28116



Date: 12/11/12

## WISH TO SPEAK FORM

Registration Statement -	Common C	Council
Please Print	PLEASE	PRINT NAME CLEARLY
Agenda No.	Name Address	Paul Reissy 1218 Afekandria Lane Madwon 53718
Please check one:	AND	Please check:
Support		Wish to Speak
Oppose		
Neither Support Nor Op	ppose	
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 pai (If you answered "no," <b>STOP</b> ; you need no question.)	d duties for this per ot complete the res	rson or organization? Yes No t of this form. If you answered "yes," go on to the next
Speaking Limits: Public Hearing (Con Information Hearing Other Items	g	

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, <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.	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: 12/11/2

#### 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		PLEASE PRINT NAME CLEARLY
Agenda No.	+6	Name $\frac{VAVAVAVA}{4000000000000000000000000000000000000$
Please check the ap	propriate box:	Please check the appropriate box:
At this meeting are y (If you answered "no of who you represent	o," <b>STOP;</b> you need not co t and go on to the next que	Wish to speak  Do not wish to speak  Available to answer questions  ration or a person other than yourself:  The property of this form. If you answered "yes," provide the name stion.)  The person or organization you are representing:
Are you being paid f	or your representation?	☐ Yes ☐ No
		nties for this person or organization?  Yes No omplete the rest of this form. If you answered "yes," go on to the next
Speaking Limits:		on Council)5 minutes

-	elected official or employee who is appearing solely on behalf of your office or for your municipality or mmental body?  Yes No
1 0 0	wered "yes" to the question, <b>STOP.</b> 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?
, –	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: Dec 11, 2012

## **WISH TO SPEAK FORM**

Registration Statement -	Common C	Council		
Please Print				
Agenda No. 566	<.	Dean	Matuszak McLean Drive	
Please check one:	AND	Plea	ase 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 not of who you represent and go on to the next quality Name, address and telephone number of each	t complete the rest uestion.)	of this form.	If you answered "yes," provide the nan	ne 
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.)				xt
Speaking Limits: Public Hearing (Com- Information Hearing Other Items	••••	3 minutes		

Are you an e	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?
	ered "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 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?
	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: 12-11-3012

## WISH TO SPEAK FORM

Registration Statemen	t - Common C	Council		
	COMMITTEE			
Please Print				
	PLEASE	: PRINT NA	ME CLEARLY	
7	Name	Danie	IJ. Maider	
Agenda No	Address	6201	McLeon Dr.	
	and wanted	Madi	Jen, W1 53718	
		1		
Please check one:	AND	Plea	ase check:	
M Support			Wish to Speak	
Support		$\mathcal{H}$	vvisii to Speak	
<b>Oppose</b>		•		
Neither Support Nor	Onnose			
	o p p s s s			
At this meeting are you representing an (If you answered "no," STOP; you need of who you represent and go on to the no Name, address and telephone number of	d not complete the rest ext question.)	of this form.	If you answered "yes," provide the r	1ame
	· ·			
Are you being paid for your representati	on?		☐ Yes No	
Are you appearing as part of your other (If you answered "no," STOP; you need question.)				next
Information Hea	Common Council)	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 lental 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 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.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



		i	1	
Date:	12	11	117	

# WISH TO SPEAK FORM

Registration Statement -	Common Co	ouncil	***************************************	
Agenda No. 5 Grandview Camonium	PLEASE   Name Address	PRINT NAME CLEA Alisa Aller 134 Nowh Madwan	)	) r
Please check one:	AND	Please chec	k:	·
<b>Support</b>		Wish 1	to Speak	
Oppose				
Neither Support Nor Op	pose			
At this meeting are you representing an organism (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	ot complete the rest o question.)	f this form. If you answ		No 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.)			☐ Yes vered "yes," g	No go on to the next
	mmon Council)5 33	minutes		

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 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.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:	$\int Q$ .	-//	-1	2

## WISH TO SPEAK FORM

Registration Statement -	COMMITTEE	ouncil		
Please Print  Agenda No.	PLEASE Name Address	PRINT NAME  RICK  602 A  MADIS	CLEARLY FOLKE HOOLO W SON	ay
Please check one:	AND	Please	check:	
Support		× w	ish to Speak	
Oppose				
Neither Support Nor Op	pose			
At this meeting are you representing an orga (If you answered "no," <b>STOP</b> ; 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 yo	u answered "yes," <sub>[</sub>	☑No 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.)	duties for this per	son or organizatio of this form. If yo	☐ Yes on? ☐ Yes ou answered "yes,"	No No go on to the next
Speaking Limits: Public Hearing (Cor Information Hearing Other Items	5	3 minutes		

Are you an electe other government	ed official or employee who is appearing solely on behalf of your office or for your municipality or tal body?
	"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:	paid for your representation, or if your appearance is part of other paid duties, please be advised
	efore you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.
	our principal is not permitted to authorize you to lobby unless you are registered with the lity Clerk.
ре	Your principal spends or will owe more than \$1,000 for lobbying services in any reporting eriod (half year), the principal must file expense statements with the City Clerk for the emainder of the calendar year?
	ne City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at City-County Building, Madison, for more information.)
Date 12-1	1-12 Signature Pafle
	Print Name RICK FATKE



Date:	
-------	--

## **WISH TO SPEAK FORM**

Registration Statement -	Common C	Council		
Please Print	PLEASE	E PRINT NAM	IE CLEARLY	
Agenda No	Name Address	BRIAN FOR	MUNSON AST LAKES ) WI	
Please check one:	AND		e check:	A J seed
Support			Wish to Spea	ak
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 quality Name, address and telephone number of each the state of the s	complete the rest uestion.)	of this form. If	you answered "ye.	
Are you being paid for your representation?			Yes	s 🗌 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 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 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 [7]	Signature Print Name  SRAN MUNSON				



# AVAILABLE TO ANSWER QUESTIONS FORM

Registra	ition Statement -	Common Co	uncil		
_		COMMITTEE			
		PLEASE F	PRINT CLEARLY		
Agenda No5	46	Name	Tonya,	Mye union b	56
			Madison	W 5	3718
Please check	one:	AND	Please che	ck:	
Support Support		•	Availa	ble to ans	swer
Oppose			questi		
Neither	Support Nor Op	pose			
(If you answered "n of who you represen	you representing an organo, "STOP; you need no at and go on to the next of the telephone number of each	t complete the rest of question.)	this form. If you ans	•	Provide the name
	A CONTROL OF THE CONT				
			4		
Are you being paid	for your representation?			Yes	No
	s part of your other paid o," <b>STOP;</b> you need no			Yes wered "yes,"	No go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing Other Items	3 n	ninutes		

Are you an e other government		e who is appear	ing solely on behalf of your of	fice or for you  Yes	r municipality or No	
	red "yes" to the question, ou answered "no" to the		ed not complete the rest of this j to the next question.)	form, except th	at you must sign	
If you are be that:	ing paid for your represe	ntation, or if yo	our appearance is part of other	paid duties, p	lease be advised	
1.	Before you engage in lowith the City Clerk.	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 p City Clerk.	Your principal is not permitted to authorize you to lobby unless you are registered with the City Clerk.				
3.		principal must	ore than \$1,000 for lobbying se file expense statements with			
	o the City Clerk's websi the City-County Building,		adison.com/clerk/index.html o ore information.)	r go to the C	Clerk's Office at	
Date	211.17	Signature	11 chyemnye			
		Print Name	Tonya Nye			



# Date: 21/2012 AVAILABLE TO ANSWER QUESTIONS FORM

Registra	ation Statement	Common Cor	uncil		
Agenda No	5	PLEASE P Name Address	RINT CLEARLY  OF MCLE  JADISON	EST SULVE	21UE.
Please check	one:	AND	Please che	ck:	
Support Oppose	<u> </u>		Availal question	ble to answ	ver
	Support Nor Opp	oose			
(If you answered "r of who you represen	you representing an organge, "STOP; you need not it and go on to the next qualities telephone number of each	complete the rest of a	this form. If you ans		No rovide the name
				erandati etti ontana alamani dan satarila da eranda	
Are you being paid	for your representation?			Yes	☐ No
, ,,	s part of your other paid on one of so, "STOP; you need not	~	<u> </u>	☐ Yes wered "yes," g	☐ No go on to the next
Speaking Limits:	Public Hearing (Communication Hearing	3 m			

•	Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or ther governmental body?					
	ered "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 be that:	sing 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					

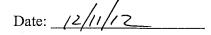




# AVAILABLE TO ANSWER QUESTIONS FORM

Registration Statement -	
_	COMMITTEE
	PLEASE PRINT CLEARLY
Agenda No. #5	Name Max Dickman  Address 875 E. Wisconsin Ave.  M. Twoker, WI 53202
Please check one:	AND Please check:
Support	Available to answer
Oppose	questions
Neither Support Nor Op	pose
Name, address and telephone number of each Round is Superman Kerts	t complete the rest of this form. If you answered "yes," provide the name question.)  The person or organization you are representing:
875 E- Wisconsin Ave. 1	Milwantee, WI 53202 4161-231-5887
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.)	☐ Yes ☑ No  duties for this person or organization? ☐ Yes ☐ No  t complete the rest of this form. If you answered "yes," go on to the next
Information Hearing.	amon Council)5 minutes

Are you an el other governn	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes  No
	ered "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 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	11.12 Signature Max Dicteman





# AVAILABLE TO ANSWER QUESTIONS FORM

Registra	tion Statement -	Common Cou	uncil		
		COMMITTEE			
		PLEASE P	RINT CLEARLY		
Agenda No 5 -	Ganduru Grang	Name	Den Brukme	eq .	
Please check of	one:	AND	Please che	ck:	
Support	•		Availa	ble to ans	swer
<ul><li>Oppose</li></ul>			questic		
Neither S	Support Nor Op	pose			
(If you answered "no	you representing an orga o, " <b>STOP;</b> you need no t and go on to the next q	t complete the rest of i	ther than yourself: this form. If you ans	Yes wered "yes,"	☐ No ' provide the name
Name, address and to	elephone number of eac	h person or organizati	on you are represent	ing:	
DSI Real Est	Eta Comp - 2	76-3060			
Vendras Home	s - 276-300	0			
	Z				entropolitico de la constantina del constantina de la constantina del constantina de la constantina de
Are you being paid for	or your representation?			Yes	□ No
	part of your other paid o, "STOP; you need not			₩Yes wered "yes,"	☐ No go on to the next
Speaking Limits:	Information Hearing.	mon Council)5 m 3 m 3 m	inutes		

Are you an el other government	lected official or employee who is appearing solely on behalf of your office or for your municipality or mental body?  Yes No
	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?
١	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	/11/12 Signature From Contraction
•	Print Name Deniel Brinkman



# AVAILABLE TO ANSWER QUESTIONS FORM

Registration Statement -	Common Co	ouncil		
_	COMMITTEE			
	PLEASE	PRINT CLEARLY		
Agenda No	Name _	CHRIS WIP 4820 P. PAR	+ER-	- AA
Agenda Ivo.	Address _			
	_	Appleton, v	01 549	913
Please check one:	AND	Please chec	<b>k:</b>	
Support		Availab	le to ansv	ver
Oppose		question	ns	
Neither Support Nor Opp	oose			
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 lower with the winter with the state of the stat	complete the rest of uestion.)  n person or organiza	this form. If you answ	•	☐ No provide the name
3315A N. BALLAND	NDAD)			Net Mark State Control of the Contro
Appleton, WI 549				
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.)	<del>-</del>	_	Yes vered "yes," g	☐ No go on to the next
Speaking Limits: Public Hearing (Communication Hearing Other Items	3 r	ninutes		

•	elected official or emplo nmental body?	yee who is appear	ring solely on behalf of your of	fice or for you	ır municipality or No
	wered "yes" to the questi f you answered "no" to t		eed not complete the rest of this to the next question.)	form, except i	hat you must sign
If you are that:	being paid for your repre	esentation, or if ye	our appearance is part of other	paid duties,	please be advised
1.	Before you engage is with the City Clerk.	n lobbying as a lo	bbyist, you or your principal mu	ist file an aut	horization
2.	Your principal is no City Clerk.	t permitted to autl	horize you to lobby unless you	are registered	l with the
3.		he principal must	nore than \$1,000 for lobbying set file expense statements with		
	to the City Clerk's we of the City-County Buildin		nadison.com/clerk/index.html o nore information.)	r go to the	Clerk's Office at
Date	12-11-12	Signature Print Name	CHRIS WINT	EL	





# **AVAILABLE TO ANSWER QUESTIONS FORM**

Registrat	ion Statement	COMMITTEE	uncil	
Agenda No	5	PLEASE I  Name  Address	PRINT CLEARLY MICHAEL C 21045 DAN Brookfield	Schmitt KRidge Of. WI 53045
Please check o	ne:	AND	Please chee	ck:
X Support			<b>Availal</b>	ble to answer
☐ Oppose ☐ Neither S	Support Nor Opp	oose	questi	JH9
(If you answered "no of who you represent	ou representing an organ  on 'STOP; you need not and go on to the next que  lephone number of each  of Winters Ass.	complete the rest of uestion.)	fthis form. If you ans	Yes No wered "yes," provide the nam ting:
- 900 Are you being paid for	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 perso complete the rest of	n or organization? f this form. If you ans	Yes No No Neered "yes," go on to the nex
Speaking Limits:	Public Hearing (Comr Information Hearing	3 1		

_		lected official or employee who is appearing solely on behalf of your office or for your municipality or mental 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 that:	are be	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 the City-County Building, Madison, for more information.)
Date _	18	1-11-12 Signature Michael J Schmitt

		/
Date:	12/11/	12



# AVAILABLE TO ANSWER QUESTIONS FORM

Registration	on Statement	COMMITTEE	ncil
		PLEASE PR	RINT CLEARLY
Agenda No	5	Name	DAN DAY 7530 WESTWARD WAY MADISONI WI
Please check on	e:	AND	Please check:
Support  Oppose	·		Available to answer questions
	ipport Nor Opp	ose	
(If you answered "no,"	representing an organi 'STOP; you need not c nd go on to the next que	omplete the rest of th	her than yourself: Yes  No his form. If you answered "yes," provide the name
Name, address and tele	<del>-</del>		on you are representing:
Kou	IDIAN HOMES,	+ HSGOC.	
Are you being paid for	your representation?		Yes No
Are you appearing as pa (If you answered "no," question.)			or organization?
	Public Hearing (Comm Information Hearing	3 mir	

•	n elected official or employee who is appearing solely on behalf of your office or formental body?	for your municipa Yes No	lity or
	wered "yes" to the question, <b>STOP.</b> You need not complete the rest of this form, ex If you answered "no" to the question, go on to the next question.)	xcept that you mus	t sign
If you are bei that:	being paid for your representation, or if your appearance is part of other paid du	uties, please be ac	lvised
1.	Before you engage in lobbying as a lobbyist, you or your principal must file a with the City Clerk.	an authorization	
2.	Your principal is not permitted to authorize you to lobby unless you are regicity Clerk.	istered with the	
3.	If your principal spends or will owe more than \$1,000 for lobbying services in period (half year), the principal must file expense statements with the City remainder of the calendar year?		
Room 103 of t	to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to of the City-County Building, Madison, for more information.)	the Clerk's Offi	ice at
Date	12/11/2 Signature Name Day		



Date: Dec 11, 2012

# DO NOT WISH TO SPEAK FORM

Registration Statement -	Common Council COMMITTEE	
Please Print	PLEASE PRINT NAME CLEARLY	
Agenda No. 5+6	Name Jeff Wunderlin Address 620 McCean Dr. Madison, WI 53	27/
Please check one:	AND Please check:	
Support Oppose	Do not wish to speak	
Neither Support Nor Opp	pose	
of who you represent and go on to the next qu	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 of the paid	☐ Yes ☐ No 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	

Are you an ele	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 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 Room 103 of ti	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: 12/11/2012

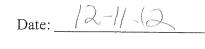
# DO NOT WISH TO SPEAK FORM

#### CITY OF MADISON

Registrat	ion Statement - ַ	Common C	ouncil		<del></del>
Please Print		PLEASE	PRINT NAME CLI	EARLY	
Agenda No. 5+6			Mike Te Ronde 6121 Fredericksb Madrica 5335		
Please check o	ne:	AND	Please che		
Support			Do no	t wish to speak	ζ.
<b>Oppose</b>					
At this meeting are yo (If you answered "no,	upport Nor Oppout Nor	nization or a person complete the rest o		☐ Yes ☐ No swered "yes," provide	
Name, address and tel	ephone number of each	person or organiza	ation you are represen	ting:	
Are you being paid for	r your representation?			Yes No	)
	part of your other paid on STOP; you need not			Yes No	
Speaking Limits:	Public Hearing (Communication Hearing Other Items	3	minutes		

(SEE BACK)

Are you an ele	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 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 Room 103 of ti	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	





# DO NOT WISH TO SPEAK FORM

#### CITY OF MADISON

Registratio	n Statement	COMMITTEE	ouncil	
Please Print  Agenda No. 5+	6	PLEASE  Name  Address	PRINT NAME CLE KAREN TER 6121 Frederic MADISON	onde
Please check one	7.	AND	Please chec	k:
Support			Do not	wish to speak
<b>Oppose</b>			•	
Neither Support Nor Oppose				
At this meeting are you reflected "no," So of who you represent and	STOP; you need not co	omplete the rest c	other than yourself:  of this form. If you answ	Yes No vered "yes," provide the name
Name, address and telepl	hone number of each p	person or organiza	ation you are representi	ng:
Are you being paid for yo	our representation?			Yes No
Are you appearing as par (If you answered "no," S question.)				Yes No No ered "yes," go on to the next
In	ublic Hearing (Commo formation Hearing ther Items	3 1	ninutes	

(SEE BACK)

Are you an ele other government	ected 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 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.	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	Signature	
	Print Name	



Date:	17/11/12	

# DO NOT WISH TO SPEAK FORM

#### CITY OF MADISON

Registrat	ion Statement -	COMMITTEE	uncil	
Please Print		PLEASE F	PRINT NAME CLEA	RLY
Agenda No. <u>5-/</u>	eanetriculurirery	Name _/	Suddy Brinkinai, 149 North Stav Madison, Wi	9 Dr. 434 53718
Please check o	ne:	AND	Please check	<b>₹</b> :
Support Oppose			Do not v	wish to speak
At this meeting are you (If you answered "no, of who you represent to	" STOP; you need no and go on to the next	anization or a person of complete the rest of question.)	•	Yes No No provide the name
Are you being paid for Are you appearing as J (If you answered "no, question.)	part of your other paid	d duties for this person	<u> </u>	Yes No Yes No red "yes," go on to the next
Speaking Limits:	Information Hearing	nmon Council)5 m 	inutes	

(SEE BACK)

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, <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.	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: 12/11/12

# DO NOT WISH TO SPEAK FORM

Registra	tion Statement -	Common Committee	ouncil	
Please Print		PLEASE	PRINT NAME CLEARLY	,
Agenda No5		Name	734 Nort Madison	n 4 Star Dr
Please check o	ne:	AND	Please check:	
Support Oppose	·		Do not wisl	h to speak
Neither S	Support Nor Op	pose		
(If you answered "no of who you represent	and go on to the next q	t complete the rest o	other than yourself:   f this form. If you answered '  tion you are representing:	Yes No "yes," provide the name
Are you being paid fo	r your representation?			Yes No
	part of your other paid "STOP; you need not		n or organization?   f this form. If you answered '	Yes No No yes," go on to the next
Speaking Limits:	Public Hearing (Com Information Hearing. Other Items	3 1	ninutes	

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, 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.)	
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?	
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.)	
Signature Print Name	



Date:	12-	1/-	12

# DO NOT WISH TO SPEAK FORM

#### CITY OF MADISON

Registration Stateme	nt - Common Council
Please Print	DUTACE DOINT NAREE OF EADIV
Agenda No. 5 (Grocery)	Name Kristina Fatke  Address 602 Aprille Way  Madison
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor	Oppose
(If you answered "no," STOP; you need of who you represent and go on to the re-	organization or a person other than yourself: Yes No ed not complete the rest of this form. If you answered "yes," provide the name next question.)  If each person or organization you are representing:
Are you being paid for your representat	
	paid duties for this person or organization? Yes No d not complete the rest of this form. If you answered "yes," go on to the next
Information Hea	Common Council) 5 minutes  ring

(SEE BACK)

Are you an el	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, 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 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 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	Signature
	Print Name



# DO NOT WISH TO SPEAK FORM

#### CITY OF MADISON

Registration Statement	- Common Council
Please Print	PLEASE PRINT NAME CLEARLY
Agenda No. 5 +6	Name I VOY A. Nye  Address 6202 Dominion Dr  Madison WI 53718
Please check one:	AND Please check:
Support	Do not wish to speak
Oppose	
Neither Support Nor O	ppose
of who you represent and go on to the next	ot complete the rest 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.)	d duties for this person or organization? Yes No ot complete the rest of this form. If you answered "yes," go on to the next
Information Hearing	mmon Council)5 minutes g3 minutes3 minutes

(SEE BACK)