## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: PWHTC	Name: JEFF HELD
	Municipality: City of Monana
Petition/CUP #/Resolution/Ordinance Amer	adment/Subject: E. 1. 2017 - ACT - 042
Variance ter course	alled Access - Yahara Commons
☐ Wish to Speak in Support ☐ Wish ☐ Registering in Support ☐ Regis	to Speak in Opposition  tering in Opposition  Available for Information Only
	senting an organization or a person other than yourself?  NO ete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each j	person or organization you are representing:
STRAND ASSOCIATES,	NC. 910 WEST WINGRA DRIVE
MADISON, W1 537	115 608-251-4843 on behalf of
Comments:	Ciry of Manang
2. Are you being paid for your representation of the paid duties for this person or organiza [If you checked "NO" to the question, STOP; you not for the checked "YES," turn over to the next question.	ntion?
3. Are you an elected official who is appears or for your municipality or other government [If you cliecked "YES," to the question, STOP; you you checked "NO," to the question, go on to the next	ital body?
4. Has or will the person or organization yo on county lobbying activities during the curr (A reporting period is January to June or from July t	ent reporting period?    YES X NO
5. Do you anticipate making more than 2 co supervisors other than at public hearings or a (Do not count contacts with the County Board super	
more than 2 contacts at a later date, you must then c	TOP; you need not complete the rest of this form. However, if you do make contact the County Clerk's office to file a form indicating such activity. You they question at this time, go on to the next question.]
6. If "YES," do you understand that if the perspends more than \$500 during the current reprint of the county of th	porting period, you must file a
Date; 2017-05-09	Signature JEFF HELV

## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: PW H & T	Name: So	nja Reicherte	
DATE: may 9, 2017	Municipality; _	monona	1
Petition/CUP #/Resolution/Ordinance Amend	lment/Subject:	Access Appeal	Dane co.
☐ Wish to Speak in Support ☐ Wish to ☐ Registering in Support ☐ Register	Speak in Opposition	oji	formation Only
1. On this occasion, are you officially represe	.CV YES	□ NO	
Name, address and telephone number of each per	rson or organizatio	n you are representing:	
city of monona, 5211 S	Schluter R	oad, 408-222-2	2525
Comments:			
2. Are you being paid for your representation other paid duties for this person or organization [If you checked "NO" to the question, STOP; you need by you checked "YES," turn over to the next question.	ion?ed not complete the r	YES	≱ No
3. Are you an elected official who is appearing or for your municipality or other governments [If you checked "YES," to the question, STOP; you need you checked "NO," to the question, go on to the next	al body?eed not complete the	YES	NO No unust sign this form.
4. Has or will the person or organization you on county lobbying activities during the currer (A reporting period is January to June or from July to	nt reporting period		ρχ NO
5. Do you anticipate making more than 2 contsupervisors other than at public hearings or m (Do not count contacts with the County Board supervi	eetings?	D YES	M NO
[If you checked "NO," to questions 4 and 5 above, <u>ST</u> more than 2 contacts at a later date, you must then commust also sign this form. If you checked "YES" to eith	ntact the County Clea	rk's office to file a forni indicat	ing such activity. You
6. If "YES," do you understand that if the per spends more than \$500 during the current reporting the country of the country o	orting period, you clerk?	must file a	• NO of the City-County
Date: 5-9-17	Signatui	e Sonja Reiche	reit
	Print Nam	e Sonja Keiche	AL