Registration Report								
Report Ge	r 10/20/2022 11:10)						
Торіс	Webinar ID	Scheduled Time Durati		ation (r # Registered				
Executive C 998 2777 2252		10/13/2022 17:30	90	9				
Attendee Details								
First Name Last Name		Email	City	Phone				
Christophe Ott		chris@hsrail.org	Madison	617-470-5553				
Kathy	Kuntz	kuntz.kathryn@countyofdaneMadison 6		6087725452				
Richard	Harnish	rick@hsrail.org Chicago 773.		773.334.6758				
Sharron	Hubbard-Moyer	ssharron@sbcglobal.net	Madison	6083350542				
Amanda	Klinge	aklinge2015@gmail.com	Fitchburg	608-609-0622				
Justin	Giebel	justinlgiebel@gmail.com	Madison	608-387-3158				
Anthony	Gray	AJGray@aya.yale.edu	Madison	6083547122				
Michele	Doolan	Doolanmichele@gmail.com	Cross Plain: 608-335-7484					
ССВ	321 Conference Room rooms_ivjxpvnrqaeaprtmei8qja@countyofdane.com							

# Cancelled	
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Approvec # Denied 0 9 0

Registration Time	Approval SI What are y REQUIRED: REQUIRED: Do you wish to provi				
	10/11/2022 15:28	approved	he/him	In Person	YesContinue to the next questi
	10/12/2022 8:01	approved	she/her	Zoom	NoSTOP here and SUBMIT regised
	10/12/2022 14:48	approved		Zoom	YesContinue to the next questi
	10/12/2022 21:49	approved	She her	Zoom	NoSTOP here and SUBMIT regis
	10/13/2022 11:20	approved	she/her	In Person	NoSTOP here and SUBMIT regised
	10/13/2022 11:25	approved	he/him	In Person	YesContinue to the next questi
	10/13/2022 16:41	approved		Zoom	NoSTOP here and SUBMIT regis
	10/13/2022 17:16	approved	She/Her/H ₁ Zoom		YesContinue to the next question
	10/13/2022 17:30	approved			

Agenda ite Do you sup Do you wis Are you being paid to represent an organization?

D1: Munici SupportI do not wis Yes--You will need to fill out an additional form. Please provide your2022-Act-1 SupportI do not wis No

D1: Dane C Support I do not wis Yes--You will need to fill out an additional form. Please provide your stration form

J Neither sur Yes, I wish No

J Neither sur Yes, I wish No

stration form

on Yes, I wish No

email address below so that staff can email you the form.

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