Date: 7/7/10

CITY OF MADISON

Registrat	tion Statement -	HOUSING COMMITTEE
		COMMITTEE
Please Print		PLEASE PRINT CLEARLY
		Name Mucy Susen
Agenda No. <u>5</u>		Address 702 W. Hogy boul Re
		Medison, WI
Please check the app	ropriate boxes:	
Support		and Wish to speak
Oppose		Do not wish to speak
Neither St	upport Nor Oppos	e Available to answer questions
of who you represent	t and go on to the next of	of complete the rest of this form. If you answered "yes," provide the name question.) The person or organization you are representing: South Cultul WI U
1/2/2	an Hychoner	7-6
/UEU 501,	WL	
Are you being paid for	or your representation?	☐ Yes No
		duties for this person or organization? Yes No No to the next No
Speaking Limits:	Information Hearing	nmon Council)5 minutes
,	Outer religerer	

REGISTRATION STATEMENT - PAGE 2

Are you an eleco	ted official or employee who is appearing solely on behalf of your office or for your municipality or ntal body?
	d "yes" to the question, STOP. 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 being that:	g paid for your representation, or if 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.
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
1	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 c City-County Building, Madison, for more information.)
Date <u>7/7</u>	Signature Mucy System Print Name Nancy System Print Name
	$m{t}$

Date: 7/7/10

CITY OF MADISON

Registrat	ion Statement -	HOUSING COMMITTEE
	<u> </u>	COMMITTEE
Please Print		
I lease I lim		PLEASE PRINT CLEARLY
	4	Name Sverdh Conl
Agenda No	+>	Address 30 W House
Please check the app	ropriate hoves:	
r lease check the app	topitate boxes.	
Support		and Wish to speak
Oppose		Do not wish to speak
Neither Su	ipport Nor Oppose	e Available to answer questions
(If you answered "no of who you represent	o," STOP; you need not and go on to the next q	anization or a person other than yourself: Yes No t complete the rest of this form. If you answered "yes," provide the name question.) the person or organization you are representing:
ivanie, address and te	repriorie number of each	in person or organization you are representing:
entrol 5-10.	The second secon	
Are you being paid for	or your representation?	☐ Yes ☐ No
		duties for this person or organization? Yes No to complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:	Information Hearing.	nmon Council)5 minutes 3 minutes 3 minutes

REGISTRATION STATEMENT - PAGE 2

Are you an elected other governmental	official or employee who is appearing solely on behalf of your office or for your municipality or body? Yes No	
	ves" to the question, STOP. You need not complete the rest of this form, except that you must sign swered "no" to the question, go on to the next question.)	
If you are being pathat:	aid for your representation, or if your appearance is part of other paid duties, please be advised	
	ore you engage in lobbying as a lobbyist, you or your principal must file an authorization the City Clerk.	
	r principal is not permitted to authorize you to lobby unless you are registered with the Clerk.	
peri	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 ty-County Building, Madison, for more information.)	
Date	Signature	
	Print Name	

Date: 7/7/10

CITY OF MADISON

Registration Statement -	HOUSING COMMITTEE
	COMMITTEE
Please Print	
<u> 10030 11111</u>	PLEASE PRINT CLEARLY
	Name Rachel Gwin
Agenda No	Address
Please check the appropriate boxes:	
Support	and Wish to speak
Oppose Oppose	Do not wish to speak
Neither Support Nor Oppose	Available to answer questions
At this meeting are you representing an organ	nization or a nerson other than yourself.
(If you answered "no," STOP; you need not of who you represent and go on to the next qu	complete the rest of this form. If you answered "yes," provide the name
Name, address and telephone number of each	n person or organization you are representing:
•	r organization for the topic senting.
·	
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.)	duties for this person or organization? Yes No complete the rest of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Communication Hearing	mon Council)5 minutes

REGISTRATION STATEMENT - PAGE 2

Are you an ele	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?		
(If you answer this form. If yo	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)		
If you are bei that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised		
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.		
2.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.		
3.	If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year?		
(Please go to Room 103 of t	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		