| Date: | 5 | 1le- | 1- |  |
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|       |   |      |    |  |

You must register before the ALRC considers your item.

|   |  | Name  | Tomos 9  | ontry            |                          |
|---|--|---|--|------------------|--------------------------|
| Agenda No   | 8  | Address                                       | JAME XIN                                       | Town City        |                          |
| Required – Can be of on registration table.           | btained from agenda  | 1 Iddi oso                                    | Modison  | (0)              | 3702                     |
| On registration table.                                |  |   | . 34/30//                                      |                  |                          |
| Please check the appr                                 | opriate boxes:   |   |  |                  |                          |
|   | peak<br>ish to speak<br>to answer questions  |   | Oppose Wish to specific Do not wis Available t |                  | tions                    |
| (If you answered "no question.)                       | ou representing an organic." STOP; you need not only because the state of each of each | complete the rest o                           | f this form. If you an                         |                  | UNo<br>go on to the next |
|   | ,  |   |  |                  |                          |
| •   |  | ·.  |  |                  |                          |
|   |  |   |  |                  |                          |
| Are you being paid fo                                 | r your representation?   |   |  | Yes              | ☑No                      |
| Are you appearing as (If you answered "no, question.) | part of your other paid d' "STOP; you need not c                                       | uties for this person<br>complete the rest of | n or organization?<br>fthis form. If you ans   | Yes wered "yes," | UNo<br>go on to the next |
| Speaking Limits:                                      | Public HearingInformation Hearing  |   |  |                  | •                        |

| Are you an governmenta | elected official who is appearing solely on behalf of your office or for your municipality or other lbody?   |
|------------------------|--|
|                        | ered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign<br>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, do you understand   |
| - 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 the principal is registered with the City Clerk?  |
| 3.                     | If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year? |
| , ,                    | red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)  |
| Date 5                 | Signature Jomes Jenty  Print Name Jomes Gentry   |

| Date: | 5 | 16 | <br>12 |  |
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You must register before the ALRC considers your item.

| Agenda No. 28 Required – Can be on registration tabl | obtained from agenda   |                         | Name<br>Address            | _71               | en Henni<br>7 Orton Co<br>Ideson WI             | -                     |                         |
|--|--|-------------------------|----------------------------|-------------------|---|-----------------------|-------------------------|
| Please check the ap                                  | propriate boxes:   |                         |                            |                   |   |                       |                         |
|  | speak<br>wish to speak<br>le to answer questions                         |                         |                            |                   | Oppose  Wish to spea  Do not wish  Available to | to speak              | stions                  |
| (If you answered "i<br>question.)                    | you representing an organo, "STOP; you need not telephone number of each | ot comple               | te the resi                | t of thi          | s form. If you ansv                             |                       | No go on to the next    |
| ,  | •  |                         |                            |                   |   |                       |                         |
|  |  |                         | ·.                         |                   |   |                       | -                       |
|  |  |                         |                            |                   |   |                       |                         |
| Are you being paid                                   | for your representation?   |                         |                            |                   |   | Yes                   | ☑No                     |
| Are you appearing a (If you answered "n question.)   | as part of your other paid<br>to," <b>STOP;</b> you need no              | duties for the complete | or this per<br>te the rest | son or<br>of this | organization?<br>s form. If you answ            | ☐ Yes<br>vered "yes," | No<br>go on to the next |
| Speaking Limits:                                     | Public HearingInformation Hearing Other Items                            |                         |                            | 5 minu            | ites  | <b>.</b>              |                         |

| Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? |                      |  |                |               |                 |    |
|---|----------------------|--|----------------|---------------|-----------------|----|
| (If you answered "yes" to the questhis form. If you answered "no" to  |                      |  |                | rm, except t  | hat you must si | gn |
| If you are being paid for your repthat:   | resentation, or if y | our appearance is pa                                 | rt of other pa | id duties, d  | o you understa  | nd |
| 1. Before you engage with the City Clerk  |                      | obbyist, you or your p                               | orincipal must | file an auth  | orization  No   |    |
| 2. Your principal is r with the City Clerk  | •                    | thorize you to lobby                                 | unless the p   | rincipal is r | egistered<br>No |    |
|   | arter), the principa | more than \$500 for lal must file expense s<br>year? |                |               | -               |    |
| (If you answered "no" to any of th<br>Office at Room 103 of the City-Cou  |                      |  |                | 56-4601 or s  | go to the Clerk | 'S |
| Date <u>5-/6-/2</u>   | Signature            | Eller Hen  | e snings       | i i           |                 |    |
|   | Print Name           | Ellen Hen  | ningser        |               |                 |    |

| Date: 5/16/12 | Date: | 5 | 16 | 1/2 | , | • |  |
|---------------|-------|---|----|-----|---|---|--|
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You must register before the ALRC considers your item.

|  |   |                                  |   | · · · · ·                       | •                           |
|--|---|----------------------------------|---|---------------------------------|-----------------------------|
| , (1   |   | Name                             | toto del                                  | - Tatte                         | nson                        |
| Agenda No. A618                                      | 21  | Address                          | 2009                                      | Atuoo                           | 1 Ave                       |
| <u>Required</u> – Can be o                           | btained from agenda   |                                  | 11 10                                     |                                 |                             |
| on registration table                                |   |                                  | Madis                                     | in, in                          |                             |
| Please check the app                                 | ropriate boxes:   |                                  | •   |                                 | •                           |
| <b>Support</b>                                       | •   |                                  | Oppos                                     | se                              |                             |
| ☐ Wish to s  | speak   |                                  |   | h to speak                      |                             |
|  | ish to speak  | ÷                                |   | not wish to speak               | . •                         |
| Available  | e to answer questions   |                                  | ∐ Ava                                     | ilable to answer qu             | estions                     |
| (If you answered "no question.)                      | ou representing an organizate, "STOP; you need not complete blephone number of each personners. | plete the res                    | t of this form. If                        | you answered "yes               | ∐ No<br>" go on to the next |
|  |   |                                  |   |                                 |                             |
|  |   | •                                |   |                                 | •                           |
|  |   |                                  |   |                                 |                             |
| Are you being paid for                               | or your representation?   | 織                                |   | Yes                             | <b>□</b> No                 |
| Are you appearing as (If you answered "no question.) | part of your other paid dutie," STOP; you need not com  | s for this per<br>plete the resi | son or organizati<br>t of this form. If y | ion? Yes Yes you answered "yes, | ☐ No<br>" go on to the next |
|  | w 111 TT 1  |                                  | F   | ۵                               |                             |
| Speaking Limits:                                     | Public Hearing  |                                  |   |                                 |                             |
| •  | Information Hearing   |                                  | 2 mmang                                   |                                 |                             |

| Are you an elected official who is a governmental body?                       | appearing solely on behalf of your office or  | for your municipality or other Yes No |
|---|---|---------------------------------------|
| (If you answered "yes" to the question this form. If you answered "no" to the | n, <b>STOP.</b> You need not complete the rest of this question, go on to the next question.)                       | s form, except that you must sign     |
| If you are being paid for your representat:                                   | entation, or if your appearance is part of other  | paid duties, do you understand        |
| 1. Before you engage in l with the City Clerk?                                | lobbying as a lobbyist, you or your principal m   | nust file an authorization  Yes No    |
| 2. Your principal is not p with the City Clerk?                               | permitted to authorize you to lobby unless th   | e principal is registered Yes No      |
| * * * *   | ds or will owe more than \$500 for lobbying seer), the principal must file expense statements of the calendar year? |                                       |
|   | est three questions, please call the City Clerk a<br>Building, Madison, for more information.)                      | t 266-4601 or go to the Clerk's       |
| Date  | Signature   | ,                                     |
|   | Print Name Jotan Tot  | ters                                  |

| Date: | 5/16/12 | • |
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You must register before the ALRC considers your item.

| 11gonda 110  | G181 (28) obtained from agenda  | Name<br>Address                    | Peth Gen<br>2001 Atwood<br>Madison, W           |                               | 04                   |
|--|---|------------------------------------|---|-------------------------------|----------------------|
| Please check the app                                 | propriate boxes:  |                                    | •   |                               |                      |
| Availab  | vish to speak<br>e to answer questions  |                                    | Available                                       | sh to speak<br>to answer ques |                      |
| (If you answered "n question.)                       | you representing an organize, "STOP; you need not contain the second point of each part of each | omplete the resi                   | t of this form. If you an                       |                               | No no to the next    |
|  |   |                                    |   |                               |                      |
|  |   |                                    |   |                               |                      |
| Are you being paid f                                 | or your representation?   |                                    |   | Yes                           | <b>☑</b> No          |
| Are you appearing as (If you answered "no question.) | part of your other paid du paid of your other paid du part of you need not co   | ties for this personplete the rest | son or organization?<br>of this form. If you an | Yes<br>swered "yes,"          | No go on to the next |
| Speaking Limits:                                     | Public HearingInformation Hearing   |                                    |   | <b>.</b>                      |                      |

|    | are you an    | elected official who is appearing solely on behalf of your office or for your municipality or otheral body?  |
|----|---------------|--|
|    |               | vered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign<br>you answered "no" to the question, go on to the next question.)  |
|    | you are b     | eing paid for your representation, or if your appearance is part of other paid duties, do you understand   |
|    | · 1.          | Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?  Ves No   |
| •  | 2.            | Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  |
|    | 3.            | If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year? |
|    | -             | ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's<br>om 103 of the City-County Building, Madison, for more information.)   |
| Da | te <u>5//</u> | Signature Print Name Pere Sento  |
|    |               |  |