

Date: 7-/8-/2

WISH TO SPEAK FORM

Registra	ition Statement -	Common Co	ouncil		
Please Print Agenda No.	\$	PLEASE Name Address	PRINT NAME CLEA JUNAN 210 Ma	camely renetly	<u></u>
Please check	one:	AND	Please checl	K.	
Support			Wish t	o Speak ."	
Oppose Oppose		•	No.		
Neither	Support Nor Opp	ose			
(If you answered "n of who you represen	you representing an organ or," STOP; you need not and go on to the next quelephone number of each	complete the rest of testion.)	f this form. If you answe	Yes No ered "yes," provide the nat g:	me
		` . · · ·			
Are you being paid f	or your representation?		/	Yes No	
	part of your other paid of "STOP; you need not o			Yes No red "yes," go on to the ne	xt
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3 m	ninutes		

•	ACCIONATION OF THE PROPERTY OF	•
Are you an elected official or employed other governmental body?	ee who is appearing solely on behalf of your office or for you Yes	municipality or
(If you answered "yes" to the questior this form. If you answered "no" to the	n, STOP. You need not complete the rest of this form, except to question, go on to the next question.)	hat you must sign
If you are being paid for your representhat:	entation, or if your appearance is part of other paid duties, p	lease be advised
1. Before you engage in l with the City Clerk.	lobbying as a lobbyist, you or your principal must file an auth	orization
 Your principal is not p City Clerk. 	permitted to authorize you to lobby unless you are registered	with the
3. If your principal spend period (half year), the remainder of the calend	is or will owe more than \$1,000 for lobbying services in any principal must file expense statements with the City Cleridar year?	reporting k for the
(Please go to the City Clerk's webs Room 103 of the City-County Building,	site <u>www.citvofmadison.com/clerk/index.html</u> or go to the (, Madison, for more information.)	Elerk's Office at
Date 9-18-12	Signature Luban Hehmily	·
/	Print Name	



CITY OF MADISON

Registra	ation Statement -	Common	Council			
Please Print		PLEAS	E PRINT NA	ME CLEARL	Υ.	
Agenda No	8		•	J.Sc Porth Br		x .
Please check	one:	AND	Plea	ise check:	*	
Support				Wish to S	Speak	, te
Oppose						
Neither Neither	Support Nor Op	pose				
(If you answered "n of who you represen	you representing an orga o, "STOP; you need not t and go on to the next q elephone number of eacl	complete the rest uestion.)	of this form. L	f you answered	}Yes □1 "'yes," provid	
lo	chliget, 1	nci				
. B	06 North B	ooles				
	Mce Dison	(W)		, , , , , , , , , , , , , , , , , , , ,		
	or your representation?			. [2]	(Yes □N	10 .
Are you appearing as (If you answered "no question.)	s part of your other paid o, "STOP; you need not	duties for this pers complete the rest	son or organize of this form. I		⟨Yes □ N "yes," go on	
Speaking Limits:	Public Hearing (Comi Information Hearing Other Items		minutes	٠.	¥	•

Are you an elected other governmenta	l official or employee who is appearing solely on behalf of your office or for your municipality or l body?
(If you answered " this form. If you an	yes" to the question, STOP. You need not complete the rest of this form, except that you must sign swered "no" to the question, go on to the next question.)
If you are being pathat:	aid for your representation, or if your appearance is part of other paid duties, please be advised
	fore you engage in lobbying as a lobbyist, you or your principal must file an authorization h the City Clerk.
	ur principal is not permitted to authorize you to lobby unless you are registered with the y Clerk.
peri	our principal spends or will owe more than \$1,000 for lobbying services in any reporting iod (half year), the principal must file expense statements with the City Clerk for the nainder of the calendar year?
Please go to the Room 103 of the Ci	City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at ity-County Building, Madison, for more information.)
Date 4	98 Signature 2
v	Print Name Store Schoolen



Registrat	ion Statement -	Common C	Council	
Please Print			E PRINT NAME CLEARLY	
Agenda No	8	Name Address	Deb Wicher 615 E. Washington	
Please check o	ne:	AND	Please check:	
Support			Wish to Speak .*	
Oppose		•		
Neither S	upport Nor Opp	pose		
(If you answered "no, of who you represent	and go on to the next q	complete the rest uestion.)	on other than yourself: Yes No t of this form. If you answered "yes," provide the na ization you are representing:	ıme
0619	S E. Wa	Shirta	<u> </u>	
			Λ	
Are you being paid for	your representation?		Yes Yo	
Are you appearing as (If you answered "no, question.)	part of your other paid of "STOP; you need not	duties for this pers complete the rest	rson or organization? Yes No t of this form. If you answered "yes," go on to the ne	ext
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3	3 minutes	

Are you an ele other governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
(If you answer this form. If yo	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 are beir that:	ng 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?
(Please go to Room 103 of th	the City Clerk's website www.cityofmqdison.com/clerk/index.html or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Signature

Print Name



Date:	9-	/	8	Carried	1	2	
						-	

CITY OF MADISON

Registration Statement	COMMITTEE	Council		
Please Print Agenda No. 8 Parhandling	PLEASI Name Address	EPRINT NA ROSEMI 111 W W 53703	ME CLEARLY ARY LEE VILSON #108	
Please check one:	AND	Plea	ise check:	
Support Oppose Neither Support Nor Opp At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next que Name, address and telephone number of each	ization or a perso complete the rest estion.)	of this form. Į	If you answered "yes,	ANO
Are you being paid for your representation? Are you appearing as part of your other paid of (If you answered "no," STOP; you need not of question.) Speaking Limits: Public Hearing (Communiformation Hearing Other Items	non Council)	of this form. I	☐ Yes ation? ☐ Yes If you answered "yes,	□ No □ No ," go on to the next

		ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body? Yes No
(If yoı this fo	ı answei rm. If ye	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 bei	ing 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?
(Pleas Room	e go to 103 of t	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name



CITY OF MADISON

Registration Statement -	Common Co	ouncil	
	COMMITTEE .		
Please Print	PLEASE	PRINT NAME CLEARLY	Garten
#8	Name _	Gary Gate	
Agenda No.	Address _	523 Stute S	of known
	· .	/1/a/1000 h	and another control
Please check one:	AND	Please check:	•
Support		Wish to Speak	i.
Oppose			
Neither Support Nor Op	pose		
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of	t complete the rest o	other than yourself: Yes fthis form. If you answered "yes,"	No provide the name
Name, address and telephone number of eac	h person or organiza	tion you are representing:	
	·		
Are you being paid for your representation?		Yes	No ·
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)	duties for this perso t complete the rest o	n or organization?	No go on to the next
Speaking Limits: Public Hearing (Com- Information Hearing Other Items	3 т	ninutes .	

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?
(If you answer this form. If yo	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 are beithat:	ng 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?
(Please go to Room 103 of to	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)
Date	Signature
	Print Name



Date: 18 Sept 2012

WISH TO SPEAK FORM

Registrat	tion Statement	Common C	Council	-
	· .	COMMITTEE		
Please Print				•
		PLEASE	PRINT NAME CLEARLY	
		Name	Michael Rieck	10(5
Agenda No.	8	Address.	142 Kensington	
		Address	/	
		· -	Madison, Wi	53704
Please check o	ne:	AND	Please check:	
Support	·		Wish to Spe	eak
Oppose				
Morthon	Support Nor Opp	DASA		
TACINICI D	anthorrior off	pose .		
	•			
(If you answered "no	ou representing an organ," STOP; you need not and go on to the next qu	complete the rest	n other than yourself: Yoof this form. If you answered "yo	
Name, address and te	lephone number of each	person or organiz	ation you are representing:	
	· · · · · · · · · · · · · · · · · · ·			
Are you being paid fo	r your representation?		Ye	es No
Are you appearing as (If you answered "no, question.)	part of your other paid of "STOP; you need not	duties for this pers complete the rest	on or organization?	
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3	minutes	
	•			•

•	
Are you an elected official or employother governmental body?	vee who is appearing solely on behalf of your office or for your municipality of Yes No
(If you answered "yes" to the questic this form. If you answered "no" to th	n, STOP. You need not complete the rest of this form, except that you must sign e question, go on to the next question.)
If you are being paid for your repre that:	sentation, or if your appearance is part of other paid duties, please be advised
1. Before you engage in with the City Clerk.	lobbying as a lobbyist, you or your principal must file an authorization
2. Your principal is not City Clerk.	permitted to authorize you to lobby unless you are registered with the
3. If your principal spen period (half year), the remainder of the caler	ds or will owe more than \$1,000 for lobbying services in any reporting e principal must file expense statements with the City Clerk for the dar year?
(Please go to the City Clerk's web Room 103 of the City-County Buildin	site <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at g, Madison, for more information.)
Date 18 Sept 2012	Signature Mila Bah Print Name What Rieches
	1 Comp .



Date:	9-1	7 -	12	

CITY OF MADISON

Registra	tion Statement -	Common C	ouncil		-
Please Print			PRINT NAM	E CLEARLY	
Agenda No		Name _ Address _	May (122 Madisi	Labine W. Wis M 53703	hing to A
Please check (ne:	AND	Please	e check:	
Support				Wish to Speak	
Oppose		•			
Neither!	Support Nor Opp	pose			
(If you answered "no	ou representing an organ o, "STOP; you need not and go on to the next qu	complete the rest o			☐ No provide the name
Name, address and to	elephone number of each	person or organiza	tion you are rep	oresenting:	
	Madisa	n Centra	IBIN	<u>)</u>	
	122	W.Wis	hing to	Aug #2	50
	VVladi	SW 137	103)		
Are you being paid fo	or your representation?			Yes	No
Are you appearing as (If you answered "no question.)	part of your other paid of "STOP; you need not	duties for this person complete the rest of	n or organization of this form. If yo	on? 🛕 Yes ou answered "yes," ,	☐ No go on to the next
Speaking Limits:	Public Hearing (Comm Information Hearing Other Items	3 r	ninutes		

Are you an election other government	cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
(If you answere this form. If you	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 are bein that:	ng paid for your representation, or if your appearance is part of other paid duties, please be advised
	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.
	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?
(Please go to Room 103 of the	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at e City-County Building, Madison, for more information.)
Date <u>9-17</u>	Signature May Carbine Print Name



Date:	

CITY OF MADISON

Registra	tion Statement -	Common Co	uncil		-
		COMMITTEE			
Please Print		PLEASE I	PRINT NAME CLE	ARLY	· .
Agenda No		Name (Jeanetta 414 Sta	e Kiec afe St	lee
Please check	one:	AND	Please chec	ck:	
Support Support			Wish	to Speak	
Oppose		•			
Neither	Support Nor Op	pose			
(If you answered "n of who you represen	you representing an orga o, "STOP; you need not t and go on to the next q elephone number of eacl	t complete the rest of ruestion.)	f this form. If you ansv		_
		· .			
Are you being paid	for your representation?			. Yes No	Ŏ.
Are you appearing a (If you answered "n question.)	s part of your other paid o," STOP; you need not	duties for this person complete the rest of	n or organization? Sthis form. If you answ	Yes No wered "yes," go on to	o the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3 n	ninutes		

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?
(If you answer this form. If yo	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 are being that:	ng 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?
(Please go to Room 103 of th	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)
Date <u>9-18 -</u>	Signature Secret Peule Print Name Print Name 12 12 13 14 15 16 16 17 18 18 18 18 18 18 18 18 18
	Jeaner -



Date:	91	13	
Daic.			

Registration Statement -	Common C	ouncil			
	COMMITTEE	•			
Please Print	PLEASE	PRINT NAI	ME CLEARLY		
6	Name /	Lunaj	ASCHAU	4 Rose	
Agenda No.	Address _	117 w.	Dayron S	TREAT	
			W1.5		
Please check one:	AND	Pleas	se check:		
Support Support		X	Wish to Spe	eak .*	
Oppose					
Neither Support Nor Op	pose				
•	•	<i>.</i> *	,		
At this meeting are you representing an orga (If you answered "no," STOP; you need no of who you represent and go on to the next of	t complete the rest o question.)	f this form. If	fyou answered "y	es 🔀 No es," provide th	e name
Name, address and telephone number of eac	h person or organiza	ition you are	representing:		
	* * * * * * * * * * * * * * * * * * * *				
Are you being paid for your representation?			Y	es 🖾 No	
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)	duties for this perso t complete the rest o	on or organiza of this form. If	ation?		he next
Speaking Limits: Public Hearing (Com- Information Hearing Other Items	3	minutes	٠.	÷	

Are you an ele	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental 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 are being that:	ng 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.
	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 ne City-County Building, Madison, for more information.)
Date _ 9/12	Signature 7.2 S
	Print Name - 14NRY ASCHAUGR



Date: 9/18/12

WISH TO SPEAK FORM

Registration Statement	Common C	ouncil	- Andrews
	COMMITTEE		
Please Print	PLEASE	PRINT NAME CLEARLY	
Agenda No	Name _ Address _	Isaac Ler 748 Venif MADISON,	i i i
Please check one:	AND	Please check:	
Support		Wish to Spe	eak "
Oppose			
Neither Support Nor Opp	ose		
At this meeting are you representing an organ (If you answered "no," STOP; you need not of who you represent and go on to the next que Name, address and telephone number of each	complete the rest o estion.)	f this form. If you answered "y	es
	• • • • • • • • • • • • • • • • • • • •		
Are you being paid for your representation?		. <u>Y</u>	es No
Are you appearing as part of your other paid d (If you answered "no," STOP; you need not a question.)	uties for this perso complete the rest o	n or organization?	
Speaking Limits: Public Hearing (Comm Information Hearing Other Items	3 r	ninutes	

		ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
(If you a this form	nswere 1. If yo	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 ar that:	re bein	ng 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?
(Please Room 10	go to 3 of th	the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at e City-County Building, Madison, for more information.)
Date	91	Signature Print Name 15AAC LENZ



Date:		18	12
	1	,	

DO NOT WISH TO SPEAK FORM

Registration Statement -	Common Council COMMITTEE
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No.	Name HOME CEVTEN Address
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor Op	pose
of who you represent and go on to the next of	t complete the rest of this form. If you answered "yes," provide the name
Are you being paid for your representation? Are you appearing as part of your other paid (If you answered "no." STOP: you need no	
question.) Speaking Limits: Public Hearing (Com- Information Hearing	nmon Council)5 minutes3 minutes3 minutes

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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.)		
If you are be that:	eing 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?		
	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		