Committee Name: ZLR Name: Larry Jenkins  DATE: 428/15 Municipality: Town af Blue Monds
DATE: 4/28/15 Municipality: Town of Blue Wounds
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10823
Wish to Speak in Support
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES D NO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:  Randally Amy Thompson (10086 Hwy1) MT Horebox, 1608-4  May of S, Thompson Resocable Trust 18114 Comquele Way 1608-244-57  Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? YES NO [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. You checked "NO," to the question, go on to the next question.]
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?   [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Print Name ANN SMKINS

Committee Name: ZLR Name: STEVEN M. QUERIN-SCHUTZ  DATE: APRIL 28, 2015 Municipality: TOWN DF COTTAGE GROVE
DATE: APRIL 28, 2015 Municipality: TOWN OF GITAGE GROVE
Petition/CUP #/Resolution/Ordinance Amendment/Subject: RI=201VE 10824
Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES DNO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:  TOHNNE B. SCHWIZ 2305 W. RIDGE RD, COTTAGE GRAVE, WI  608 839-4139  53527
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 04-28-15 Signature STEVEN M. Where Schutt

Committee Name: Name: Yatzy Breunig
DATE: 4/28 / 15 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Rezone 10824
☑ Wish to Speak in Support ☐ Wish to Speak in Opposition
☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
Name, address and telephone number of each person or organization you are representing:  Patsy Breunia 9103 Husy Rd Y Sauk City WI  393-8404
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4/28/15  Signature Patry Brewnig  Print Name Patry Brewnig

Committee Name: ZLR Name: Jonathan M Hillips
DATE: 4/28/15 Municipality: 3979 Mahoney Ro
Petition/CUP #/Resolution/Ordinance Amendment/Subject: /0827
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]  Name, address and telephone number of each person or organization you are representing:
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: Signature
Print Name

DATE: 9-25-15   Municipality:   Petition/CUP #/Resolution/Ordinance Amendment/Subject:   0 8 2 8	Committee Name:	Name:	lony	Kasper	
Wish to Speak in Support	· ·		/		
Registering in Support	Petition/CUP #/Resolution/Ordinanc	e Amendment/Subj	ect: 10 E	328	
Registering in Support	Mich to Check in Cumpart	Wigh to Speak in C	Innocition		988
No			350000	☐ Available for	Information Only
Comments:  2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?	[If you checked "NO," STOP; you need no Name, address and telephone number of	of complete the rest of to the rest of the	☐ N his form. If you anization you a	O checked "YES," go are representing:	on to the next question.]
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?		7. )			
other paid duties for this person or organization?	Comments:				
or for your municipality or other governmental body?	other paid duties for this person or of [If you checked "NO" to the question, STO	organization? OP; you need not comp		□ YE	S A NO
On county lobbying activities during the current reporting period?	or for your municipality or other gov [If you checked "YES," to the question, <u>ST</u>	vernmental body? TOP; you need not com		Y	
Supervisors other than at public hearings or meetings?	on county lobbying activities during	the current reportin	g period?		ES 🔊 NO
more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]  6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? \ YES NO [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]	supervisors other than at public hear	rings or meetings?		<b>🗆</b> YE	
spends more than \$500 during the current reporting period, you must file a  financial disclosure statement with the county clerk?	more than 2 contacts at a later date, you n	nust then contact the Co	ounty Clerk's of	fice to file a form ind	dicating such activity. You
	spends more than \$500 during the cufinancial disclosure statement with the [If you checked "NO" please call the Country of the	nrent reporting per he county clerk? hty Clerk at 266-4121 o	iod, you must	file a □ YI	
	Date: 4,25-15			Tag &	Kaspa

Committee Name: 2L  DATE: 4-28-15	R Name:	Greg	KVKer-		
DATE: 4-28-15	Municip	ality:	n of Perry	,	
Petition/CUP #/Resolution/Ordina					
☐ Wish to Speak in Support Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available	for Informatio	n Only
1. On this occasion, are you officia	□ YES	Ø N	O		
[If you checked "NO," STOP; you need					xt question.]
Name, address and telephone number	er of each person or orga	anization you a	re representing	:	
Comments:	<u> </u>			п	
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, of the checked "YES," turn over to the	or organization? STOP; you need not comp		□	YES	□ NO
3. Are you an elected official who or for your municipality or other a [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? STOP; you need not comp			YES that you must si	□ NO gn this form.
4. Has or will the person or organon county lobbying activities durin (A reporting period is January to June o	ng the current reportin	g period?		YES	□ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	earings or meetings?		🗆	YES reside.)	□ NO
[If you checked "NO," to questions 4 as more than 2 contacts at a later date, you must also sign this form. If you checked	u must then contact the Co	ounty Clerk's off	fice to file a form	n indicating such	
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Communication, Madison, for more information.	current reporting per the county clerk? ounty Clerk at 266-4121 o	iod, you must	file a □	YES I m 106A of the C	□ NO City-County
Date: 4-28-15		Signature	Lylli		
		Print Name(	Greg Kuker		

Committee Name: 2 W K	Name:	WM	GARF	001		<u>=</u>
DATE: 4 28 15	Municipa	lity: SPR	INGDAL	<u>E</u>		
Petition/CUP #/Resolution/Ordina	ance Amendment/Subjec	et: 1083	30			
<ul><li>Wish to Speak in Support</li><li>□ Registering in Support</li></ul>	☐ Wish to Speak in Op ☐ Registering in Oppos	**************************************	☐ Available	for Informat	ion On	ly
1. On this occasion, are you officing the second of the se		is form. If you	O checked "YES,"	" go on to the i		estion.]
Comments:		v				
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? STOP; you need not comple	• • • • • • • • • • • • • • • • • • • •		YES		NO
3. Are you an elected official who or for your municipality or other a [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? , <u>STOP</u> ; you need not compl	• • • • • • • • • • • • • • • • • • • •				NO is form. I
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reporting	ATHORNESIS COSCULIATIONAL DATA		YES		NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?			YES 1 reside.)		NO
[If you checked "NO," to questions 4 a more than 2 contacts at a later date, yo must also sign this form. If you checked	ou must then contact the Cou	ınty Clerk's off	ice to file a form	n indicating su		
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the C Building, Madison, for more information.  Date:	e current reporting perion the county clerk?	go to the Clerk Signature	file a	YES om 106A of the		<b>NO</b> County
	, p	rint Name	NM (TA	11-001		

DATE: 4/28/15 Municipality: Spring da 1-6  Petition/CUP #/Resolution/Ordinance Amendment/Subject: Aczone 10830 CUP 2317  Wish to Speak in Support
Petition/CUP #/Resolution/Ordinance Amendment/Subject: <u>Aczone 10830 CUP2317</u> Ush to Speak in Support Ush to Speak in Opposition
Registering in Support
1. On this occasion, are you officially representing an organization or a person other than yourself?
*
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4/28/15 Signature Signature  Print Name James Nichdson

Committee Name:	Name:	Scott	Lee	
DATE: 4-28-15	Municipa	ality: <u>Toc</u>	in of Cross	Hains
Petition/CUP #/Resolution/Ordina	ance Amendment/Subje	ect:	10831	
☐ Wish to Speak in Support	☐ Wish to Speak in O	Innosition		
☐ Registering in Support	☐ Registering in Oppo	T. C. C.	☐ Available for Inform	nation Only
1. On this occasion, are you offici	ally renresenting an or	ganization or	a nerson other than vo	ırself?
	YES	D N	O	
[If you checked "NO," STOP; you need	l not complete the rest of th	his form. If you	checked "YES," go on to t	he next question.]
Name, address and telephone number	er of each person or orga	ınization you a	re representing:	
Comments:				
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? STOP; you need not compl		□ YES	→E NO
3. Are you an elected official who or for your municipality or other a [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? STOP; you need not comp		□ YES	y NO ust sign this form.
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reportin	g period?	nan \$500 YES	NO NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?		<b>D</b> YES	NO NO
[If you checked "NO," to questions 4 a more than 2 contacts at a later date, yo must also sign this form. If you checked	u must then contact the Co	ounty Clerk's off	ice to file a form indicating	
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Common Building, Madison, for more information.	e current reporting peri th the county clerk? ounty Clerk at 266-4121 or	iod, you must	file a	NO the City-County
		Signature	hall be	
	, 1	Print Name	Scott Lee	

Committee Name: Name: Sich EBRE
DATE: 4-28-15 Municipality: X & DAWE
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10832
4
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
La registering in Support
1. On this occasion, are you officially representing an organization or a person other than yourself?
9 W W W W W W W W W W W W W W W W W W W
Name, address and telephone number of each person or organization you are representing:
Comments:
2. Are you being paid for your representation or appearing incidental to your
other paid duties for this person or organization?
[If you checked "NO" to the question, <u>STOP</u> ; you need not complete the rest of this form.  If you checked "YES," turn over to the next question.]
If you checked TES, lath over to the next question.
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
or for your municipality or other governmental body?
you checked "NO," to the question, go on to the next question.]
4. Has or will the person or organization you represent spend more than \$500
on county lobbying activities during the current reporting period? □ YES □ NO
(A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board
supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You
must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent
spends more than \$500 during the current reporting period, you must file a
financial disclosure statement with the county clerk?
Building, Madison, for more information.]
Date: Signature
Print Name

Committee Name:	ZLK	1	Name:	saig #	Don	Kop	p
DATE: 4/2	8/15	N	Iunicipality: _	Town	of C	Same	
Petition/CUP #/Resol	ution/Ordina	nce Amendmer	nt/Subject:	10832			
☐ Wish to Speak in S	unport	₩ish to Spe	eak in Onnositi	on.			
☐ Registering in Supp	**		in Opposition		ilable for	Information O	nly
1. On this occasion,		□	YES	⊠ NO			uestion.]
Name, address and telephone $\frac{608 - 5}{114}$	92-3398			n you are repres	enting:		
akoppo	@whyte	rra.Co	m				
Comments:							
2. Are you being paing other paid duties for [If you checked "NO" to If you checked "YES," and If you checked "YES," are the your checked "YES," and If you checked "YES," are the your checked "YES," and If you checked "YES," are the your checked "YES," and If you checked "YES," are the your checked "YES," and If you checked "YES," are the your checked "YES," and If you checked "YES," are the your checked "YES," are the your checked "YES," and If you checked "YES," are the your checked "YES," and If you checked "YES," are the your checked "YES," are the your checked "YES," and YES, you checked "YES," are the your checked "YES," and YES, you checked "YES," are the your checked "YES," are the your checked "YES," and YES, you checked "YES," are the your checked "YES," and YES, you checked "YES," are the your checked "YES," are the your checked "YES," and YES, you checked "YES," are the your ch	this person of the question, <u>S</u>	r <mark>organization'</mark> <u>TOP</u> ; you need n	?		.□ YES	S 🗆	NO
3. Are you an electe or for your municipa [If you checked "YES," you checked "NO," to the	lity or other g	overnmental b STOP; you need	ody?not complete the				NO his form.
4. Has or will the peon county lobbying a (A reporting period is Ja	ctivities durin	g the current i	eporting perio		□ YE	cs 🗆	NO
5. Do you anticipate supervisors other that (Do not count contacts v	m at public he	arings or meet	ings?		☐ YE ch you resi		NO
[If you checked "NO," t more than 2 contacts at must also sign this form.	a later date, you	must then conta	ct the County Ci	erk's office to file	a form ind	licating such act	
6. If "YES," do you spends more than \$5 financial disclosure s [If you checked "NO" p Building, Madison, for n	00 during the tatement with lease call the Co	current report the county cle unty Clerk at 266	ing period, yo rk?	u must file a	□ YE		<b>NO</b> County
Date: 4-28	-15		Signa	ture JMP	)		
			Print Na	ame Crais	Wopy)	7	

Committee Name: 2LR Name: Kichard Poetzel
Committee Name: 2LR Name: Kichard Foetzel  DATE: 4-28-2015 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10833
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  ———————————————————————————————————
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4-28-2015 Signature MMM Pretzd

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Public Hearing Name: Toni Seltmer - Jerri Schwenn Municipality: Twn of Sun DATE: Petition/CUP #/Resolution/Ordinance Amendment/Subject: 108 34 - Pet: Rezone ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition Registering in Support ☐ Registering in Opposition ☐ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.] Name, address and telephone number of each person or organization you are representing: Comments: 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ...... YES NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over to the next question.] 3. Are you an elected official who is appearing solely on behalf of your office [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.] 4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?...... 

YES NO (A reporting period is January to June or from July to December.) 5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?...... NO (Do not count contacts with the County Board supervisor who represents the district in which you reside.) [If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.] 6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?...... [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.] Print Name \_\_\_\_\_

Committee Name: Name: 10ny Kaspar			
Committee Name: Name: Jony Kaspar  DATE: 4-2575 Municipality:  Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10834			
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10934			
Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only			
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES D NO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]			
Name, address and telephone number of each person or organization you are representing:  Birren Kott Surveying			
Comments:			
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?			
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?			
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES (A reporting period is January to June or from July to December.)			
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?			
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]			
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?			
Date: 4-25-15 Signature Im Kagen  Print Name Tony Kaspa			

Committee Name: 2	Name: David Rudinkit		
DATE: \$/28/2	Municipality: Deer Coult		
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10835			
☑ Wish to Speak in Supp	ort		
☐ Registering in Support			
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES D NO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]			
Name, address and telepho	ene number of each person or organization you are representing:  Elathe Bover  X 65 Door Poly WE		
Comments:	x 60 DOCK FIND A WIL		
2. Are you being paid fo other paid duties for thi	or your representation or appearing incidental to your is person or organization?		
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?			
on county lobbying activ	n or organization you represent spend more than \$500 vities during the current reporting period?		
supervisors other than a	t public hearings or meetings?		
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]			
spends more than \$500 d	derstand that if the person or organization you represent during the current reporting period, you must file a sement with the county clerk?		
Date: 4/28	12015 Signature		
	Print Name Dow JR. LINKE		

Committee Name: ZLR Name: Jerry Nelson	
DATE: 4-28-15 Municipality: Town of Deerfield	
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2309 Limited family has brage for 20 units, Vehicle repair + Welding,  Wish to Speak in Support  Wish to Speak in Opposition	he
☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only	
1. On this occasion, are you officially representing an organization or a person other than yourself?  ———————————————————————————————————	J
Comments:	-
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?	
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?	n. I
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO (A reporting period is January to June or from July to December.)	
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?	
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do m more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. Y must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]	
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?	,
Date: 4-28-15 Signature Terry Welson Print Name Terry Welson	_