

OFFICE OF THE CITY CLERK
CITY OF MILWAUKEE

REGISTRATION FORM

Committee: Special Zoning, Neighborhoods and Development Committee Meeting.

Date: 1/13/11

Regarding: File 100877- Resolution relating to a certificate of appropriateness for various parcels in the East Side Commercial District.

Name: Gail Fitch

Your Name Phonetically (If you wish to speak): _____

Address: _____

City: _____ **ZIP Code:** _____

Organization: (if any): _____

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"not totally clear
nothing will be saved -
slide back the tower"

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Name: Pamela Frautschu

Your Name Phonetically (If you wish to speak): Frau chee

Address: 3430 E Newberry

City: _____ **ZIP Code:** 53211

Organization: (if any): self

E-Mail Address: phfonkel@juno.com
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak ~~(maybe)~~

☐ I do not wish to speak

"pleased with developers design -
would be in favor of redesign
to allow setback"

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Name: DAVID UHLEIN, JR.

Your Name Phonetically (If you wish to speak): DAVE ELINE

Address: 322 E. MICHIGAN ST. #400

City: MILWAUKEE WI **ZIP Code:** 53202

Organization: (if any): SELF

E-Mail Address: daveuhlein-wilson.com
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"Preservation is important
design should be sensitive -
I do want a hotel there
the tower is the alien element

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Name: Mike Money

Your Name Phonetically (If you wish to speak): _____

Address: W884 Village Lane Rd.

City: Sullivan **ZIP Code:** 53178

Organization: (if any): Sheet Metal Workers L.U. 18

E-Mail Address: mmoney@smwlu18.org
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"He left."

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Name: Marcus Smith

Your Name Phonetically (If you wish to speak): N/A

Address: 1349 N. 22nd Apt 203

City: Milwaukee, WI **ZIP Code:** 53205

Organization: (if any): _____

E-Mail Address: MarcusSmith89@yahoo.com

(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"WE NEED JOBS"

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Name: CLARENCE ROYSTON

Your Name Phonetically (If you wish to speak): YES JOBS

Address: 103 EAST ~~WISCONSIN~~ FAIRMOUNT

City: WHITE FISH BAY **ZIP Code:** 53217

Organization: (if any): MICAH

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"WE NEED JOBS"

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Name: MERRIE M. FELDER

Your Name Phonetically (If you wish to speak): _____

Address: _____

City: MILWAUKEE **ZIP Code:** 53210

Organization: (if any): NBUP - NATIONAL BLACK UNITED FRONT

E-Mail Address: MERRIEFELDER@MSN.COM
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"I support this - need jobs"

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Name: Peter J. Hamrahan

Your Name Phonetically (If you wish to speak): _____

Address: 1014 W. Astor # 33

City: Mi. **ZIP Code:** _____

Organization: (if any): SEIU Local 1

E-Mail Address: hamrahap@seiu1.org
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"SEIU - Local 1"
over 1,000 people - he represents
our members in need of jobs"

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Name: KERI KRAEMER

Your Name Phonetically (If you wish to speak): _____

Address: 3303 S. 103rd Street

City: Milwaukee **ZIP Code:** 53222

Organization: (if any): Building Advantage

E-Mail Address: KKraemer@buildingadvantage.org
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

" CLMC - LABON REP. 20,000 MEMBERS
30% UNEMPLOYMENT "

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Name: RICHARD GUTENKAMP

Your Name Phonetically (If you wish to speak): _____

Address: 3203 S 103TH

City: MIL **ZIP Code:** 53227

Organization: (if any): IBEW LOCAL 494

E-Mail Address: rick@ibew494.com

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

He Left.

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Name: Steve BAHs

Your Name Phonetically (If you wish to speak): BAHS

Address: _____

City: _____ **ZIP Code:** _____

Organization: (if any): MMAC

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"SUPPORTS PROJECT"

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Name: Tom Dixon

Your Name Phonetically (If you wish to speak): Tom Dixon

Address: 763 N BROADWAY

City: Milwaukee **ZIP Code:** 53202

Organization: (if any): Schwartz-Kasten

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"BORN & RAISED IN MILW
FAMILY BUSINESS SINCE 1899
EXCITING PROJECT"

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Name: Dennis Klein

Your Name Phonetically (If you wish to speak): _____

Address: 4425 W. Mitchell

City: W. Milwaukee **ZIP Code:** 53214

Organization: (if any): KBS Construction

E-Mail Address: d.klein@kbsconstruction.com

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☐ I do not wish to speak

" 08) 300 employees
09) 260 employees.
10) Less than 100

NOTHING TO SAVE IN

\$2.4 Million more it would cost "

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Name: ALI KOPYT

Your Name Phonetically (If you wish to speak): ALLIE KO-PIT

Address: 1006 E AVER AVE

City: MILWAUKEE **ZIP Code:** WI

Organization: (if any): MILWAUKEE PRESERVATION ALLIANCE

E-Mail Address: alicquarumarchitects.com

(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"SUPPORTS APC"

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Name: Jim Villa

Your Name Phonetically (If you wish to speak): _____

Address: 12300 W. Center St.

City: MILWAUKEE **ZIP Code:** 53222

Organization: (if any): Commercial Association of REALTORS WISCONSIN

E-Mail Address: Jim@carw.com

(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"Project should be embraced"

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Name: MARNE STUCK

Your Name Phonetically (If you wish to speak): _____

Address: 12300 W Center St

City: Milw **ZIP Code:** 53222

Organization: (if any): Gr. MKE Assoc. Realtors

E-Mail Address: mjs@gmar.wis
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

"SUPPORTS MARION"

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Name: Anna-Marie Opge.north

Your Name Phonetically (If you wish to speak): Opge.north

Address: 1200 E AVER

City: Milwaukee WI **ZIP Code:** 53212

Organization: (if any): Historic Milwaukee, Inc.

E-Mail Address: anna@historicmilwaukee.org
(Unless specifically requested not to, we will be contacting you via e-mail.)

☒ I wish to speak

☐ I do not wish to speak

I MAMMANT ISSUES
SHOULD NOT BE PRESERVATION AGAINST JOBS.

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Name: Scott Revolinski

Your Name Phonetically (If you wish to speak): _____

Address: 2000 W. Green Brook Rd

City: Milwaukee WI **ZIP Code:** 53217

Organization: (if any): _____

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: Patti Stevens

Your Name Phonetically (If you wish to speak): _____

Address: 800 E. Henry Clay #104

City: WHITEFISH BAY **ZIP Code:** 53217

Organization: (if any): _____

E-Mail Address: PStevens@rfpcommercial.com
(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: Michael Levine

Your Name Phonetically (If you wish to speak): _____

Address: 111 E Wisconsin Ave #1710

City: Milwaukee WI **ZIP Code:** 53202

Organization: (if any): MBI Properties

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

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Name: EARL PHILLIPS

Your Name Phonetically (If you wish to speak): _____

Address: W271 N2033 FIELDHACK DR

City: MILWAUKEE **ZIP Code:** 53072

Organization: (if any): SHEET METAL WORKER #18

E-Mail Address: EPHILLIPS@SMWLU18.ORG

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: MICHAEL HATCH

Your Name Phonetically (If you wish to speak): _____

Address: 777 E. WISCONSIN AVE #3600

City: MILWAUKEE, WI **ZIP Code:** 53202

Organization: (if any): FOLEY & LARDNER LLP

E-Mail Address: MHATCH@FOLEY.COM

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: HUBERT W SWOFFORD

Your Name Phonetically (If you wish to speak): _____

Address: 1011 S 5RD ST

City: MILWAUKEE **ZIP Code:** 53204

Organization: (if any): _____

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

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Name: Karlon Scott

Your Name Phonetically (If you wish to speak): Karlon Scott

Address: 1512 N. Warren Ave

City: Milwaukee **ZIP Code:** 53202

Organization: (if any): Good jobs, liveable neighborhood

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: ANDRE ROGERS

Your Name Phonetically (If you wish to speak): _____

Address: 1509 N. 39ST

City: MILW **ZIP Code:** 53208

Organization: (if any): GOOD JOBS LIVABLE NEIGHBORHOODS

E-Mail Address: B16AUMP1@AOL.COM

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: Antoinette Smith

Your Name Phonetically (If you wish to speak): _____

Address: 985 North 24 street

City: Milwaukee **ZIP Code:** 53233

Organization: (if any): _____

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: JOEL HILL

Your Name Phonetically (If you wish to speak): _____

Address: 3014 N 24th

City: MILWAUKEE WI **ZIP Code:** 53206

Organization: (if any): _____

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

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Name: Sara Mann

Your Name Phonetically (If you wish to speak): _____

Address: 260 E Highland

City: Milwaukee **ZIP Code:** 53207

Organization: (if any): Good Jobs Livable Neighborhoods

E-Mail Address: Sara.Mann@hotmail.com

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: Dave Somerscales

Your Name Phonetically (If you wish to speak): _____

Address: 721 E. Chambers St.

City: Milwaukee **ZIP Code:** 53212

Organization: (if any): _____

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: Branden Lane

Your Name Phonetically (If you wish to speak): _____

Address: 260 E. Highland Ave

City: Milwaukee **ZIP Code:** 53202

Organization: (if any): Good Jobs / Liveable Neighborhoods

E-Mail Address: lanebranden@gmail.com

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: ZORAN MARKOVICH

Your Name Phonetically (If you wish to speak): _____

Address: 1747 S. CARRIAGE LANE

City: NEW BERLIN **ZIP Code:** 53151

Organization: (if any): CARPENTERS UNION

E-Mail Address: _____

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak

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Name: ERIC STROM

Your Name Phonetically (If you wish to speak): _____

Address: 7030 W KK RIV PKWY

City: MILWAUKEE **ZIP Code:** 53219

Organization: (if any): CARPENTERS UNION

E-Mail Address: estrom@carpentersunion.org

(Unless specifically requested not to, we will be contacting you via e-mail.)

☐ I wish to speak

☒ I do not wish to speak