

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 12/8/99
BILL NO. AB-521
OR
SUBJECT _____

Robert Seitz
(NAME)
566 S. Main St.
(Street Address or Route Number)

Monicelle WI 53520
(City and Zip Code)
Self
(Representing)

Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY.

Senate Sergeant-At-Arms
Room 109-LL One East Main
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 12/8/99
BILL NO. AB 521
OR
SUBJECT FIRST RESPONDER

MINDY ALLEN
(NAME)
11990 FIVE BUCK RD
(Street Address or Route Number)

MONROE WI 53566
(City and Zip Code)
Green County EMS Commission
(Representing)

Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

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Senate Sergeant-At-Arms
State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 12-8-1999
BILL NO. AB521
OR
SUBJECT CERTIFICATION OF FIRST RESPONDERS

ALAN RUTER
(NAME)
912 12th ST
(Street Address or Route Number)

MONROE WI 53566
(City and Zip Code)
MONROE FIRE DEPT
(Representing)

Speaking in Favor:
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Registering in Favor:
but not speaking:
Registering Against:
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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 12-8-99

BILL NO. AB-521

OR

SUBJECT

Don Huntford

(NAME)

21332 7 mile rd

(Street Address or Route Number)

Franksville, WI 53126

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

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Senate Sergeant-At-Arms
Room 109-L1 One East Main
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 12-8-99

BILL NO. 521

OR

SUBJECT

Stth Wend

(NAME)

3032 Mercury Ave

(Street Address or Route Number)

Earl Place WI 52703

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 12/8/99

BILL NO. AB 521

OR

SUBJECT

Sen. Quincy Robson

(NAME)

(Street Address or Route Number)

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Senate Sergeant-At-Arms
State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 12/08/99

BILL NO. AB 521

OR
SUBJECT _____

Nan Turner

(NAME)

202 Arbor Hill Dr

(Street Address or Route Number)

Janesville 53541

(City and Zip Code)

Bureau EMS + IP DHE

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Senate Sergeant-At-Arms
Room 109-LL One East Main
P.O.Box 7882
Madison, WI 53707-7882

Vote Record

**Senate Committee on Health, Utilities, Veterans and
Military Affairs**

Date: Dec 15, 1999 Executive Session Public Hearing
Bill Number: AB 521
Moved by: Breske Seconded by: Robson
Motion: Concurrence

<u>Committee Member</u>	<u>Aye</u>	<u>No</u>	<u>Absent</u>
Sen. Rodney Moen, Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Roger Breske	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Judy Robson	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Jon Erpenbach	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Brian Rude	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Gary Drzewiecki	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Robert Welch	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Totals:	<u>6</u>	<u>1</u>	<u>0</u>

Motion Carried Motion Failed