

Date:	2 7	2012

WISH TO SPEAK FORM

CITY OF MADISON

Registra	tion Statement -	COMMITTEE	ouncil		-
Please Print		PLEASE	PRINT NAME C		
Agenda No	9	Name _Address _	HEIDI OI 505 N. R. Madison		υς
Please check	one:	AND	Please cl	ieck:	
Support			Wi	sh to Speak	
Oppose					
Neither S	Support Nor Op	pose			
(If you answered "no of who you represen	you representing an orga o," STOP; you need no t and go on to the next of elephone number of eac	t complete the rest question.)	of this form. If you d	answered "yes," p	No provide the name
Are you being paid f	or your representation?		·	Yes	⊠ No
Are you appearing as (If you answered "no question.)	s part of your other paid o," STOP; you need no	duties for this pers	on or organization? of this form. If you o	☐ Yes answered "yes," {	No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	3	minutes		

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2

Are you an el other governr	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
	red "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign ou answered "no" to the question, go on to the next question.)
If you are 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 he City-County Building, Madison, for more information.)
Date	Signature
	Print Name



WISH TO SPEAK FORM

CITY OF MADISON

Registra	ation Statement -	Common Co	ouncil	
Please Print Agenda No.) osa Rd Project		PRINT NAME CLEARLY BETTY A. KINS 14 So. Rosa Rp MADISON, WI 53703	
Please check	one:	AND	Please check:	
Suppor	t ·		Wish to Speak	
Oppose				
Neither	Support Nor Op	pose		
(If you answered "i of who you represen	nt and go on to the next qu	complete the rest of uestion.)	a other than yourself: Yes No of this form. If you answered "yes," provide the ation you are representing:	name
Are you being paid	for your representation?		☐ Yes ☑ No	
	as part of your other paid to, "STOP; you need not	_	on or organization? Yes No of this form. If you answered "yes," go on to the	? next
Speaking Limits:	Public Hearing (Communication Hearing	3 m	minutes	

REGISTRATION STATEMENT - PAGE 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?			
	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?		
	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: 3-7-13-

WISH TO SPEAK FORM

CITY OF MADISON

Registra	tion Statement -	Common Co	ouncil		
Please Print Agenda No. 2	1943	PLEASE Name Address	PRINT NAME CL DEBBIE 5529 MAD	EARLY ZANIL PARK NX	5374
Please check	one:	AND	Please cho	eck:	
Support			Wis	h to Speak	
Oppose					
Neither	Support Nor Op	pose			
(If you answered "n of who you represen	you representing an organo, "STOP; you need not and go on to the next of the n	t complete the rest o question.)	f this form. If you an	swered "yes," pro	No wide the name
Are you appearing a	for your representation? s part of your other paid o, "STOP; you need no	I duties for this perso	on or organization?	Yes Yes Yes xswered "ves" go	No No on to the next
question.)	o, 5101 , you need no	i compiete the rest of	g inis joini. 19 you un	streten yes, go	C. I VO VIIC IVON
Speaking Limits:	Public Hearing (Con Information Hearing Other Items		minutes		

REGISTRATION STATEMENT - PAGE 2

Are you an el other governm	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, 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?		
	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		