Date: 5 22 17

CITY OF MADISON

Registra	tion Statement -	Water COMMITTEE		oard		
Please Print		PLE	ASE PRIN	T CLEARLY		
Agenda No	3	Nan Add	ress	aria fowell 311 Lake Machisco		
Please check the app	propriate boxes:					·
Support Oppose Neither S	upport Nor Oppo	se	and	Wish to specific Do not wish Available to		tions
(If you answered "n	you representing an orgo, "STOP; you need not and go on to the next	ot complete th	person other rest of the	ner than yourself: is form. If you ans	Yes wered "yes,"	No provide the name
Name, address and t	elephone number of ea	ch person or o	rganizatio	n you are represen	ting:	
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					8	
Are you being paid for your representation?					Yes	☐ No
Are you appearing a (If you answered "n question.)	s part of your other pai o, " STOP; you need no	d duties for the	s person o	r organization? is form. If you ans	☐ Yes swered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Con Information Hearing Other Items	3	3 min	utes		