

25319 Date: 4/10/2012 AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registra	tion Statement -	Common Co	PRINT CLEARLY		
Agenda No. 🔏	5319	Name		ANS duale Blu UT 53705	/() -
Please check	one:	AND	Please che	ck:	
Support	, ;		Availal questic	ble to answer	
/ Oppose	Support Nor Op		questi	7113	
(If you answered "n of who you represen	you representing an organo," STOP; you need not and go on to the next question telephone number of each	t complete the rest o uestion.)	this form. If you ans		o e the name
				`	
Are you being paid	for your representation?			☐ Yes N	o
Are you appearing a (If you answered "n question.)	as part of your other paid to," STOP ; you need not	duties for this perso t complete the rest of	n or organization? fthis form. If you ans	Yes Nowered "yes," go on t	o to the next
Speaking Limits:	Public Hearing (Com Information Hearing.	3 1	ninutes		

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?			
	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			



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registrati	on Statement	Common C	ouncil		
		PLEASE	PRINT CLEARLY		
4		Name	Brende K	onkel	
Agenda No	+ (Address	SON TO	encode of	
			Wallson	$\frac{1}{1}$	702
Please check or	ne:	AND	Please che	eck:	
Support			Availa	ble to answer	
Oppose			questi	ons	
Neither S	upport Nor Opp	ose			
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 tel	ephone number of each	person or organiz	ation you are represen	iting:	
Tenant Re	Tenant Resource Center 257-0143				
1202 W	Mausen S	+ ++102			
Madysur	wis:	3703			
Are you being paid for	r your representation?			Yes N	o
	part of your other paid on "STOP; you need not			Yes No swered "yes," go on t	
Speaking Limits:	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 municipality of 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			
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	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 4	1012 Signature Provede / Vond			



Date: _____

CITY OF MADISON

Registra	tion Statement -	Common Co	ouncil
		PLEASE F	PRINT CLEARLY
		Name	Charallika 1
Agenda No.		Address	Mod Williams his Ho
ţ			1000 000 00 1 1 2 7 14 C
Please check	one:	AND	Please check:
☐ Support			Available to answer
Oppose	questions		
Neither	Support Nor Op	pose	
(If you answered "n of who you represen	t and go on to the next q	t complete the rest of question.)	other than yourself: Yes No f this form. If you answered "yes," provide the name tion you are representing:
Ano you hair a raid (Company and a sound of the soun		
Are you being paid i	for your representation?		∐ Yes ☐ No
	s part of your other paid o, "STOP; you need not		n or organization? Yes No f this form. If you answered "yes," go on to the nex
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	3 n	minutes

(SEE BACK)

	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			
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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			



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registration Statement	
	COMMITTEE
	PLEASE PRINT CLEARLY
	Name Crarg Enzerroth
Agenda No. 46	Address 101 E. Man St
	Mt- Horeb WI 53572
Please check one:	AND Please check:
Support	Available to answer
☐ Oppose	questions
Neither Support Nor Opp	ose
At this meeting are you representing an organ (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	person or organization you are representing:
Moment Pont Holdings	ILLC
101 E. Man St Mt.	
<u> </u>	
Are you being paid for your representation?	Yes No
Are you appearing as part of your other paid of (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
Information Hearing	mon Council)5 minutes3 minutes3 minutes

•	n elected official rnmental body?	or employee who is appear	ing solely on behalf of	your office or for yo	ur municipality or No
() /	•	he question, STOP. You nee 'no" to the question, go on t	•	of this form, except	that you must sign
If you are that:	being paid for y	our representation, or if yo	ur appearance is part c	of other paid duties,	please be advised
1.	Before you with the Cit	engage in lobbying as a lob y Clerk.	byist, you or your princ	cipal must file an aut	horization
2.	Your principolity City Clerk.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
3.	period (half	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?			
,	•	erk's website <u>www.cityofm</u> y Building, Madison, for mo		. <u>html</u> or go to the	Clerk's Office at
Date	1/10/12	Signature	MA.		
	-	Print Name	Course En	zeroth	