Date:	<u> </u>	36	//0

You must register before the ALRC considers your item.

Agenda No	Name SSH HURLEY  Address 8152 BLAKTON RD.  MADIGN, WF 53719
Please check the appropriate boxes:	
(If you answered "no," STOP; you ne question.)	Oppose  Wish to speak Do not wish to speak Available to answer questions  or a person other than yourself:  Wes No  need not complete the rest of this form. If you answered "yes," go on to the next of each person or organization you are representing:
rame, address and telephone nameer	of outsit person of organization you are representing.
Are you being paid for your representa	tion? Yes No
Are you appearing as part of your othe (If you answered "no," STOP; you ne question.)	r paid duties for this person or organization? Yes No ed not complete the rest of this form. If you answered "yes," go on to the next
	aring5 minutes

		elected official who is appearing solely on behalf of your office or for your municipality or other al 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 yo that:	u are b	eing paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

Date:	1	-26	• <u> </u>	2

You must register before the ALRC considers your item.

Agenda No Required – Can be on registration table	obtained from agenda	Name Address	Bernard 3312 Mo madiso	Kemper nroe ST n WIS:	
Please check the ap	propriate boxes:	* .			
Support Wish to Do not y Availab	speak wish to speak le to answer questions		Oppose Wish to sp Do not wis Available	eak sh to speak to answer questions	
(If you answered "n question.)	you representing an organize, "STOP; you need not conceed not conc	omplete the res	t of this form. If you an	swefed "yes," go on	
Gus	Paras 60	8-444-	0804		
Are you being paid	for your representation?			☐ Yes ☐	Го
Are you appearing a (If you answered "n question.)	s part of your other paid du o, "STOP; you need not co	ties for this per complete the res	rson or organization? t of this form. If you an.	Yes N swered "yes," go on	
Speaking Limits:	Public Hearing Information Hearing Other Items	•••••	5 minutes		

	ou an e nmental	elected official who is appearing solely on behalf of your office or for your municipality or other 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 bei	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes No
	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you Office	answer at Roon	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's n 103 of the City-County Building, Madison, for more information.)
Date _	11 -2	26.17 Signature Bernard A. Kemper

Date: 11/26/2017

# City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

Agenda No Required – Can be on registration table	obtained from agenda	Name	Victor 249 m Gerona	Villa eador , W.E	CVEZ Uside K
Please check the app	propriate boxes:	$\mathcal{M}$	Oppose		
☐ Wish to ☐ Do not y	speak wish to speak le to answer questions	7	<b>Oppose</b> ☐ Wish to spe ☐ Do not wish ☐ Available to	ak n to speak o answer ques	stions
(If you answered "n question.)	you representing an organization," STOP; you need not contected the second seco	mplete the rest of th	iis form. If you ans		□ No ' go on to the next
Are you being paid	for your representation?			Yes	No
Are you appearing a (If you answered "n question.)	s part of your other paid dut o, "STOP; you need not con	ies for this person o mplete the rest of th	r organization? is form. If you ans	Yes wered "yes,"	No go on to the next
Speaking Limits:	Public HearingInformation Hearing	5 min	utes		

	you an ernmenta		appearing solely	y on behalf of your office	or for your mur Yes	nicipality or other
		ered "yes" to the question you answered "no" to the		eed not complete the rest of to the next question.)	this form, except i	that you must sign
If yo that:		eing paid for your represe	entation, or if yo	our appearance is part of o	ther paid duties, d	lo you understand
	1.	Before you engage in l with the City Clerk?	obbying as a lo	bbyist, you or your princip	al must file an aut	horization No
	2.	Your principal is not pwith the City Clerk?	permitted to au	thorize you to lobby unles	s the principal is Yes	registered No
	3.		er), the principa	more than \$500 for lobbying a must file expense statements year?		
				ns, please call the City Cle son, for more information.)		go to the Clerk's
Date	11/8	26/2012	Signature Print Name	Wistor	Villacre	7

Date: 11/26/2017

# City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

Agenda No Required – Can be o on registration table.	btained from agenda	Name Address	GUS PAVE 2023tate MADISON,		763
(If you answered "no question.)	ropriate boxes:  peak ish to speak to answer questions ou representing an organizati , "STOP; you need not comp	olele the res	si oj inis jorm. 1j you un	swered yes,	ions  The ode of  No  St  go on to the next
Are you appearing as	or your representation?  part of your other paid duties  "STOP; you need not comp	s for this pe lete the res	rson or organization? t of this form. If you an	☐ Yes ☐ Yes swered "yes,"	□ No □ No go on to the next
Speaking Limits:	Public Hearing	•••••	5 minutes		

Are you an egovernmental	elected official who is appearing solely on behalf of your office or for your municipality or other body?
(If you answer	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	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
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3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If you answer Office at Roon	red "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's in 103 of the City-County Building, Madison, for more information.)
Date (( 2	6 (2012. Signature 60) Paren
•	Print Name 605 Paras

Date:	11-2	6-1	12	·
Date:				

You must register before the ALRC considers your item.

Agenda No.  Required – Can be obtained from agenda on registration table.	Name 1 homas De Quettro  Address 13821 Relived 5+  Pulover, mn 55304
Please check the appropriate boxes:	
Support  Wish to speak Do not wish to speak Available to answer questions	Oppose  Wish to speak  Do not wish to speak  Available to answer questions
question.)	ot complete the rest of this form. If you answered "yes," go on to the next
Name, address and telephone number of each	ch person or organization you are representing:
·	
Are you being paid for your representation?	☐ Yes
Are you appearing as part of your other paid (If you answered "no," STOP; you need no question.)	duties for this person or organization?  Yes No to complete the rest of this form. If you answered "yes," go on to the next
	5 minutes 5 minutes

		elected official who is appearing solely on behalf of your office or for your municipality or other al 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 yo that:	u are b	eing paid for your representation, or if your appearance is part of other paid duties, do you understand
	1.	Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk?
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	3.	If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
(If yo Office	u answ e at Roc	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's om 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

Date: //- 26-12

# City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

Agenda No.  Required – Can be on registration table	obtained from agenda e.	Name Rose My Address W W W	try LEE
	NEITHER T	Do not	o speak t wish to speak ble to answer questions
(If you answered "n question.)	oo," <b>STOP;</b> you need not con	ation or a person other than yours implete the rest of this form. If yours	u answered "yes," go on to the next
		·	
Are you being paid	for your representation?	,	☐ Yes ☐ No
		ies for this person or organization inplete the rest of this form. If you	n? Yes No u answered "yes," go on to the next
Speaking Limits:	Public HearingInformation Hearing Other Items	5 minutes	

Are you a governmer	n elected official who is appearing solely on behalf of your office or for your municipality or other tal body?
	wered "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign 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, do you understand
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	wered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's nom 103 of the City-County Building, Madison, for more information.)
Date	Signature
	Print Name

	-77/		1	
Date:		26	//	1
	7		<del>, , , , , , , , , , , , , , , , , , , </del>	

You must register before the ALRC considers your item.

Agenda No		Name	- C C	1~7	W+1,	) TEH.	ses E	10.4
Required – Can be obtained on registration table.	from agenda	Address	49 Mc	01 B.	AN 1-	(C7100	SKS E	Marianeza.
Please check the appropriate	boxes:	٠.						
Support  Wish to speak  Do not wish to sp  Available to answ				Do no	to speak ot wish to		stions	
At this meeting are you repres (If you answered "no," STOP question.)	senting an organization specification senting an organization of senting an organization senting an organization of senting an organization senting an organization of senting and senting an organization of senting and senting an organization of senting and senting an organization of senting an organization of senting and senting an organization of senting and senting and senting an organization of senting and senting an organization of senting and senting and senting and senting an organization of senting and senting and senting and senting and senting an organization of senting and senting and senting and senting an organization of senting and senting and senting and senting and senting an organization of senting and senting and senting an organization of senting an organization of senting an organization of senting and senting an organization of senting an organization of senting and senting an organization o	n or a perso lete the res	on other t of this	r than your form. If yo	self: ou answe	☐ Yes red "yes,'	No go dn to i	the next
Name, address and telephone	number of each person	n or organi	zation y	ou are rep	resenting	;:		
					•			
					31-70			
Are you being paid for your re	presentation?					Yes	No	
Are you appearing as part of you answered "no," STOP, question.)	our other paid duties f	or this pers	son or o of this	rganization form. If yo	1? u answer	Yes ed "yes,"	□ No go on to th	ne next
	Hearingtion Hearing				·			

Are y	ou an nmenta	elected official who is appearing solely on behalf of your office or for your municipality or other lbody?
(If you	u answe orm. 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 that:	are be	ing paid for your representation, or if your appearance is part of other paid duties, do you understand
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(If you Office	ı answe at Roo	ered "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's m 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name

Date: 1/20/12

# City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

(	2	Name	Alex Ade	Man	Name of the Control o
Agenda No	<u> </u>	Address	ME Gov	hanst	41
Required – Can be ob on registration table.	tained from agenda		Medison	UI	53703
Please check the appro	opriate boxes:				
	peak sh to speak to answer questions		Oppose Wish to spe Do not wish Available to		itions
(If you answered "no, question.)	u representing an organizat "STOP; you need not com ephone number of each per	plete the rest o	of this form. If you ans	wered ''yes,'	No go on to the next
Are you being paid for	your representation?			Yes	☐ No
Are you appearing as partial (If you answered "no, question.)	oart of your other paid dutien "STOP; you need not com	es for this perso plete the rest o	on or organization? f this form. If you ans	☐ Yes wered "yes,"	☐ No go on to the next
Speaking Limits:	Public HearingInformation Hearing				

Are you		ected official who is appearing solely on behalf of your office or for your municipality or other body?
, , ,		ed "yes" to the question, STOP. You need not complete the rest of this form, except that you must sign u answered "no" to the question, go on to the next question.)
If you a that:	ire bein	ng paid for your representation, or if your appearance is part of other paid duties, do you understand
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2	2.	Your principal is not permitted to authorize you to lobby unless the principal is registered with the City Clerk?  Yes No
•		If your principal spends or will owe more than \$500 for lobbying services in any reporting period (calendar quarter), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year?
		ed "no" to any of the last three questions, please call the City Clerk at 266-4601 or go to the Clerk's 103 of the City-County Building, Madison, for more information.)
Date		Signature
		Print Name