### **CITY OF MADISON**

# Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

You must register before the Commission considers your item.

	P	LEASE PRINT		٨
Agenda No. 2	2	Name M	115 he Rumme	<u> </u>
Please check the appr	opriate boxes:			
Support Oppose Neither Su	pport Nor Oppose	and	☐ Wish to speak ☐ Do not wish to ☐ Available to an	
Speaking Limits:	Public HearingInformation HearingOther Items	3 mir	nutes	
(If you answered "no,	ou representing an organization of ," STOP; you need not complete nt below, and go on to the next qu	e the rest of th	er than yourself: is form. If you answer	☐ Yes ☐ No red "yes," provide the nam
COMMENTS RELATED TO THE ITEM ON THE AGENDA (optional):				
				•
	, , , , , ,			
Name, address and tel	lephone number of each person o	or organization	n you are representing	5.
Are you being paid fo	or your representation?			☐ Yes ☐ No
	part of your other paid duties for ," STOP; you need not complete			☐ Yes ☐ No red "yes," go on to the nex

#### **REGISTRATION STATEMENT - PAGE 2**

-		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, <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	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:  $\left(\frac{28}{r}\right)$ 

### **CITY OF MADISON**

## Registration Statement – Pedestrian/Bicycle/Motor Vehicle Commission

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		PLEASE	PRINT CLE	ARLY	
Agenda No		Name Address	213 S	SCHPOESER BALDWIN ST	
Please check the appro	opriate boxes:			·	
<ul><li>Support</li><li>✓ Oppose</li><li>Neither Su</li></ul>	pport Nor Oppose		and 🗵	Wish to speak Do not wish to speak Available to answer questions	
Speaking Limits:	Public Hearing Information Hearing Other Items	*****	.3 minutes		
(If you answered "no,	ou representing an organizatio," STOP; you need not complete below, and go on to the next	lete the res	t of this for	an yourself:	
COMMENTS RELA	ATED TO THE ITEM ON T	THE AGE	NDA (optio	onal):	
					····
***************************************					
·				•	
Name, address and tel	lephone number of each perso	n or organ	ization you	are representing:	
Are you being paid for	r your representation?			Yes 1	No
	part of your other paid duties "STOP; you need not compl			anization? Yes 15 m. If you answered "yes," go or	No 1 to the next

#### **REGISTRATION STATEMENT - PAGE 2**

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Date		Signature
		Print Name