

OFFICE OF THE CITY CLERK
CITY OF MILWAUKEE

REGISTRATION FORM

Committee: Finance & Personnel Committee

Date: Friday, March 20, 2009

Regarding:

080218:

A Substitute ordinance relating to the participation of city residents in public works contracts, requirements for developers receiving direct financial assistance from the city, and local business enterprise contracting standards.

Name: MIKE FARDY

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

Address: 839 N. JEFFERSON ST.

City: MILWAUKEE ZIP Code: 53202

Organization: (if any): INLAND COMPANIES

E-Mail Address: MFARDY@INLANDCOMPANIES.COM

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

I support this measure

I wish to speak

I don't support this measure

I do not wish to speak

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Date: Friday, March 20, 2009

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Name: Berry Mandel

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

Address: 301 E Eric St

City: Milwaukee ZIP Code: 53202

Organization: (if any): Mandel Group, Inc

E-Mail Address: bmandel@mandelgroup.com

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

I support this measure

I wish to speak

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Name: Richard Lincoln

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

Address: 301 E Erie St

City: Milwaukee **ZIP Code:** 53202

Organization: (if any): Mandel Group, Inc

E-Mail Address: r.lincoln@mandelgroup.com

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

I support this measure

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Name: STEVE BAAS

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

Address: _____

City: _____ ZIP Code: _____

Organization: (if any): MMAAC

E-Mail Address: _____

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

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Name: Richard W. Wanta

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

Address: 2835 N. Mayfair Rd, Suite 02

City: Milwaukee ZIP Code: 53202

Organization: (if any): Wisc. Underground Contractors Assn

E-Mail Address: r.wanta@wuca.org

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

<input type="checkbox"/> I support this measure	<input checked="" type="checkbox"/> I wish to speak
<input checked="" type="checkbox"/> I don't support this measure	<input type="checkbox"/> I do not wish to speak

- Ralph
Hollman
- Carl
Cross

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Name: Francisco Sanchez

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

Address: 2066 S Laylor Blvd

City: Milwaukee **ZIP Code:** 53215

Organization: (if any): _____

E-Mail Address: _____

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

I support this measure

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Name: CARLA CROSS

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

Address: 1815 N. 4th St.

City: Milwaukee ZIP Code: 53212

Organization: (if any): _____

E-Mail Address: ccross@cross-management.com

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

I support this measure

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Name: LAMONTE HARRIS

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

Address: _____

City: MILWAUKEE **ZIP Code:** _____

Organization: (if any): _____

E-Mail Address: _____

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Name: Jim Villa

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

Address: 12300 W. Center

City: Milw **ZIP Code:** 53222

Organization: (if any): Commercial REALTORS Association

E-Mail Address: Jim@carw.com

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

I support this measure

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Name: Marne Stück

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

Address: 12300 W. Center

City: Milwaukee ZIP Code: 53222

Organization: (if any): Greater Milwaukee Assoc. of Realtors

E-Mail Address: MJS@qmar.wis

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Name: Stewart Wangard

Your Name Phonetically (If you wish to speak): Sto Wangard

Address: 1200 N. Mayfair Rd.

City: Milw **ZIP Code:** 53226

Organization: (if any): WAiOP - WANGARD PARTNERS

E-Mail Address: SWANGARD@WANGARD.COM

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

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Name: RANDY NASS

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

Address: 193 S. 2ND ST.

City: MILW ZIP Code: 53204

Organization: (if any): NEXT DEVRM

E-Mail Address: _____

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

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Name: BLAIR WILLIAMS

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

Address: 2237 N LAKE DR.

City: MILWAUKEE ZIP Code: 53202

Organization: (if any): WIRED Properties

E-Mail Address: blair@wiredproperties.com

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

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Name: MR. KALAN R. HAYWOOD

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

Address: 200 W NORTH AVE

City: MILWAUKEE **ZIP Code:** 53205

Organization: (if any): VANGARD

E-Mail Address: KALAN@VANGARD

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Name:

Charles Krainer

Your Name Phonetically (If you wish to speak):

Address:

302 NW Summit Ave

City:

Milwaukee, WI

ZIP Code:

53211

Organization: (if any):

TMB Develop Co. - PRH Redevelopment LLC

E-Mail Address:

sasavibike@aol.com

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

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Name: Bob SHEEHY

Your Name Phonetically (If you wish to speak): She he

Address: 601 E. Ogden Ave

City: MILWAUKEE **ZIP Code:** 53202

Organization: (if any): ICSC - International Council of Shopping Centers

E-Mail Address: bSheehy@KVGbuilding.com

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

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Name: Philip Schultz

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

Address: 3900 S. Prairie Hill Lane

City: Wauwatosa Greenfield ZIP Code: WI

Organization: (if any): Horizon Development

E-Mail Address: p.schultz@horizondbm.com

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

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