28101



Date: 12/11/12

# **WISH TO SPEAK FORM**

Registration Stat	tement - Common C	ouncil
Please Print	PLEASE	PRINT NAME CLEARLY
Agenda No. #43	Address _	Ginger McIntosh 3326 Gregory St. Madison
Please check one:	AND	Please check:
Support		Wish to Speak
<b>Oppose</b>		
Neither Support	Nor Oppose	
At this meeting are you represent (If you answered "no," STOP; of who you represent and go on Name, address and telephone nu	you need not complete the rest of the next question.)	of this form. If you answered "yes," provide the name
Are you being paid for your repr	resentation?	☐ Yes ☐ No
Are you appearing as part of you (If you answered "no," STOP; question.)	ur other paid duties for this pers you need not complete the rest	son or organization?  Yes No of this form. If you answered "yes," go on to the next
Informat	Tearing (Common Council)5 ion Hearing	3 minutes

Are you an elother governr	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
, , ,	red "yes" to the question, <b>STOP.</b> 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 be that:	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?		
	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	Signature		
	Print Name		



Date:	

Registration Sta		ouncil	
Please Print	COMMITTEE  PI FASE	E PRINT NAME CLEARLY	
Agenda No. 43	NameAddress	Ken Golden 2904 Gragau Sp MAdism	<del></del>
Please check one:	AND	Please check:	
Support		Wish to Speak	
Oppose			
Neither Suppor	t Nor Oppose		
(If you answered "no," STOP; of who you represent and go or	-	of this form. If you answered "yes," provide	
			8
Are you being paid for your rep	presentation?	☐ Yes No	Э .
Are you appearing as part of you (If you answered "no," STOP; question.)	our other paid duties for this pers	son or organization?	o the next
Informa	Hearing (Common Council)5 ation Hearing	3 minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?	
(If you answ this form. If	vered "yes" to the question, <b>STOP.</b> 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 b	being 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 Room 103 o	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)	
Date	Signature	
	Print Name	



Date: <u>Dec//20/2</u>

### **WISH TO SPEAK FORM**

Registration Statement		Council	
Please Print	COMMITTEE	E PRINT NA	ME CLEARLY
Agenda No. 43	Name Address		1 BRIVES MORIARTO ODANA ROAD SON, WISCONSIN
Please check one:	AND	Plea	se check:
Support		$\boxtimes$	Wish to Speak
<b>Oppose</b>			
Neither Support Nor Op	pose		
At this meeting are you representing an orga (If you answered "no," STOP; you need not of who you represent and go on to the next q Name, address and telephone number of each	complete the rest uestion.)	of this form.	If you answered "yes," provide the name
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 not question.)			
Speaking Limits: Public Hearing (Com Information Hearing. Other Items		3 minutes	

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, <b>STOP.</b> 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 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.)	
D /	Cianatura	
Date	Signature	
	Print Name	





Registration Statement -	Common Co	ouncil	
Please Print	PLEASE	PRINT NAME CLEARLY	
Agenda No.	Name _ Address _	Abe megahed 2010 monroe st	
Please check one:	AND	Please check:	
<b>Support</b>		Wish to Speak	
<b>Oppose</b>			
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 Name, address and telephone number of each	t complete the rest of question.)	of this form. If you answered "yes," provide the n	eame
	· .		
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 person to complete the rest of	son or organization? Yes No of this form. If you answered "yes," go on to the	next
Speaking Limits: Public Hearing (Con Information Hearing Other Items	3	3 minutes	

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?			
(If you answer this form. If yo	ed "yes" to the question, <b>STOP.</b> 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 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 to	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	Signature		
<u> </u>	Print Name		



Date:	12	- //-	10	X	
	/ ~ ~	7 (	,		

Registration Statement -	Common C	ouncil		
Please Print  Agenda No. #43	PLEASE  Name  Address	PRINT NAME C	LEARLY Landy Vinetly	T/r.
Please check one:	AND	Please cl	heck:	
Support		Wi	sh to Speak	
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 Name, address and telephone number of each	t complete the rest ( question.)	of this form. If you d	answered "yes," pro	No ovide the name
	· .			
Are you being paid for your representation?			☐ Yes	J40
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)				No on to the next
Speaking Limits: Public Hearing (Com Information Hearing Other Items	3	minutes		

Are you an electory other government		ee who is appear	ring solely on behalf of your office or for your municipality or Yes Yes
(If you answere this form. If you	ed "yes" to the question answered "no" to the	n, <b>STOP.</b> You ne e question, go on	red not complete the rest of this form, except that you must sign to the next question.)
If you are bein that:	g paid for your repres	sentation, or if yo	our appearance is part of other paid duties, please be advised
1.	Before you engage in with the City Clerk.	lobbying as a lo	bbyist, you or your principal must file an authorization
2.	Your principal is not City Clerk.	permitted to auth	horize you to lobby unless you are registered with the
3.	If your principal spen period (half year), th remainder of the caler	e principal must	nore than \$1,000 for lobbying services in any reporting t file expense statements with the City Clerk for the
(Please go to Room 103 of th	the City Clerk's web ne City-County Buildin	osite <u>www.cityofr</u> g, Madison, for n	madison.com/clerk/index.html or go to the Clerk's Office at nore information.)
Date / 2 -	11-12	Signature	Supan Comity
		Print Name	



Date: / 1/// 1// 2

# WISH TO SPEAK FORM

Registration Statement -	Common C	ouncil
Please Print  Agenda No.	PLEASE Name Address	EPRINT NAME CLEARLY  Kris Schoen Arunn  583 Glan Arive  Madison W1,53711
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Op	opose	
At this meeting are you representing an org (If you answered "no," STOP; you need no of who you represent and go on to the next Name, address and telephone number of ea	ot complete the rest question.)	of this form. If you answered "yes," provide the name
Are you being paid for your representation	?	☐ Yes ☐ No
Are you appearing as part of your other pair (If you answered "no," <b>STOP</b> ; you need no question.)	d duties for this per ot complete the resu	son or organization?
Speaking Limits: Public Hearing (Co Information Hearing Other Items	g	3 minutes

		cted official or employee who is appearing solely on behalf of your office or for your municipality or ental body?
(If you this for	answere m. If you	ed "yes" to the question, <b>STOP.</b> 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 that:	are 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	e go to 103 of th	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:	12-11-12	

Registration Statement -	Common C	ouncil
Please Print	<b>PLEASE</b> Name	PRINT NAME CLEARLY  Chr.'s Forcier
Agenda No. ### 43	Address	2526 Gregory Street Modison
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Op	pose	
At this meeting are you representing an org (If you answered "no," STOP; you need no of who you represent and go on to the next of Name, address and telephone number of each	ot complete the rest question.)	of this form. If you answered "yes," provide the name
·		
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.)	_	son or organization?  Yes No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Cor Information Hearing Other Items	5	3 minutes

Are you an el other governn	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?
(If you answe this form. If y	red "yes" to the question, <b>STOP.</b> 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 be that:	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?
(Please go to Room 103 of	o 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



		1/4	14
Date:	1:	X J. Z.	<u> </u>

Registration	on Statement	Common C	ouncil			
Please Print  Agenda No.	3	PLEASE  Name  Address	PRINT NA	ME CLEARL Havi	Her ;	Gra Tv
Please check or	ie:	AND	Plea	ise check:		
X Support			X	Wish to S	Speak	
Oppose			/			
Neither St	upport Nor Op	pose				
At this meeting are you (If you answered "no, of who you represent of Name, address and tele	" <b>STOP;</b> you need not and go on to the next q	complete the rest uestion.)	of this form.	If you answered	Yes /	No No vide the name
Are you being paid for	your representation?				] Yes	□ No
Are you appearing as partial (If you answered "no, question.)	oart of your other paid "STOP; you need not	duties for this pers	son or organiz of this form.	zation?	] Yes   d "yes," go	□ No o on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items		3 minutes			

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?				
(If you answer this form. If yo	red "yes" to the question, <b>STOP.</b> 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:	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?			
(Please go to Room 103 of	o 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:	
I PATE:	
Daic.	

Registration Statement	Common C	ouncil
Please Print		PRINT NAME CLEARLY
Agenda No. <u>43</u>	Name Address	(Marsa ) Unt 109 EMain St. #2 Madism M 33702
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Opp	pose	
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 question and the state of the	complete the rest uestion.)	of this form. If you answered "yes," provide the name
	duties for this per	Yes Yes No of this form. If you answered "yes," go on to the next
question.)  Speaking Limits: Public Hearing (Com Information Hearing. Other Items		3 minutes

	•		
	elected official or employed nmental body?	e who is appea	ring solely on behalf of your office or for your municipality or Yes No
	vered "yes" to the question, you answered "no" to the c		red not complete the rest of this form, except that you must sign to the next question.)
If you are b that:	eing paid for your represe	ntation, or if y	our appearance is part of other paid duties, please be advised
1.	Before you engage in lowith the City Clerk.	obbying as a lo	bbyist, you or your principal must file an authorization
2.	Your principal is not policy Clerk.	ermitted to aut	horize you to lobby unless you are registered with the
3.	If your principal spends period (half year), the remainder of the calend	principal must	nore than \$1,000 for lobbying services in any reporting t file expense statements with the City Clerk for the
(Please go Room 103 o	to the City Clerk's websif the City-County Building,	ite <u>www.cityofi</u> Madison, for n	madison.com/clerk/index.html or go to the Clerk's Office at nore information.)
Date //	1-11-2012	Signature Print Name	Dinardellik



Date:	/	12		1)	<u> </u>	17
			-		7	

Registration Statement -	Common C	Souncil
Please Print		PRINT NAME CLEARLY
Agenda No	Name Address	Travis Touman 617 Class Spring C+ Monong, WI
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Op	pose	
At this meeting are you representing an orga (If you answered "no," STOP; you need not of who you represent and go on to the next quality Name, address and telephone number of each	t complete the rest question.)	of this form. If you answered "yes," provide the name
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 per t complete the rest	son or organization?
Speaking Limits: Public Hearing (Con Information Hearing Other Items		3 minutes

Are you an ele 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 yo	ed "yes" to the question, <b>STOP.</b> 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 bein 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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)			
Date	Signature		
	Print Name		



Date: Dec. 11, 2012

## WISH TO SPEAK FORM

Registration Statement -	- Common Council		
	COMMITTEE		
<u>Please Print</u>	PLEASE	PRINT NAME CLEARLY	
117	Name \	DARYL K. SHERMAN	
Agenda No.	Address	3106 Gregory SK.	
		5371/	
Please check one:	AND	Please check:	
Support		Wish to Speak	
<b>Oppose</b>			
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 Name, address and telephone number of each	t complete the rest question.)	of this form. If you answered "yes," provide the name	
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.)	l duties for this per of complete the res	rson or organization?	
Speaking Limits: Public Hearing (Con Information Hearing Other Items	<u> </u>	3 minutes	

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?				
(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)				
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:				
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.	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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)				
Date	Signature			
	Print Name			



Date:
-------

Registration Statement	Common Co	ouncil	
Please Print		PRINT NAME CLEA	RLY
Agenda No	Name _ Address _	Mark Sha 607 Piper Madiso	han Dr.
Please check one:	AND	Please check	<b>:</b>
Support		Wish to	o Speak
Oppose			
Neither Support Nor Opp	pose		
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 uestion.)	f this form. If you answe	
			·
·			
Are you being paid for your representation?			Yes No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need not question.)			Yes No No red "yes," go on to the next
Speaking Limits: Public Hearing (Communication Hearing Other Items	3	minutes	

	elected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?		
	vered "yes" to the question, <b>STOP.</b> 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 b 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.	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 Room 103 c	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at f the City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Date:	
-------	--

Registration Statement -	Common C	Council	
Please Print  Agenda No. 43	PLEASE Name Address	SEPRINT NAME CLEARLY  AREN SAGE  597 Glen Do  Madism, W153711	
Please check one:	AND	Please check:	
Support		Wish to Speak	
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 Name, address and telephone number of each	t complete the rest question.)	st of this form. If you answered "yes," provide the nam	е _
Are you being paid for your representation?		Yes No	
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need no question.)		erson or organization? Yes No est of this form. If you answered "yes," go on to the nex	ct
Speaking Limits: Public Hearing (Con Information Hearing Other Items		3 minutes	

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?					
(If you answer this form. If yo	(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)				
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:					
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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)					
Date	Signature				
	Print Name				



Date:	12-11-12	

Registration Statement -	Common C	ouncil
Please Print	COMMITTEE	
110000 TIME	PLEASE	PRINT NAME CLEARLY
#43	Name	Sue Robinson
Agenda No. 28101	Address	591 Glen Dr.
		Madison, WI 53711
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Op	pose	
At this meeting are you representing an organized (If you answered "no," STOP; you need not of who you represent and go on to the next of Name, address and telephone number of each	nt complete the rest question.)	of this form. If you answered "yes," provide the name
	:	
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.)		on or organization? Yes No of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Con Information Hearing Other Items	5	

Are you an el other governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?		
	red "yes" to the question, <b>STOP.</b> 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:	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?			
	o 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		



Registration Statement	- Common C	Council
Please Print	PLEASE	E PRINT NAME CLEARLY
Agenda No	Name Address	David Long 2417 Fox du J Madison WI 53711
Please check one:	AND	Please check:
Support		Wish to Speak
<b>Oppose</b>		
Neither Support Nor O	ppose	
At this meeting are you representing an or (If you answered "no," <b>STOP</b> ; you need to of who you represent and go on to the next Name, address and telephone number of e	not complete the rest t question.)	st of this form. If you answered "yes," provide the name
	· ·	
Are you being paid for your representation	n?	☐ Yes 💆 No
Are you appearing as part of your other pa (If you answered "no," STOP; you need a question.)		erson or organization?
Information Hearin	ommon Council)	3 minutes

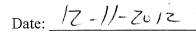
Are you an ele other governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or ental body?  Yes No
	ed "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign answered "no" to the question, go on 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.
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 he City-County Building, Madison, for more information.)
Date	Signature Stantal Z
	Print Name David Long



Date:	
-------	--

Registration Statement -	COMMITTEE	Council	
Please Print	PLEASE	E PRINT NAME CLEARLY	
Agenda No. 43	Name Address	JOANN PRITCHETT 605 TOEPFER AVE MADISON 53711	
Please check one:	AND	Please check:	
Support		Wish to Speak	
<b>Oppose</b>			
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 Name, address and telephone number of each	t complete the rest question.)	t of this form. If you answered "yes," provid	No de the name
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.)			No to the next
Speaking Limits: Public Hearing (Com Information Hearing Other Items		.3 minutes	

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?		
(If you answe this form. If y	red "yes" to the question, <b>STOP.</b> 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 be that:	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.	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?	
	o 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	





Registration	on Statement	COMMITTEE	ouncil		
Please Print  Agenda No. 43		Name	PRINT NAME C Robbie 1 2613 Ste Madison	velbber	
Please check on	ie:	AND	Please cl	neck:	
<b>Support</b>			Wi	sh to Speak	
Oppose					
Neither St	upport Nor Op	pose			
At this meeting are you (If you answered "no, of who you represent a Name, address and tele	" STOP; you need not and go on to the next q	complete the rest uestion.)	of this form. If you	answered "yes," p	□ No provide the name
Are you being paid for	your representation?			Yes	☐ No
Are you appearing as partial (If you answered "no, question.)	oart of your other paid "STOP; you need not	duties for this per complete the rest	son or organization? of this form. If you	Yes answered "yes,"	☐ No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items		3 minutes		

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental 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 beinthat:	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.	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 he City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Registration	Statement	COMMITTEE	Council			
Please Print  Agenda No.		PLEASE Name Address	Brian TV 4306 Dance	ARLY rany april	or Dri	
Please check one:		AND	Please che	ek:		
Support	_		Wish	to Speak		
Oppose			,			
Neither Sup	port Nor Opp	ose				
At this meeting are you re (If you answered "no," S' of who you represent and Name, address and telephone	<b>TOP;</b> you need not og on to the next qu	complete the rest estion.)	t of this form. If you ans		No provide the	name
		-			HAMP WATERY	
Are you being paid for yo	ur representation?			☐ Yes	□No	
Are you appearing as part (If you answered "no," States				☐ Yes swered "yes,"	No go on to the	e next
Int	blic Hearing (Comn formation Hearing her Items		3 minutes			

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?				
(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)				
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:				
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 t	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	Signature			
	Print Name			



Date:
-------

## **WISH TO SPEAK FORM**

### CITY OF MADISON

Registration Statement -	Common Co	ouncil
Please Print	COMMITTEE	
		PRINT NAME CLEARLY
43	Name	Lynn Pitm 2259 Fox Ave
Agenda No.	Address	2259 tox AV
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose Lighting		
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 Name, address and telephone number of each	t complete the rest of question.)	f this form. If you answered "yes," provide the name
Are you being paid for your representation?		☐ Yes   No
Are you appearing as part of your other paid (If you answered "no," <b>STOP</b> ; you need no question.)	•	n or organization?
Speaking Limits: Public Hearing (Com Information Hearing Other Items	3 1	minutes

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?		
	red "yes" to the question, <b>STOP.</b> 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?		
	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:
-------

### CITY OF MADISON

Registrat	ion Statement	Common Cou	ıncil	
Please Print		PLEASE P	RINT NAME CLEARL	_Y
Agenda No. <u>43</u>		Name	Kevin Henke 513 Virginia Madrian,	
Please check o	ne:	AND	Please check:	
Support			Do not wi	sh to speak
<b>Oppose</b>		•		
Neither S	upport Nor Opp	pose		
(If you answered "no, of who you represent	" STOP; you need not and go on to the next qu	complete the rest of t uestion.)	ther than yourself:  This form. If you answered on you are representing:	☐ Yes ☑ No d "yes," provide the name
	part of your other paid			」Yes ☑No  ☐Yes ☑No  d "yes," go on to the next
Speaking Limits:	Public Hearing (Comr Information Hearing Other Items	3 mi	inutes	

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?					
(If you answere this form. If yo	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.				
3.	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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)					
Date	Signature / M. Deule Print Name / KEUIN HENKES				



Date:	***************************************	2-	<u> </u>	-		1	2_
					F		

## CITY OF MADISON

Registration Statement	Common Council COMMITTEE
Please Print  Agenda No. 43	PLEASE PRINT NAME CLEARLY  Name Kathryn Lederhayse  Address 3106 Gregory 5371
Please check one:	AND Please check:
Support	X Do not wish to speak
Oppose	At the first public hearing
At this meeting are you representing an organ	ofated that light are moderated in the care has modely light all the mization or a person other than yourself: Yes No Politic complete the rest of this form. If you answered "yes," provide the name uestion.)
Are you being paid for your representation?	☐ Yes ☐ No
Are you appearing as part of your other paid of (If you answered "no," STOP; you need not question.)	duties for this person or organization?  Yes No complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mon Council) 5 minutes 3 minutes 3 minutes

Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality of other governmental body?  Yes No				
(If you answered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)				
If you are beithat:	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?			
(Please go to Room 103 of t	o the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at the City-County Building, Madison, for more information.)			
Date	12/11/12 Signature Print Name Kathryn Leterhayse			
	,			



Date:	12/11/12	

## CITY OF MADISON

Registratio	n Statement	Common Cour	ıcil	
Please Print		PLEASE PRI	NT NAME CLE	ARĻY
Agenda No. 43		Address 55	eck Lan 15 Chath adison	ain Ter
Please check on	2:	AND	Please chec	ek:
Support			🔀 Do not	wish to speak
Oppose		:		
Neither Su	pport Nor Opp	oose		
At this meeting are you (If you answered "no," of who you represent an Name, address and telep	STOP; you need not on the next qu	complete the rest of thi. estion.)	s form. If you answ	☐ Yes ② No vered "yes," provide the name ng:
		·	·	
Are you being paid for y	-			Yes No
Are you appearing as pa (If you answered "no," a question.)	rt of your other paid d STOP; you need not c	uties for this person or complete the rest of this	organization? s form. If you answ	Yes No vered "yes," go on to the next
I	nformation Hearing	non Council)5 minu 3 minu 3 minu	ites	

Are you an eleother government	ected official or employee who is appearing solely on behalf of your office or for your municipality or lental 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.	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 t	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Date: 12/11/12

# DO NOT WISH TO SPEAK FORM

### CITY OF MADISON

Registratio		mmon Cour	ncil		
Please Print  Agenda No		PLEASE PRI Name Address	RINT NAME CLEARLY  MICHINS Daugherty  109 Hillington Way  1adison, WT 53721		
Please check one  Support		AND	Please check:  Do not wish to speak		
Oppose  Neither Support Nor Oppose Comments attacked					
(If you answered "no," So of who you represent and	epresenting an organization GTOP; you need not comple d go on to the next question.,	te the rest of this )	is form. If you answered "yes," provide the name		
Are you being paid for yo	our representation?		☐ Yes 🕅 No		
	of your other paid duties for TOP; you need not complete		organization? Yes No No is form. If you answered "yes," go on to the next		
In	iblic Hearing (Common Cor formation Hearingher Items	3 minu	utes		

Are you an eleother governm	ected official or employee who is appearing solely on behalf of your office or for your municipality or nental body?			
(If you answer	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.	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 t	the City Clerk's website <u>www.citvofmadison.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: 12/11/12

## DO NOT WISH TO SPEAK FORM

### CITY OF MADISON

Registration Statement -	Common Council COMMITTEE
<u>Please Print</u>	PLEASE PRINT NAME CLEARLY
Agenda No43	Name Bonnie McMullin-Lewston  Address 555 Chathanton.  Madosa, WI 53711
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor Opp	pose
(If you answered "no," STOP; you need not of who you represent and go on to the next qu	nization or a person other than yourself:  Complete the rest of this form. If you answered "yes," provide the namuestion.)  In person or organization you are representing:
Are you being paid for your representation?  Are you appearing as part of your other paid	
(If you answered "no," STOP; you need not question.)	complete the rest of this form. If you answered "yes," go on to the nex
Information Hearing	mon Council)5 minutes 3 minutes 3 minutes

Are you an eleother 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	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 bei 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 t	the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at he City-County Building, Madison, for more information.)		
Date	Signature		
	Print Name		



Date:  $\frac{12}{11}$   $\frac{12}{12}$ 

# DO NOT WISH TO SPEAK FORM

#### CITY OF MADISON

Registration Statement -	- Common Council COMMITTEE		
Please Print	PLEASE PRINT NAME CLEARLY		
Agenda No. PATCH 491+TS	Name SANDRA E STARK  Address 2720 gregury 57  MADISM W, 53	7	
Please check one:	AND Please check:		
<ul><li>☐ Support</li><li>☑ Oppose</li></ul>	Do not wish to spe	ak	
Neither Support Nor Op	ppose		
(If you answered "no," STOP; you need no of who you represent and go on to the next of	ganization or a person other than yourself: Yes ot complete the rest of this form. If you answered "yes," proviquestion.)  ch person or organization you are representing:	No ide 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		No No n to the next	
question.)			
Speaking Limits: Public Hearing (Common Council)5 minutes Information Hearing			

Are you an e	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?				
(If you answe this form. If y	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:	ing paid for your representation, or if your appearance is part of other paid duties, please be advised				
1.	1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
2.	2. Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.	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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)					
Date	12/18/2012 Signature Savora E STARK  Print Name Savora E STARK				



Date:	
-------	--

## CITY OF MADISON

Registration Stat	ement - Common Council				
Please Print  Agenda No. # 4 (2810)	PLEASE PRINT NAME CLEARLY  Name PAUL CICHANOFSKY  Address 3338 GREGORY ST  Madisin WI 53711				
Please check one:	AND Please check:				
Support	Do not wish to speak				
Oppose	1				
Neither Support Nor Oppose					
(If you answered "no," STOP; yo of who you represent and go on to	ing an organization or a person other than yourself:  Ou need not complete the rest of this form. If you answered "yes," provide the othe next question.)  The next question or organization you are representing:	name			
Are you being paid for your repre	sentation? Yes XNo				
	other paid duties for this person or organization? Yes \(\int\)No we need not complete the rest of this form. If you answered "yes," go on to the	next			
Information	nring (Common Council)5 minutes n Hearing				

Are you an eleother government	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	red "yes" to the question, <b>STOP.</b> 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.	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 t	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	Signature Print Name			



### CITY OF MADISON

Registration S	Statement - Commo	n Council
Please Print  Agenda No.	PLEA Name Addre	MONEY DIVIN
Please check one:	AND	Please check:
Support		Do not wish to speak
<b>Oppose</b>		
A. A.	ort Nor Oppose	
		erson other than yourself:  Yes No No rest of this form. If you answered "yes," provide the name
Name, address and telephone	e number of each person or org	anization you are representing:
Are you being paid for your	representation?	☐ Yes ☐ No
	your other paid duties for this <i>P</i> ; you need not complete the <i>i</i>	person or organization? Yes Yoo Yes Yoo Yest of this form. If you answered "yes," go on to the next
Inform	c Hearing (Common Council) . mation Hearing Items	3 minutes

Are you an eleother government	ected official or employee wnental body?	ho is appearing	solely on behalf of your offi	ce or for you Yes	r municipality or No
(If you answered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, except that you must sign this form. If you answered "no" to the question, go on to the next question.)					
If you are beithat:	If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:				
1.	Before you engage in lobb with the City Clerk.	ying as a lobbyis	st, you or your principal mus	st file an auth	orization
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 the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)					
Date 10	/11/12 s	ignature	Landall		What
		rint Name	Pandall:	Tr W	olle,



### CITY OF MADISON

Registration St	atement - Commo	n Council	
Please Print 43	PLEA Name		And all the last and a second second
Agenda No C	Addre	Madison WI 53711	
Please check one:	AND	Please check:	
Support		Do not wish to speak	
<b>Oppose</b>			
Neither Suppo	rt Nor Oppose		
of who you represent and go o	; you need not complete the ron to the next question.)	erson other than yourself: Yes No rest of this form. If you answered "yes," provide the naganization you are representing:	ame
Are you being paid for your re	presentation?	☐ Yes ☑ No	
Are you appearing as part of y (If you answered "no," STOP question.)		person or organization? Yes Mo rest of this form. If you answered "yes," go on to the n	ext
Inform	Hearing (Common Council) ation Hearingtems	3 minutes	

Are you an ele	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 yo	ed "yes" to the question, <b>STOP.</b> 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 <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  Signature  M. Molle			



Date:	

### CITY OF MADISON

Registration Sta	tement - Common Council
Please Print #12	PLEASE PRINT NAME CLEARLY  Name LAURA LYONS
Agenda No. SW 5	Name LAORA LYONS  Address 3338 Glegory St  Modison WI 53711
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Suppor	Nor Oppose
(If you answered "no," STOP; of who you represent and go or	nting an organization or a person other than yourself: Yes No you need not complete the rest of this form. If you answered "yes," provide the name to the next question.)  Important of each person or organization you are representing:
Are you being paid for your rep	resentation? Yes XNo
Are you appearing as part of yo (If you answered "no," STOP; question.)	or other paid duties for this person or organization? Yes No wou need not complete the rest of this form. If you answered "yes," go on to the next
Informa	earing (Common Council)5 minutes ion Hearing

Are you an elected other governmental	official or employee who is appearing solely on behalf of your office or for your munbody?	iicipality or No		
(If you answered "ye this form. If you ans	es" to the question, <b>STOP.</b> You need not complete the rest of this form, except that yo wered "no" to the question, go on to the next question.)	u must sign		
If you are being paithat:	id for your representation, or if your appearance is part of other paid duties, please	be advised		
	ore you engage in lobbying as a lobbyist, you or your principal must file an authorizat the City Clerk.	ion		
	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.			
perio	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 the C Room 103 of the Cit	City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk'. y-County Building, Madison, for more information.)	s Office at		
Date	Signature			
	Print Name			



Date:	
<i></i>	

### CITY OF MADISON

Registration St	atement - Comm			_
Please Print  Agenda No.	Na	dress 2646	MECLEARLY Wolbert Chemberlan Avenue 1, W1 53705	
Please check one:	ANI	Plea	se check:	
Support Oppose			Do not wish to speak	
Oppose Neither Suppor	t Nor Oppose			
At this meeting are you represe (If you answered "no," STOP, of who you represent and go of	you need not complete th		ourself: Yes No fyou answered "yes," provide th	he name
Name, address and telephone r	number of each person or c	rganization you are	representing:	
Are you being paid for your rep	presentation?		☐ Yes ☐ No	
Are you appearing as part of you (If you answered "no," STOP; question.)			ation? Yes No You answered "yes," go on to the	he next
Informa	Hearing (Common Council tion Hearingems	3 minutes		

Are you ar	elected official or employee who is appearing solely on behalf of your office or for your municipality or mmental body?			
(If you ans this form	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign fyou answered "no" to the question, go on to the next question.)			
If you are that:	being 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 Room 103	to the City Clerk's website <u>www.citvofmadison.com/clerk/index.html</u> or go to the Clerk's Office at of the City-County Building, Madison, for more information.)			
Date	Signature  Print Name			

Date: // \_// \_\_\_\_

#### CITY OF MADISON

## Early Public Comment Registration Statement - Common Council

This form is to be used ONLY by persons with health, scheduling, or child-care needs at the Common Council Meeting.

Please Print		PLEAS	E PRINT NAME CLE	ARLY	
Agenda No	3	Name Address	Henry 5 569/6-6	s. Cuc	iA
Please check the ap	propriate box:		Please check th	ne appropriate box	:
Support Oppose Neither St	upport Nor Oppose	AND	Wish to spe Do not wish Available to		
(If you answered "no of who you represent	you representing an organity, "STOP; you need not contain the second of the next que the second of each property of each property.	complete the rest estion.)	t of this form. If you ansv		
Are you being paid f	or your representation?			☐ Yes ☐ X	Йo
	s part of your other paid do o, " <b>STOP;</b> you need not c			Yes N wered "yes," go on	No to the next
Speaking Limits:	Public Hearing (Comm Information Hearing				