Date:	6/18	3/14

City of Madison Registration Statement – Alcohol License Review Committee

You must register before the ALRC considers your item.

PLEASE PRINT CLEARLY

Agenda No Required – Can be on registration table	obtained from agenda	Name Address 64	fu Wilson 116 Eproeder Rd 1dison Wi 53711
	,		Oppose Wish to speak Do not wish to speak Available to answer questions
☐ Yes - go on to th	you representing an organiz u are done with this form e next question elephone number of each p	·	
name, address and t	erephone number of each p	orson or organization	
•	or your representation?	ties for this person or	Yes No
No – STOP - you	are done with this form next question		
Speaking Limits:	Public Hearing Information Hearing		utes

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Are yo govern	ou an e mental	elected official who is appearing solely on behalf of your office or for your municipality or other Yes No
(If you this for	answer m. 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 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?
	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.
(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 m 103 of the City-County Building, Madison, for more information.)
Date _		Signature
		Print Name (