Clear Form

REGISTRATION BEFORE COUNTY BOARD

DATE: 2022-03-03	Name: Eric Howland			
Item #/Petition/CUP # or Subject:	Municipality: Madison			
☐ Wish to Speak in Support☐ Wish to Register in Support	■ Wish to Speak in Opposition ■ Wish to Register in Opposition	Available for Information Only		
1. On this occasion, are you officially re (If you checked "NO" <u>STOP</u> ; you do not no	presenting an organization or a person of eed to complete the rest of the form. If you			
Name, address and telephone number of MOSES - WISDOM of PO Box 7031, Madison	of Madison	epresenting:		
COMMENTS:	<u> </u>			
2. Are you being paid for your representation?		YES • NO		
3. Are you an elected official who is	appearing solely on behalf of your of	ffice or for your municipality or		
other governmental body?(If you checked "YES" to the question, S go to the next question.)				
4. Has or will the person or organization	tion you represent spend more than	\$500 on county lobbying activities		
during the current reporting period?	(A reporting period is January to June,	or July to December.) ☐ YES ☐ NO		
5. Do you anticipate making more that	an two contacts with the County Boa	ard supervisors other than at public		
hearings or meetings?(Do not count contacts with the County E				
[If you checked "NO" to questions 4 and you do make more than 2 contacts at a lindicating such activity. You must also sinext question.].	ater date, you must then contact the Co	ounty Clerk's office to file a form		
6. If you answered "YES" to question spends more than \$500 during the cur				
with the County Clerk?	inty Clerk at 266-4121 or go to the Cler			
	rinted Name: Eric Howland			

Submit

Clear Form REGI	STRATION BEFORE COUNTY BOARD
DATE: 03/03/2022	Name: James Brigham
Item #/Petition/CUP # or Subject: Resolution 320	Municipality: Dane County Board
Wish to Speak in SupportWish to Register in Support	☐ Wish to Speak in Opposition ☐ Available for Information Only ☐ Wish to Register in Opposition
	y representing an organization or a person other than yourself? YES NO not need to complete the rest of the form. If you checked "YES" go to the next question.)
	er of each person or organization you are representing: s Association, PO Box 7532, Madison, WI 53707-7532
COMMENTS:	
2. Are you being paid for your re	presentation or appearing incidental to your other paid duties for this
-	STOP; you do not need to complete the rest of this form. If you checked "YES",
3. Are you an elected official who	is appearing solely on behalf of your office or for your municipality or
other governmental body?	n, STOP; you do not need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organ	ization you represent spend more than \$500 on county lobbying activities
during the current reporting period	d? (A reporting period is January to June, or July to December.) \square YES \square NO
5. Do you anticipate making more	than two contacts with the County Board supervisors other than at public
hearings or meetings?	nty Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts as	and 5 above, STOP ; you do not need to complete the rest of this form. However, it t a later date, you must then contact the County Clerk's office to file a form o sign this form. If you checked "YES" to either question at this time, go on to the
6. If you answered "YES" to questi spends more than \$500 during the	on 5, do you understand that if the person or organization you represent current reporting period, you must file a financial disclosure statement
(If you checked "NO" please call the	County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr., on.
Date: 03/03/2022	Signature:
	Printed Name: James Brigham

Submit

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Submit

REGISTRATION BEFORE COUNTY BOARD

DATE: _	3-3-2022	Name:	举	Momus H	chey
Item #/P	etition/CUP # or Subject:	Municipality:	nue	Mudison	
	Wish to Speak in Support	── Wish to Speak in €	Opposition) <u> </u>	
M	Wish to Register in Support	Wish to Register in	, .	■ Availa	ble for Information Only
	nis occasion, are you officially re checked "NO" <u>STOP</u> ; you do not no				
Name, a	ddress and telephone number o	f each person or organiz	ation you	are representing	:
No	STHA CENTRAL Stutes Regio	onal MUNICITOF (as	pentes,	115 W Mui	n St
	hudison, WI 5370?				
COMME	NTS:				
2. Are y	ou being paid for your repres	sentation or appearing	incidenta	l to your other	paid duties for this
person o	or organization?				YES NO
	necked "NO" to the question, <u>ST</u> next question.)	' <u>OP</u> ; you do not need to d	complete t	he rest of this fo	rm. If you checked "YES",
3. Are y	ou an elected official who is a	appearing solely on bel	half of yo	ur office or for y	our municipality or
	vernmental body? necked "YES" to the question, S				
	next question.)	TOP, you do not need to	complete	the rest of this it	Jilli. II you checked TES ,
4. Has	or will the person or organizat	tion you represent sper	nd more t	han \$500 on co	unty lobbying activities
during tl	he current reporting period?	(A reporting period is Jar	nuary to Ju	ine, or July to De	ecember.) YES W NO
5. Do y	ou anticipate making more the	an two contacts with th	e County	Board supervis	ors other than at public
	s or meetings?				
(Do not d	count contacts with the County E	3oard supervisor who rep	resents th	e district in whic	h you reside.)
you do m	necked "NO" to questions 4 and nake more than 2 contacts at a l g such activity. You must also si stion.].	ater date, you must then	contact th	e County Clerk's	s office to file a form
	answered "YES" to question more than \$500 during the cu				
with the	County Clerk?	•••••			YES NO
, .	necked "NO" please call the Cou oom 106A for more information.	inty Clerk at 266-4121 or	go to the	Clerk's office at	210 Martin Luther King Jr.,
Date:	3/7/7022 si	gnature:	M	LUROY	
	P	rinted Name:	us HILVI	cy	