Complete this form if you wish to speak before the Board. If you wish to submit written comments and have them entered into the minutes record, please complete and give to the Secretary.

CITY OF MADISON		
Registration Statement	BOARD OF PUBLIC WORKS	
Name The Verne Theis	DATE 4 5 17	
Address 5821 Mineral Ptild	ITEM NO. 4 ON AGENDA	
Verona Co.		
[] Support 内Oppose [] See Written comments for the record	MWish to Speak [] Do Not Wish to Speak	
Questions		
At this meeting are you representing an organization or a person other than yourself:	[]Yes [A] No	
If you answered No – you need not complete the remainder of this form.		
<u>If you answered Yes</u> to above question please complete:		
Name, Address and phone number of each person or organization you are presenting	today:	
Are you being Paid for your representation?	 []yes [∛]No	
Are you appearing as part of your other paid duties for this person or organiz		
If you answered YES – continue – on other side please	[] Yes [/] No	
PLEASE SEE OTHER SIDE		
into the minutes record, please complete and give to the Secretary. CITY OF MADISON		
Registration Statement	BOARD OF PUBLIC WORKS	
Name Krista NECHVATAI	DATE 4/5/17	
Address 8280 Midtown Rd	ITEM NO. 4 ON AGENDA	
Madron, Wi. 53719	TEM NO.	
[] Support [] Oppose	[X](Wish to Speak	
[] See Written comments for the record	[] Do Not Wish to Speak	
[] See Written comments for the record We are Questions Out of Middleton residents, At this meeting are you representing an organization or a person other than yourself: If you answered No – you need not complete the remainder of this form. If you answered Yes to above question please complete:	[] Available to Answer	
Documents State Verono	Assessment	
At this meeting are you representing an organization or a person other than yourself:	diferred[]Yes () No	
If you answered No – you need not complete the remainder of this form.	annexed?	
Name, Address and phone number of each person or organization you are presenting	today:	
Are you being Paid for your representation?	[] yes [] No	
Are you appearing as part of your other paid duties for this person or organize	[] Yes [] No	
If you answered YES – continue – on other side please		

PLEASE SEE OTHER SIDE

Complete this form if you wish to speak before the Board. If you wish to submit written comments and have them entered into the minutes record, please complete and give to the Secretary.

CITY OF MADISON			
Registration Statement	BOARD OF PUBLIC WORKS	BOARD OF PUBLIC WORKS	
Name Randy Theis Address 910/ Mineral f	Ad DATE 4 5 2017 ITEM NO. 4 ON AGEN		
[] Support [] Oppose [] See Written comments for the rec	[∮] Wish to Speak ord [] Do Not Wish to Speak		
Questions	· · · · · · · · · · · · · · · · · · ·	iswei	
At this meeting are you representing an organizat	7 y		
<u>If you answered Yes</u> to above question please cor Name, Address and phone number of each person			
Are you being Paid for your representation?	[] yes [/] No		
Are you appearing as part of your other paid	luties for this person or organization?		
If you answered YES – continue – on other s	le please LEASE SEE OTHER SIDE		