Date: 5/2/12/1/

CITY OF MADISON

Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

| | PLEASE PRINT CLEARLY) / / |
|---|---|
| 7 | Name (Mahalh Mull) |
| Agenda No | Address Ol Glate |
| | Maclim |
| Please check the appro | opriate boxes: |
| Support | and Wish to speak Do not wish to speak |
| Oppose Neither Su | pport Nor Oppose Available to answer questions |
| Speaking Limits: | Public Hearing5 minutes |
| | Information Hearing3 minutes Other Items |
| (If you answered "no, | ou representing an organization or a person other than yourself: Yes No "STOP; you need not complete the rest of this form. If you answered "yes," provide the name t below, and go on to the next question.) |
| COMMENTS RELA | TED TO THE ITEM ON THE AGENDA (optional): |
| su at | tacked recommendations |
| Ast (| aptal Bucket. |
| 6 | |
| | |
| Name, address and tel | ephone number of each person or organization you are representing: |
| | |
| | |
| Are you being paid for | r your representation? |
| Are you appearing as (If you answered "no, question.) | part of your other paid duties for this person or organization? Yes No "STOP; you need not complete the rest of this form. If you answered "yes," go on to the next |

| Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality other governmental body? | | | | |
|--|--|--|--|--|
| | red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.) | | | |
| If you are being that: | ng paid for your representation, or if your appearance is part of other paid duties, please be advised | | | |
| 1, | Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk. | | | |
| 2. | Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk. | | | |
| 3. | If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (half year), the principal must file expense statements with the City Clerk for the remainder of the calendar year? | | | |
| ` — | the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.) | | | |
| Date 5 | 24-2011 Signature Mande Mut | | | |

| D-4 | 5-24-11 | |
|-------|----------|--|
| Date: | J 6 (1/ | |

CITY OF MADISON

Registration Statement - Pedestrian/Bicycle/Motor Vehicle Commission

| | PLEASE PRINT CLEARLY |
|---------------------------------------|--|
| Agenda No | Name Mark Shahan Address 607 Piper Dr. |
| · · · · · · · · · · · · · · · · · · · | Madison 53711-1338 |
| Please check the appro | opriate boxes: |
| Support Oppose Neither Su | and Wish to speak Do not wish to speak Available to answer questions |
| Speaking Limits: | Public Hearing |
| (If you answered "no, | u representing an organization or a person other than yourself: Yes No "STOP; you need not complete the rest of this form. If you answered "yes," provide the name t below, and go on to the next question.) |
| COMMENTS RELA | TED TO THE ITEM ON THE AGENDA (optional): |
| | |
| | |
| | |
| | |
| | |
| Name, address and tele | ephone number of each person or organization you are representing: |
| | |
| Are you being paid for | your representation? |
| + 11 0 1 | part of your other paid duties for this person or organization? Yes No "STOP; you need not complete the rest of this form. If you answered "yes," go on to the next |

| • | elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body? Yes No | | |
|-----------------------|--|--|--|
| | vered "yes" to the question, STOP. 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: 5-24-2011

CITY OF MADISON

Registration Statement - Pedestrian/Bicycle/Motor Vehicle Commission

You must register before the Commission considers your item.

| Secretary of the secret | 44.50 | PLEASE | PRINT CLEARLY | | | |
|--|---|-----------------|-------------------------------|--|----------|--|
| Agenda NoE | - 1 | Name Address | RON SHU 925 LAI MADISON | CE COURT | | |
| Please check the appro | opriate boxes: | | | • | | |
| Support Oppose Neither Su | pport Nor Oppose | | | speak wish to speak le to answer questions | | |
| Speaking Limits: | Public Hearing Information Hearing Other Items | | 3 minutes | | | |
| (If you answered "no, of whom you represen | 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 whom you represent below, and go on to the next question.) | | | | | |
| COMMENTS RELA | TED TO THE ITEM ON T | THE AGEN | NDA (optional): | | | |
| | Approximate the second | | | | | |
| | | | | *************************************** | | |
| | | | | • | | |
| | | - | | | | |
| | | | | | | |
| Name, address and telephone number of each person or organization you are representing: | | | | | | |
| | | | | | | |
| Are you being paid for | your representation? | | | ☐ Yes ☐ No | | |
| | part of your other paid duties " STOP; you need not comp | ~ | _ | | the next | |

(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? | | | | |
|---|--|--|--|--|
| | 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 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. | 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: 5/24//

CITY OF MADISON

Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

| | PLE | ASE PRIN | CLEARLY A | <i>a</i> |
|---------------------------|--|--------------|----------------------|--|
| Agenda No. | Nar | ne Iress | Muhael | Kewey |
| | - Aug | | 77 - 7 | 53.700 |
| Please check the appro | opriate boxes: | | _ | 33,07 |
| Support Oppose Neither Su | pport Nor Oppose | and | Wish to spea | ak to speak answer questions |
| Speaking Limits: | Public Hearing Information Hearing Other Items | 3 mir | nutes | |
| (If you answered "no, | ou representing an organization or a "STOP; you need not complete that below, and go on to the next ques | e rest of th | | ☐ Yes ☐ No vered "yes," provide the nam |
| COMMENTS RELA | ATED TO THE ITEM ON THE A | AGENDA (| (optional): | |
| | | | | |
| | | | | - |
| | | | | • |
| | | | | |
| | 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4 | | | |
| Name, address and tel | ephone number of each person or c | organization | 1 you are representi | ing: |
| | • | | | |
| Are you appearing as | · - | io novom n | r organization? | ☐ Yes No |
| | part of your other paid duties for th " STOP; you need not complete th | | | Yes Wo No wered "yes," go on to the nex |

| • | 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, STOP. 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? | |
| | 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: 5 24 11

CITY OF MADISON

Registration Statement - Pedestrian/Bicycle/Motor Vehicle Commission

| | PLEASE PRINT CLEARLY | | | |
|--|---|--|--|--|
| Agenda No | Name Travis Journan Address 617 Clear Soring Ct Mogons, WI 53716 | | | |
| | 11/01012 WZ 3 8 7 10 | | | |
| Please check the approp | priate boxes: | | | |
| Support Oppose Neither Sup | and Wish to speak Do not wish to speak Available to answer questions | | | |
| | Public Hearing5 minutes | | | |
| | Information Hearing3 minutes Other Items | | | |
| At this meeting are you representing an organization or a person other than yourself: (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent below, and go on to the next question.) COMMENTS RELATED TO THE ITEM ON THE AGENDA (optional): (a + 1.9 | | | | |
| | | | | |
| Name, address and telephone number of each person or organization you are representing: Stray (at Bicycles 54 North Bry 54 Maddon WI 53714 | | | | |
| Are you being paid for | your representation? | | | |
| | art of your other paid duties for this person or organization? Yes No STOP; you need not complete the rest of this form. If you answered "yes," go on to the next | | | |

| 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, STOP. 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 Trank 9. Youngs | | | |

Date: $\frac{5/24/2011}{}$

CITY OF MADISON

Registration Statement - Pedestrian/Bicycle/Motor Vehicle Commission

| PLEASE PRINT CLEARLY | | | |
|---|---|--|---|
| | N | ame Jo SCH ddress 2633 EAR MUSISON | EDETZ |
| Agenda No | A | ddress 2633 EAG | T LAWN CT |
| | | Masison | 5370f. |
| Please check the appro | opriate boxes: | | |
| Support Oppose Neither Su | pport Nor Oppose | | peak ish to speak to answer questions |
| Speaking Limits: | Public Hearing Information Hearing Other Items | 3 minutes | |
| (If you answered "no, | ou representing an organization or "STOP; you need not complete at below, and go on to the next quant | the rest of this form. If you a | Yes No nswered "yes," provide the name |
| COMMENTS RELA | ATED TO THE ITEM ON THE | E AGENDA (optional): | |
| | | | |
| | | | |
| | | | • |
| | | | |
| | | | |
| Name, address and telephone number of each person or organization you are representing: | | | |
| · · · · · · · · · · · · · · · · · · · | | III MALIFE MATERIAL TO THE STATE OF THE STAT | |
| Are you being paid for | • - | | Yes No |
| | part of your other paid duties for "STOP; you need not complete | | Yes No nswered "yes," go on to the next |

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

Date: 5/24/11

CITY OF MADISON

Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

| | PLEASE PRINT CLEARLY |
|--|---|
| , | Name Sam Crossley |
| Agenda No. | Address 423 Washburn Pl |
| | Madison W1 53703 |
| Please check the appropriate boxes: | |
| ☐ Support☐ Oppose☑ Neither Support Nor Oppose | and Wish to speak Do not wish to speak Available to answer questions |
| Speaking Limits: Public Hearing | 3 minutes |
| At this meeting are you representing an organization (If you answered "no," STOP; you need not complete of whom you represent below, and go on to the next | lete the rest of this form. If you answered "yes," provide the name |
| COMMENTS RELATED TO THE ITEM ON T | |
| madison Bike Polo (| Mad Bike Polo) |
| | |
| | |
| | |
| | |
| Name, address and telephone number of each perso | n or organization you are representing: |
| Are you being paid for your representation? Are you appearing as part of your other paid duties (If you answered "no," STOP; you need not comple question.) | Yes No for this person or organization? Yes No lete the rest of this form. If you answered "yes," go on to the next |

| Are you an el other governr | 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, 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 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 |

CITY OF MADISON

Registration Statement - Pedestrian/Bicycle/Motor Vehicle Commission

| | | PLEASE | PRINT CLEARLY | |
|---|--|--|--|---|
| - | - 1 | Name | Nathan Otti | -ger In St. 53703 |
| Agenda No | | Address | 1233 E 144 | in St. |
| | | | Madison, WI | 53703 |
| Please check the appro | priate boxes: | | , / | |
| Support Oppose Neither Sup | pport Nor Oppose | | and Wish to spe | |
| Speaking Limits: | Public HearingInformation Hearing | ••••• | 3 minutes | |
| (If you answered "no, of whom you represent | u representing an organization " STOP; you need not compute to below, and go on to the nex | n or a pers lete the res t question. | son other than yourself: st of this form. If you ans) | ☐ Yes ☐ No wered "yes," provide the name |
| | TED TO THE ITEM ON T | THE AGE | NDA (optional): | |
| Bike Bo | wevard 5 | | | |
| | | | | |
| | | | | • |
| | | | | |
| | , | | | |
| <u> </u> | | | | |
| Name, address and tele | ephone number of each perso | n or organ | nization you are represent | ting: |
| citizen | | | | |
| , | | | | |
| | | | | |
| Are you being paid for | your representation? | | | ☐ Yes No |
| Are you appearing as a (If you answered "no, question.) | part of your other paid duties "STOP; you need not comp | for this pe lete the re | erson or organization? st of this form. If you ans | Yes No No wered "yes," go on to the next |

| | 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, STOP . 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 of the City-County Building, Madison, for more information.) | | | |
| Date | Signature | | | |
| | Print Name | | | |

CITY OF MADISON

Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

| | PLEASE PRINT CLEARLY |
|-----------------------|---|
| | Name Tim, Grilley |
| Agenda No | Address 1317 Spaight 54. |
| | Madison WI, 53703 |
| Please check the appr | opriate boxes: |
| Support | and Wish to speak |
| Oppose Neither Su | Do not wish to speak Available to answer questions |
| Speaking Limits: | Public Hearing |
| | Other Items3 minutes |
| (If you answered "no | ou representing an organization or a person other than yourself: Yes No," STOP; you need not complete the rest of this form. If you answered "yes," provide the name at below, and go on to the next question.) |
| COMMENTS RELA | ATED TO THE ITEM ON THE AGENDA (optional): |
| | |
| | |
| | |
| | |
| | |
| Name, address and tel | lephone number of each person or organization you are representing: |
| | |
| Are you being paid fo | or your representation? |
| | part of your other paid duties for this person or organization? Yes No ." STOP; you need not complete the rest of this form. If you answered "yes," go on to the next |

| Are you an el other governr | | e who is appeari | ng solely on behalf of your o | office or for you | ur municipality or |
|---|---|-------------------|---|-------------------|--------------------|
| | red "yes" to the question, ou answered "no" to the o | | d not complete the rest of thi. o the next question.) | s form, except i | that you must sign |
| If you are be that: | ing paid for your represer | ntation, or if yo | ur appearance is part of othe | r paid duties, | please be advised |
| 1. | Before you engage in lowith the City Clerk. | bbying as a lob | byist, you or your principal n | nust file an aut | horization |
| 2. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk. | | | | d with the | |
| 3. | | principal must | re than \$1,000 for lobbying file expense statements with | | |
| | o the City Clerk's websi the City-County Building, | | adison.com/clerk/index.html ore information.) | or go to the | Clerk's Office at |
| | | | | | |
| Date | | Signature | | | |
| | | Print Name | | | |

| Registration | on Statement – Pedes You must register before | | | | nission |
|--|--|---|---|-------------------------|-------------------------|
| | 10u musi regisier bejore | PLEASE PRIN | | , | |
| Agenda No | | Name Address /2 | NATALIA 142 Morri Ladison, | HACER ISON ST | COLA HAPTA 3703 |
| Please check the appr | opriate boxes: | | , | | |
| Support Oppose | | and | Wish to spe Do not wish Available to | | ions |
| 🔀 Neither Su | pport Nor Oppose | | | | |
| | pport Nor Oppose Public Hearing Information Hearing Other Items | 3 miı | nutes | | , |
| Speaking Limits: At this meeting are you can swered "no, of whom you represent | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the next | 3 min 3 min 3 min or a person of the the rest of the question.) | nutes nutes er than yourself: is form. If you ans | ☐ Yes wered "yes," p | (⊠No provide the nan |
| Speaking Limits: At this meeting are you can swered "no, of whom you represent | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not compl | 3 min 3 min 3 min or a person of the the rest of the question.) | nutes nutes er than yourself: is form. If you ans | | √No provide the nan |
| Speaking Limits: At this meeting are you can swered "no, of whom you represent | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the next | 3 min 3 min 3 min or a person of the the rest of the question.) | nutes nutes er than yourself: is form. If you ans | | (⊠No provide the nan |
| Speaking Limits: At this meeting are your formula of the second of the | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the next | 3 min 3 min 3 min or a person of the the rest of the question.) | nutes nutes er than yourself: is form. If you ans | | No Provide the nan |
| Speaking Limits: At this meeting are your of whom you represent | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the next | 3 min 3 min 3 min or a person of the the rest of the question.) | nutes nutes er than yourself: is form. If you ans | | (⊠No provide the nan |
| Speaking Limits: At this meeting are you can swered "no, of whom you represent | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the next | 3 min 3 min 3 min or a person of the the rest of the question.) | nutes nutes er than yourself: is form. If you ans | | No No provide the nan |
| Speaking Limits: At this meeting are your from the service of whom you represent the comments related to the service of the s | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the next | | nutes nutes er than yourself: is form. If you ans (optional): | wered "yes," p | No provide the name |
| Speaking Limits: At this meeting are your fyou answered "no, of whom you represent COMMENTS RELA | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the nex. TED TO THE ITEM ON T | | nutes nutes er than yourself: is form. If you ans (optional): | wered "yes," p | No provide the nam |
| Speaking Limits: At this meeting are you answered "no, of whom you represent COMMENTS RELA | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the nex. TED TO THE ITEM ON T | | nutes nutes er than yourself: is form. If you ans (optional): | wered "yes," p | No provide the name |
| Speaking Limits: At this meeting are you (If you answered "no, of whom you represent COMMENTS RELATION AND ADDRESS AND THE AD | Public Hearing Information Hearing Other Items u representing an organizatio "STOP; you need not complet below, and go on to the nex. TED TO THE ITEM ON T | | nutes nutes er than yourself: is form. If you ans (optional): | wered "yes," p | No No provide the name |

| | | ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body? |
|-----------------|---------|--|
| | | red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.) |
| If you that: | are bei | 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 Nama |

| Date: | 5/2 | 4/11 | |
|-------|-----|------|--|
| | | | |

CITY OF MADISON

Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

| | | | PRINT CLEARLY | | |
|--|---|-------------------------------|---|-----------------------------------|------------------------|
| Agenda No. | | Name Address | Isaac Haee 1442 Morrison Madison, WI | 58/a 18t. H2 58/03 | |
| Please check the appropr | riate boxes: | | | | |
| Support Oppose Neither Supp | port Nor Oppose | | and Wish to spea Do not wish Available to | | s |
| I (| Public HearingInformation Hearing Other Items | ••••• | 3 minutes 3 minutes | | |
| (If you answered "no," . | representing an organizatio STOP; you need not compl below, and go on to the next | lete the rest | of this form. If you answ | ☐ Yes ∑ ered "yes," pro | ¶No vide the name |
| COMMENTS RELAT | ED TO THE ITEM ON T | HE AGEN | NDA (optional): | | |
| | | | | | |
| | | | | | |
| | | | | • | |
| | | | | | |
| | | | | | |
| Name, address and telep | phone number of each perso | on or organi | zation you are representing | ng: | |
| | , | | | | |
| | | | | | |
| Are you being paid for y | our representation? | | | Yes |] No |
| Are you appearing as par (If you answered "no," a question.) | art of your other paid duties STOP; you need not complete. | for this per lete the rest | son or organization? t of this form. If you answ | |] No on to the next |

| | n elected official or employee who is appearing solely on behalf of your office or for your municipality or rnmental body? Yes No | | |
|---------------------|--|--|--|
| | wered "yes" to the question, STOP. 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: 5/24/11

CITY OF MADISON

Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

| | PLEASE PRINT CLEARLY | | | |
|--|---|--|--|--|
| Agenda No | Name Barbara Wilson. Address 623 E. Mifflin St. Madson | | | |
| Please check the appro | opriate boxes: | | | |
| Support Oppose Neither Su | and Wish to speak Do not wish to speak Available to answer questions | | | |
| Speaking Limits: | Public Hearing | | | |
| 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 whom you represent below, and go on to the next question.) | | | | |
| COMMENTS RELA | ATED TO THE ITEM ON THE AGENDA (optional): | | | |
| - More bike | boulevards | | | |
| - Widen bik | | | | |
| - reinforce | ble safety rules | | | |
| - stop sign (traffic light) difficult to comprehend | | | | |
| | · | | | |
| | · | | | |
| Name, address and tel | lephone number of each person or organization you are representing: | | | |
| | | | | |
| 20 14-11 | | | | |
| Are you being paid fo | | | | |
| Are you appearing as (If you answered "no, question.) | part of your other paid duties for this person or organization? Yes X No "STOP; you need not complete the rest of this form. If you answered "yes," go on to the next | | | |

| | | cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body? | | | | |
|---------------------|----------------------|--|--|--|--|--|
| (If you this for | answere m. If you | ed "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 that: | are bein | g 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 I | 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 the City-County Building, Madison, for more information.) | | | | |
| Date _ | 5/24 | Signature Barbara K. Wilson | | | | |