

Date: 5-15-12

WISH TO SPEAK FORM

CITY OF MADISON

Registratio	n Statement	Common Co	uncil		
Please Print Agenda No.	7	PLEASE I Name	PRINT NAME Richera Sod	CLEARLY Fritz Owen	Rel
Please check on	2:	AND	Please	check:	
Support				Vish to Speak	
Oppose					
Neither Su	pport Nor Opp	ose			
At this meeting are you (If you answered "no," of who you represent an Name, address and telep	STOP; you need not nd go on to the next qu	complete the rest o uestion.)	f this form. If yo	ou answered "yes," [∏ No provide the name
Are you being paid for	your representation?			Yes	No
Are you appearing as pa (If you answered "no," question.)	art of your other paid of STOP; you need not	duties for this perso complete the rest o	n or organization of this form. If yo	on?	No go on to the next
· · · · · · · · · · · · · · · · · · ·	Public Hearing (Comr Information Hearing Other Items	3	minutes		

(SEE BACK)

REGISTRATION STATEMENT - PAGE 2

		cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?		
(If you o	answere m. If you	ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)		
If you a 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?		
		the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at a clerk's City-County Building, Madison, for more information.)		
Date	5/15	Signature Alukace Tul		



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registra	ation Statement -	Common Co	uncil	
		PLEASE F	PRINT CLEARLY	
Agenda No)	Name Address	JAMES S. DID ROGEN	
Please check	one:	AND	Please check	
Support	 t		Availab	le to answer
Oppose			question	
Neither	Support Nor Op	pose		
(If you answered "n of who you represen	you representing an organo," STOP; you need no at and go on to the next question telephone number of each	t complete the rest of question.)	this form. If you answe	ered "yes," provide the name
Are you being paid	for your representation?			☐ Yes ☐ No
	ns part of your other paid to," STOP; you need no			Yes No No ered "yes," go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	3 r	ninutes	

REGISTRATION STATEMENT - PAGE 2

Are you an eleother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
100	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.)
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Date	Signature
	Print Name

Date: 5/15/12



AVAILABLE TO ANSWER QUESTIONS FORM

CITY OF MADISON

Registratio	n Statement	COMMITTEE	uncil	
Agenda No.		PLEASE P Name Address	RINT CLEARLY BILL W 2708 La Madisa	ute Le land Ave
Please check on	e :	AND	Please chec	k:
Support			X Availab	ole to answer
Oppose			questio	ns
Neither Su	pport 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 telephone number of each person or organization you are representing:				
-	<u> </u>	- Stopp	719	
	WALLEY CO.			
Are you being paid for y	your representation?			Yes No
Are you appearing as pa (If you answered "no," question.)				Yes No No vered "yes," go on to the next
-	Public Hearing (Comminformation Hearing			

REGISTRATION STATEMENT - PAGE 2

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality of ther 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.)		
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Date 5	Signature Signature		
	Print Name Wm White		