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Date:	19	VI/	17	

You must register before the ALRC considers your item.

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Agenda No	and the second s	Address	00 Wi	scousin	Aug
<u>Required</u> – Can be ol on registration table.	otained from agenda		Hadis	on W	
Please check the appr Support Wish to s Do not wi			Oppose Wish to specific Do not wis Available t		S3719
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Are you being paid fo Are you appearing as (If you answered "no, question.)	r your representation? part of your other paid duties "STOP; you need not comp	for this person or lete the rest of this	organization? S form. If you and	Yes Yes Yes wered "yes," go	No No on to the next
Speaking Limits:	Public HearingInformation Hearing				

Are you an governmenta	elected official who is appearing l body?	solely on behalf of yo	our office or for your m	
	ered "yes" to the question, STOP. wou answered "no" to the question,			of that you must sign
If you are be that:	ing paid for your representation, o	r if your appearance is	part of other paid duties	, do you understand
1.	Before you engage in lobbying a with the City Clerk?	as a lobbyist, you or you	ar principal must file an a	
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	red "no" to any of the last three q m 103 of the City-County Building,			or go to the Clerk's
Date(Signatu Print No	h 0 "	ail Hert	
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Date:	6-11-17	

You must register before the ALRC considers your item.

Agenda No	obtained from agenda	Name OSEV Address (U LU) 537	nothing Let	
At this meeting are y (If you answered "n question.)	speak wish to speak le to answer questions you representing an organizati	Do Avaion or a person other than you plete the rest of this form. If	sh to speak not wish to speak ailable to answer questions urself: Yes You answered "yes," go on to the r	ıexi
Are you being paid	for your representation?	-	☐ Yes ☐ No	
	s part of your other paid dutie o," STOP; you need not com		tion?	ıext
Speaking Limits:	Public HearingInformation Hearing	5 minutes		

Are you governn		lected official who is appearing solely on behalf of your office or for your municipality or other body?
		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:	re bein	ng 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? Yes No
2	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
3	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?
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's a 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

Date:	6-11	112	

You must register before the ALRC considers your item.

Agenda No	S btained from agenda	Name SEMBH Address W W WIS	et on
At this meeting are y (If you answered "no question.)	speak vish to speak to answer questions ou representing an organiz o, "STOP; you need not co	☐ ②pose ☐ Wish to spe☐ Do not wish	to speak o answer questions Yes No wered "yes," go on to the next
	or your representation?	ties for this person or organization?	
		implete the rest of this form. If you ans	learned terrorial
Speaking Limits:	•	5 minutes5 minutes 3 minutes	

•	ou an el imental	lected official who is appearing solely on behalf of your office or for your municipality or other 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 that:	are beir	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
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		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

Date:		

You must register before the ALRC considers your item.

Agenda No. Required – Can be on registration table	obtained from agenda	Name 203 Address 703	Maurer University Outon W	ly Ave	2
Please check the ap	propriate boxes:				
	speak wish to speak le to answer questions		Oppose Wish to spea Do not wish Available to	k to speak answer ques	tions
	you representing an organiza no," STOP; you need not con			☐ Yes vered "yes,"	☐ No go on to the next
Name, address and	telephone number of each pe	rson or organization yo	u are representi	ng:	
Are you being paid	for your representation?			Yes	☐ No
	s part of your other paid dut to," STOP; you need not con			☐ Yes vered "yes,"	□ No go on to the next
Speaking Limits:	Public Hearing Information Hearing Other Items	5 minutes	S		

Are yo governi		elected official who is appearing solely on behalf of your office or for your municipality or other 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 a that:	are beir	ng 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?
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		red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name

Date: 6/11/12

City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

		Name _	Hichael Herl
Agenda No		Address	100 Wiscons in Aug
<u>Required</u> – Can be o on registration table.	btained from agenda		Madison Wi
	speak rish to speak	×	Oppose Wish to speak Do not wish to speak
	e to answer questions		Available to answer questions
(If you answered "no question.)	ou representing an organization, "STOP; you need not complete with the state of each personal property of each personal pr	plete the rest of	of this form. If you answered "yes," go on to the next
,			UNIN
Are you being paid for	or your representation?	J	Yes No
	part of your other paid dutie," STOP; you need not com	s for this perso	
Speaking Limits:	Public HearingInformation Hearing	5	

Are yo		lected official who is appearing solely on behalf of your office or for your municipality or other body?
		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	are bein	ng 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? Yes No
	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?
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's a 103 of the City-County Building, Madison, for more information.)
Date _		Signature Print Name William Hills

Date: 6/11/12

City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

Agenda No		Name JOH CANADAR Address 1402 Ello	Konek Mdo ct egsedo)
Support Wish to Do not v		Oppose Wish to spea Do not wish	k
(If you answered "na question.)	o," STOP; you need not	nization or a person other than yourself: t complete the rest of this form. If you answ n person or organization you are representing	
Are you being paid f	or your representation?		☐ Yes ☐ No
Are you appearing as	s part of your other paid	duties for this person or organization? complete the rest of this form. If you answ	☐ Yes ☐ No
Speaking Limits:	_	5 minutes	

	ou an el imental l	lected official who is appearing solely on behalf of your office or for your municipality or other 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 that:	are bein	ng paid for your representation, or if your appearance is part of other paid duties, do you understand	
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(If you answered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.) Date Oli Signature			
Date _	<u> </u>	Signature TON DKONEK	

Date:

City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

Agenda No. Required – Can be of on registration table.	A	Name Address	2010 MI	br 13t	S37L
Please check the appr	opriate boxes:				
At this meeting are you (If you answered "no question.)	peak ish to speak to answer questions ou representing an organization of a complete lephone number of each person of	the rest of thi.	s form. If you answ	to speak answer ques Yes vered "yes,"	□No
- Ugra	30 604 Chi	1295175			
Are you being paid fo	or your representation?			Yes	☐ No
	part of your other paid duties for "STOP; you need not complete			☐ Yes vered "yes,"	No go on to the next
Speaking Limits:	Public Hearing Information Hearing		ites		

Are you as governmen	elected official who is appearing solely on behalf of your office or for your municipality or other tal body?
, , ,	wered "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 I that:	being paid for your representation, or if your appearance is part of other paid duties, do you understand
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, ,	wered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's soom 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

Date:	G/	R	

You must register before the ALRC considers your item.

	2	Name	Stown Mille		
Agenda No		Address	33 Doto	St !	53710
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Please check the app	ropriate boxes:		159	DI. 1 Oc	Justin
	speak vish to speak e to answer questions		Oppose Wish to spe Do not wish Available to		stions
	ou representing an organizato, "STOP; you need not com			☐ Yes wered "yes,	☐ No " go on to the next
Name, address and to	elephone number of each per	rson or organization	on you are represent	ing:	
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Speaking Limits:	Public Hearing Information Hearing Other Items	5 mi	nutes		

	are you an elected official who is appearing solely on behalf of your office or for your municipality or other overnmental body?				
		ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign answered "no" to the question, go on to the next question.)			
If you ar that:	re bein	ng 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?			
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Date		Signature			
		Print Name			