Date: 6/18/14

City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

PLEASE PRINT CLEARLY

Agenda 110.	obtained from agenda e.	Name	Tori Mitchell 112 King St.	
			Oppose Wish to speak Do not wish to speak Available to answer que	stions
At this meeting are	you representing an orga	nization or a person oth	er than yourself:	
No-STOP-yo	u are done with this form			
Yes - go on to th	ne next question			
Name, address and t	telephone number of each	n person or organization	you are representing:	
		And the second s		· · · · · · · · · · · · · · · · · · ·
Are you being paid for your representation?			Yes	□ No
Are you appearing a	s part of your other paid	duties for this person or	organization?	
☐ No – STOP - you	ı are done with this form			
Yes - go on to the	e next question			
Speaking Limits:		5 mini	utes	

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Are y gover	ou an	elected official who is appearing solely on behalf of your office or for your municipality or other
(If you this fo	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	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.	Your principal must file expense statements with the City Clerk for the remainder of the calendar year regardless of the amount spent on lobbying. Yes No
(If yoı Office	u answe 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(