

Assembly Hearing Slip

(Please print plainly)

Date: Feb. 16, 2000

Bill No. AB665

Of Subject

(Name) Rep. M. Witt

(Street Address or Route Number) P.O. Box 112

(City & Zip Code) Lowell, WI 53014

(Representing) Wa. Dist

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

Please return this slip to a messenger promptly.

Assembly Sergeant at Arms
Room 411 West
State Capitol
Madison, WI 53702

Assembly Hearing Slip

(Please print plainly)

Date: 02-16-00

Bill No. AB665

Of Subject

(Name) Bill Tyson

(Street Address or Route Number) N 10600 PLYMOUTH HEIGHTS CT.

(City & Zip Code) GAITHERSBURG, MD 20878

(Representing) Calumet County Sheriff's Dept

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
Madison, WI 53702

Assembly Hearing Slip

(Please print plainly)

Date: 02/16/00

Bill No. AB665

Of Subject

(Name) Shelly Tyson

(Street Address or Route Number) N 10600 PLYMOUTH HTS.

(City & Zip Code) GAITHERSBURG, MD 20878

(Representing)

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
Madison, WI 53702

Assembly Hearing Slip

(Please print plainly) 2-16-00

Date: AB 665

Bill No. _____

Of _____

Subject: JOHN SOBOTKA

(Name) RM 115 N HESTB

(Street Address or Route Number) _____

(City & Zip Code) DEPT. OF TRANS.

(Representing) _____

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
Madison, WI 53702

Assembly Hearing Slip

(Please print plainly)

Date: 02/16/00

Bill No. AB 665

Of _____

Subject: STEVEN C. BLEWEN

(Name) 210 POWER

(Street Address or Route Number) MADISON

(City & Zip Code) WISCONSIN POLICE ASSOC

(Representing) _____

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
Madison, WI 53702

Assembly Hearing Slip

(Please print plainly)

Date: Feb 16 2000

Bill No. 665

Of _____

Subject: DRINK DRIVING

(Name) Kenneth Moss

(Street Address or Route Number) 2551 220th Street

(City & Zip Code) Cedar WI 53227

(Representing) _____

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
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Assembly Hearing Slip

(Please print plainly)

Date: 2-16-2000

Bill No. AB 665

Of Subject Rep. Jeff Saxe

(Name) Rep. Jeff Saxe

(Street Address or Route Number)

(City & Zip Code)

(Representing)

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
Madison, WI 53702

Assembly Hearing Slip

(Please print plainly)

Date: 2-16-00

Bill No. AB 1405

Of Subject Sandra Gary Drevicki

(Name) Sandra Gary Drevicki

(Street Address or Route Number)

(City & Zip Code) 30th S. J. District

(Representing)

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
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Assembly Hearing Slip

(Please print plainly)

Date: 2/16/00

Bill No. AB 665

Of Subject COUNCIL ON LAW

(Name) ALICE PERRY

(Street Address or Route Number) 2100 PROCTOR DR

(City & Zip Code) GREEN BAY WI 54304

(Representing) WIS. TEACHER ASSN.

Speaking in favor:

Speaking against:

Registering in favor:

Registering against:

Speaking for information only:

Neither for nor against:

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State Capitol
Madison, WI 53702

Assembly Hearing Slip

(Please print plainly)

Date: 2-16-70

Bill No. AB665

Of
Subject _____

Norman D. Boyle
(Name)

P.O. Box 1001
(Street Address or Route Number)

Elkhart VT 53121
(City & Zip Code)

Whitcomb County District Attorney
(Representing)

Speaking *In favor*:

Speaking *against*:

Registering *In favor*:

Registering *against*:

Speaking for *Information only*:
Neither for nor *against*:

Please return this slip to a messenger promptly.

Assembly Sergeant at Arms
Room 411 West
State Capitol
Madison, VT 53702

Assembly Hearing Slip

(Please print plainly)

Date: 3-11-70

Bill No. AB 665

Of
Subject _____

Senator Peggy Rosenzweig
(Name)

(Street Address or Route Number)

(City & Zip Code)

(Representing)

Speaking *In favor*:

Speaking *against*:

Registering *In favor*:

Registering *against*:

Speaking for *Information only*:
Neither for nor *against*:

Please return this slip to a messenger promptly.

Assembly Sergeant at Arms
Room 411 West
State Capitol
Madison, VT 53702