



Date: 626

## CITY OF MADISON

Registration Statement - Water Utility Board
COMMITTEE

Please Print						
		PLEASE PRIN	IT CLEARLY			
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Agenda No.		Address	1818	Nine	hest	ez
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Please check the appr	ropriate boxes:					
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	ou representing an organizatio				No No	•
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of who you represent	and go on to the next question	1.)				
Name, address and te	lephone number of each perso	on or organizatio	n you are repres	enting:	•	
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Are you being paid fo	or your representation?			Yes	No	
	part of your other paid duties," STOP; you need not compl					ie next
Speaking Limits:	Public Hearing (Common Control Information Hearing					