is usered "no" to the question, go on to the next question.)	
If you are being p that:	aid for your representation, or if your appearance is part of other paid duties, please be advised	
	fore you engage in lobbying as a lobbyist, you or your principal must file an authorization the City Clerk.	
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.	
per	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?	
	City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at 'ity-County Building, Madison, for more information.)	
Date	Signature	
	Print Name	



Date:	3/28/11	
	4. 1	

Registrat		Common Committee	ouncil		
Please Print  Agenda No. Jem	2, Anewwert 1	PLEASE  Name  Address  -	PRINT NAME CLE Alex Bergda 244 W La		φ <sub>1</sub> 53763
Please check o	ne:	AND	Please che	ck:	
Support Oppose Neither S	Support Nor Oppo	ose	Do no	t wish to	speak
(If you answered "no of who you represent	ou representing an organiz," STOP; you need not co and go on to the next questlephone number of each page 1	omplete the rest on stion.)	of this form. If you ans	wered "yes,"	No provide the name
Are you being paid for	or your representation?			Yes	□No
	part of your other paid du," STOP; you need not co			☐ Yes wered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Commo Information Hearing Other Items	3	minutes		

		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?		
		ed "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)		
If you that:	are beir	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?		
(Please Room	e go to 103 of th	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 _	3/	Signature Way bry M.  Print Name New Derhald		

Date: 3/29/1



# DO NOT WISH TO SPEAK FORM

Registration Statement	Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. Item Z Ammandmeht	Name Beverly Lawis  Address 244 W. Lakelaum Pl.  Madison, WI 53703
Please check one:	AND Please check:
<b>Support</b>	<b>Do not wish to speak</b>
Oppose	
Neither Support Nor O	ppose
(If you answered "no," <b>STOP</b> ; you need no of who you represent and go on to the next	ganization or a person other than yourself: Yes No not complete the rest of this form. If you answered "yes," provide the name question.)  Such person or organization you are representing:
Are you being paid for your representation	? Yes No
Are you appearing as part of your other part (If you answered "no," <b>STOP</b> ; you need no question.)	id 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 Hearin	g3 minutes 3 minutes 3 minutes

•	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No		
	ered "yes" to the question, <b>STOP.</b> 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:	eing 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.	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?		
,	o 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		

Date: 3/99/901\



# DO NOT WISH TO SPEAK FORM

Registration S	Statement - Commo	n Council	
Please Print	· · · · · · · · · · · · · · · · · · ·	ASE PRINT NAME CLEARLY	
Agenda No. <u>A Mur</u>	Name		
Please check one:	AND	Please check:	
Support		Do not wish to speak	
Oppose			
Neither Suppo	ort Nor Oppose		
(If you answered "no," STO of who you represent and go	on to the next question.)	person other than yourself: Yes No rest of this form. If you answered "yes," provide the na	ıme 
Are you being paid for your	representation?	☐ Yes ☐ No	
	Your other paid duties for this <b>PP</b> ; you need not complete the	person or organization? Yes No rest of this form. If you answered "yes," go on to the n	ext
Infor	ic Hearing (Common Council) mation Hearingr	3 minutes	

	REGISTRATION STATEMENT - PAGE 2		
Are you an el other governn	lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
	red "yes" to the question, <b>STOP.</b> 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 beithat:	ing 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.	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?		
	o 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 3/3º	Signature Print Name		



nn	NOT	WISH	TO	SDE	ΔK	FOR	2 M
				OFE			

Date: \_\_\_\_\_

Registration Statemer	nt - Common Council
Please Print	PLEASE PRINT NAME CLEARLY
idem Z Agenda No. <u>Ammenment 11</u>	Name Grahm Peters  Address 244 W Lakelawn 191  Madison WI
Please check one:	AND Please check:
<b>Support</b>	<b>Do not wish to speak</b>
Oppose	
Neither Support Nor	Oppose
(If you answered "no," STOP; you need of who you represent and go on to the n	organization or a person other than yourself: Yes No ed not complete the rest of this form. If you answered "yes," provide the name next question.)  If each person or organization you are representing:
Are you being paid for your representa	tion? Yes V No
Are you appearing as part of your other (If you answered "no," STOP; you need question.)	paid duties for this person or organization?  Yes  No ed not complete the rest of this form. If you answered "yes," go on to the next
Information He	(Common Council)5 minutes aring3 minutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?					
(If you answered "yes" to the q this form. If you answered "no		need not complete the rest of this form, except that you must sign n to the next question.)			
If you are being paid for your that:	representation, or if y	your appearance is part of other paid duties, please be advised			
· · ·	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2. Your principal 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?					
(Please go to the City Clerk' Room 103 of the City-County B		fmadison.com/clerk/index.html or go to the Clerk's Office at more information.)			
Date <u>2001-03-29</u>	Date <u>2001-03-29</u> Signature <u>Mm Pae</u>				
	Print Name	Grahm Peters			



Date:	March	$2^{\hat{\mathcal{Y}}}$

Registration Statement	Common Co	ouncil
Agenda No. Them 2 America ent 11	PLEASE I Name Address	PRINT NAME CLEARLY Chrstopher Fench 244 voest Lake land Page 53703
Please check one:	AND	Please check:
<b>Support</b>		Do not wish to speak
Oppose		
☐ Neither Support Nor Opp	ose	
At this meeting are you representing an organic (If you answered "no," STOP; you need not confirm of who you represent and go on to the next que Name, address and telephone number of each part of the state of the	omplete the rest of	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 du (If you answered "no," STOP; you need not ou question.)		n or organization? Yes No f this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Communiformation Hearing Other Items	3 r	ninutes

	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?					
	red "yes" to the question ou answered "no" to the		eed not complete the rest of this form, except that you must sign to the next question.)			
If you are bei that:	ng paid for your repres	entation, or if y	our appearance is part of other paid duties, please be advised			
1.	Before you engage in with the City Clerk.	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 web the City-County Building		madison.com/clerk/index.html or go to the Clerk's Office at more information.)			
Date <u>Mar</u>	ren 24 2011	Signature				
		Print Name	Christophe Presen			



Date:	3/	2	9/	///	
			7		

Registration		ommon Cou	ıncil		
Please Print		PLEASE PF	RINT NAME CLEA	\RLY	,
Agenda No#	to 2 amendamed # 11	Name Address	Daniel Al 244 Lah Madigon, 1	. Show relawh	tum Pl. 53703
Please check or	ne:	AND	Please chec	k:	
Support	·		Do not	wish to s	peak
Oppose					
Neither S	upport Nor Oppose	,			
(If you answered "no, of who you represent of	ou representing an organization of the compand go on to the next question of each persuppose number of each persuppose.	olete the rest of t on.)	this form. If you answ		No provide the name
Are you being paid fo	r your representation?			Yes	□No
Are you appearing as (If you answered "no, question.)	part of your other paid duties "STOP; you need not comp	s for this person plete the rest of	or organization? this form. If you ansv	☐ Yes wered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Common of Information Hearing	3 m	ninutes		

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?				
	ered "yes" to the question, <b>STOP.</b> 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:	eing 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.	2. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	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?				
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	Signature				
	Print Name				



Date: 03/29/10

# DO NOT WISH TO SPEAK FORM

Registrat	ion Statement	Common Co	uncil	
Please Print				
Agenda No.	ammendment 1	PLEASE F  Name  Address	PRINT NAME CLEARLY  OSSE Moday fer  H W Layelawn Pl.  Madisan, W 537	<del>8</del>
Please check o	ne:	AND	Please check:	
Support	;		Do not wish to speak	
<b>Oppose</b>				
Neither S	Support Nor Opp	ose		
(If you answered "no of who you represent	and go on to the next qu	complete the rest of estion.)	other than yourself: Yes No f this form. If you answered "yes," provide th tion you are representing:	e name
Are you being paid for	or your representation?		∐ Yes ☐ No	
	part of your other paid d		n or organization?	he next
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3 r	minutes	

•	elected official or employee who is appearing solely on behalf of your office or for your municipality or nmental body?			
, , ,	wered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign fyou answered "no" to the question, go on to the next question.)			
If you are that:	being 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 of the City-County Building, Madison, for more information.)			
Date	Signature			
	Print Name			



Date: _	3/29/1	
· ·	1 7	

Registrati	on Statement -	Common C	ouncil			
Please Print			PRINT NAME CL	<b>EARLY</b>		
Agenda No	Amend. 1	Name _ Address _	244 W La Madison, L	akelawn t U S37.	Vale	
Please check or	ie:	AND	Please che	eck:		
Support Onnese			Do no	ot wish to s	peak	
<ul><li>□ Oppose</li><li>□ Neither Support Nor Oppose</li></ul>						
At this meeting are yo (If you answered "no, of who you represent of	" STOP; you need no	ot complete the rest o			☑ No provide the name	
Name, address and tele	ephone number of eac	ch person or organiz	ation you are represen	nting:		
Are you being paid for	your representation?	)		☐ Yes	⊠ No	
Are you appearing as partial (If you answered "no, question.)				Yes  swered "yes,"	$\square$ No go on to the next	
Speaking Limits:	Public Hearing (Cor Information Hearing Other Items	g3	minutes			

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?						
(If you an this form.	swere If you	d "yes" to the question, answered "no" to the q	<b>STOP.</b> You nee uestion, go on t	d not complete the to the next question	e rest of this form, except n.)	that you must sign
If you are that:	e being	g paid for your represen	atation, or if yo	ur appearance is p	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.	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?					
(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	3/;	29/4	Signature Print Name	Olint	Freund Freund	



Date: \_\_\_\_\_

### CITY OF MADISON

Registra	tion Statement - <u>Co</u>	ommon Co	ouncil		_
Please Print		PLEASE	PRINT NAME CLE	ARLY	
Agenda No	3, a mondarent # 1	NameAddress	Zach S 244 Lu Mad WI, S	starr keluun pl. 1770 7	
Please check	one:	AND	Please che	ck:	
Support	, processor		Do no	t wish to speak	
Oppose					
Neither !	Support Nor Oppose	e			
(If you answered "n of who you represen	you representing an organizati o," <b>STOP;</b> you need not comp t and go on to the next question elephone number of each pers	plete the rest o	f this form. If you ans	wered "yes," provide	the name
Are you being paid f	for your representation?		,	☐ Yes ☐ No	
	s part of your other paid dutie o," <b>STOP;</b> you need not comp			Yes No wered "yes," go on to	
Speaking Limits:	Public Hearing (Common Information Hearing Other Items	3	minutes		

(SEE BACK)

	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?					
	ered "yes" to the question, <b>STOP.</b> 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:	ing 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.	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?					
	o 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					

Date: 3/29/11



# DO NOT WISH TO SPEAK FORM

Registration Stateme	ent - Common Coun	<u>cil</u>
Please Print		NT NAME CLEARLY
Agenda No. Item Z Ammedment 11	Name B Address 2	arbara Vedder 314 E. Dayton Madison 53704
Please check one:	AND	Please check:
Support to-op	option	Do not wish to speak
Oppose		
Neither Support No	r Oppose	
At this meeting are you representing (If you answered "no," <b>STOP</b> ; you not who you represent and go on to the Name, address and telephone number	need not complete the rest of this e next question.)	is form. If you answered yes, provide the hame
Are you being paid for your represen	tation?	☐ Yes     Xoo
Are you appearing as part of your oth (If you answered "no," STOP; you requestion.)	ner paid duties for this person on the need not complete the rest of the	or organization?
Information I	ng (Common Council)5 min Hearing	nutes

•		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
		ed "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)
If you that:	are bein	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 a clerk clerk's Office at the Clerk's Office at the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name



DON	IOT '	WISH	TO	CDE	AL	DRA

## CITY OF MADISON

Registration Statement	Common C	ouncil
Please Print	PLEASE Name	PRINT NAME CLEARLY
Agenda No.	Address _	MAD ISON, WI 53703
Please check one:	AND	Please check:
Support Amendment	- Commence of the Commence of	Do not wish to speak
<ul><li>☐ Oppose</li><li>☐ Neither Support Nor Opp</li></ul>	oose	
At this meeting are you representing an organ (If you answered "no," <b>STOP</b> ; you need not of who you represent and go on to the next qu	complete the rest o	of this form. If you answered "yes," provide the name
Name, address and telephone number of each	person or organiza	ation you are representing:
Myles McDow	well	Kenneth Campbell
651208070	7	277 Langdons StAt
Are you being paid for your representation?	<del>.</del>	4142949 45 No
Are you appearing as part of your other paid of (If you answered "no," <b>STOP</b> ; you need not of question.)		on or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Comm Information Hearing Other Items	3	minutes

(SEE BACK)

		lected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
		red "yes" to the question, <b>STOP.</b> 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
	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?
		o 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