

**PLEASE COMPLETE AND SUBMIT THIS FORM
BEFORE THE START OF THE HEARING.**

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and may be provided to requesters under the public records laws, ss. 19.31 to 19.39, Wis. Stats.

State of Wisconsin
Department of Natural Resources

HEARING APPEARANCE
Form 8300-014 Rev. 4-10

PLEASE PRINT:

Date:	Do you wish to make an oral statement? (Check one) <input type="checkbox"/> Yes <input type="checkbox"/> No
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Name:	Telephone number (include area code): ()
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Street or route (mailing address):

City, State and zip code:

1. Representing (If you are the authorized representative of some other person or organization, identify who you represent and your title.):

2. Regarding rule proposals only: Small business representation -- Are you representing the interests of a small business as defined by s. 227.114, Wis. Stats., as "a business entity, including its affiliates, which is independently owned and operated and not dominant in its field, and which employs 25 or fewer full-time employees or which has a gross annual sales of less than \$5,000,000"?

Yes No

3. Comments:

4. Position:
(Check one) In support In opposition As interest may appear