Committee Name: P+F Your Name: Toy LaGre			
DATE of Meeting: 9/08/25 Municipality You Reside in: Oregon (Village)			
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2025 Res 146			
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition			
☐ Wish to Register in Support ☐ Wish to Register in Opposition			
Available for Information Only			
1. On this occasion, are you officially representing an organization or a person other than yourself?			
☐ YES ☐ NO (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of the form. If you checked "YES" go to the ne question.)	xt		
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, <u>STOP</u> ; you do not need to complete the rest of this form. If you checked "Y go to the next question.)	ES",		
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or	ŗ		
other governmental body? YES NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go to the next question.)			
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activi	ties		
during the current reporting period?			
5. Do you anticipate making more than two contacts with the County Board supervisors other than at p	ublic		
hearings or meetings? YES 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)			
6. If you answered "YES" to question 5, do you understand that if the person or organization you repress 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 210 Martin Luther Kin Blvd., Room 106A for more information.	ng Jr.,		
Date: Signature:			
Printed Name:			

Committee Name: Your Name: James O De La Coreso			
DATE of Meeting: 9/8/25 Municipality You Reside in: Oregon (Village)			
Petition/CUP #/Resolution/Ordinance Amendment/Subject:			
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition			
☐ Wish to Register in Support			
Available for Information Only			
1. On this occasion, are you officially representing an organization or a person other than yourself? \[\subseteq \text{YES} \] (If you checked "NO" \(\frac{\text{STOP}}{\text{STOP}} \); you do not need to complete the rest of the form. If you checked "YES" go 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, <u>STOP</u> ; you do not need to complete the rest of this form. If you checked "YES", go 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? ☐ YES ☐ NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)			
5. Do you anticipate making more than two contacts with the County Board supervisors other than at public			
hearings or meetings? YES 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)			
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.			
Date: Signature:			
Printed Name:			

REGISTRATION	BEFORE	COUNTY	COMMIT	TEE
1,			1	

Committee Name: Nam	e: Herr		
DATE of Meeting: 9/15/25 Municipalit	ty:		
Petition/CUP #/Resolution/Ordinance Amendment/Subjec	t:		
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition		
☐ Wish to Register in Support	Wish to Register in Opposition		
	✓ Available for Information Only		
1. On this occasion, are you officially representing an organization or a person other than yourself? YES NO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "YES" go 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 the second secon	ng incidental to your other paid duties for this		
person or organization?(If you checked "NO" to the question, <u>STOP</u> ; you do not need go to the next question.)			
3. Are you an elected official who is appearing solely on			
other governmental body?(If you checked "YES" to the question, STOP; you do not need go to the next question.)			
4. Has or will the person or organization you represent s	pend 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 than two contacts with hearings or meetings?	YES NO		
(If you checked "NO" to questions 4 and 5 above, STOP ; you if you do make more than 2 contacts at a later date, you must indicating such activity. If you checked "YES" to either questions sign this form.)	do not need to complete the rest of this form. <u>However</u> , then contact the County Clerk's office to file a form		
6. If you answered "YES" to question 5, do you understan spends more than \$500 during the current reporting period			
with the County Clerk? ?			
(If you checked "NO" please call the County Clerk at 266-412 Blvd., Room 106A for more information.	1 or go to the Clerk's office at 210 Martin Luther King Jr.,		
Date: 9/15/25 Signa	nture: Shoua Herr		
Print	Name: Shoua Herr		

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: _ P & Municipality: Madison DATE of Meeting: Petition/CUP #/Resolution/Ordinance Amendment/Subject: ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Wish to Register in Support Wish to Register in Opposition ☐ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself?

YES
NO (If you checked "NO" **STOP**; you do not need to complete the rest of the form. If you checked "YES" go 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 MO (If you checked "NO" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go to the next question.) 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go 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? (A reporting period is January to June, or July to December.) 5. Do you anticipate making more than two contacts with the County Board supervisors other than at public hearings or meetings? 🗆 YES 🗹 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 do not need to 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.) 6. If you answered "YES" to question 5, 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 (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., Blvd., Room 106A for more information.

REGISTRATION BEF	ORE COUNTY COMMITTEE
Committee Name:	Name: AMY LOWP
DATE of Meeting: 915/2 Muni	icipality: Mad1Sum
Petition/CUP #/Resolution/Ordinance Amendment/S	Subject:
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition
— Wish to register in cupport	☐ Available for Information Only
	(1
1. On this occasion, are you officially representing an officially representing and officially representing and officially representing an official representation of the rep	organization or a person other than yourself? TYES YES NO the rest of the form. If you checked "YES" go 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 ap	ppearing incidental to your other paid duties for this
person or organization?	□ YES 🗹 NO
(If you checked "NO" to the question, STOP ; you do not go to the next question.)	t need to complete the rest of this form. If you checked "YES",
3. Are you an elected official who is appearing solo	ely on behalf of your office or for your municipality or
other governmental body?	ot need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you repre	sent spend more than \$500 on county lobbying activities
	riod is January to June, or July to December.)☐ YES 📈 NO
5. Do you anticipate making more than two contac	ts with the County Board supervisors other than at public
hearings or meetings?	TYES MO
if you do make more than 2 contacts at a later date, you	P; you do not need to complete the rest of this form. However, u must then contact the County Clerk's office to file a form question, please continue to the question below. You must also
6. If you answered "YES" to question 5, do you undespends more than \$500 during the current reporting	erstand that if the person or organization you represent g period, you must file a financial disclosure statement
with the County Clerk? ?	
(If you checked "NO" please call the County Clerk at 26 Blvd., Room 106A for more information.	66-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
01 1 2	Signature: Why we
	Print Name: Amy Lot) 4

REGISTRO ANTE EL COMITÉ DEL CONDADO

Nombre del comité:	Su nombre: Bibiana Peretti
FECHA de la reunión: 9 15 2025	Municipalidad en la que reside: Middlefon
Petición/N.º de CUP/Resolución/Enmieno	da de la ordenanza/Tema:
☐ Deseo intervenir a favor	☐ Deseo intervenir en contra
☐ Deseo registrarme a favor	Deseo registrarme en contra
	☐ Disponible solo con fines informativos
	mente a una organización u a otra persona que no sea usted? Sí Mo o debe completar el resto del formulario. Si marcó la opción "Sí", continúe con la
Nombre, dirección y número de teléfono de	cada persona u organización a la que está representando:
COMENTARIOS:	
2. ¿Está recibiendo remuneración por s	su representación o comparece como consecuencia de sus otras
(Si marcó la opción "NO" como respuesta a Si marcó la opción "Sí", continúe con la sigu. 3. ¿Es un funcionario electo que compa	arece solamente en nombre de su oficina o para su municipalidad u otro
organismo del gobierno?(Si marcó la opción "Sí" como respuesta a l Si marcó la opción "NO", continúe con la sig	la pregunta, <u>DETÉNGASE</u> ; no debe completar el resto del formulario. guiente pregunta).
	resenta ha gastado o gastará más de \$500 en actividades de cabildeo
	me actual?
(Un período de informe tiene lugar desde el	•
	actos con los supervisores de la Junta del Condado que no tengan lugar
•	
(Si marcó la opción "NO" como respuesta a formulario. <u>Sin embargo</u> , si no hizo más de	las preguntas 4 y 5 anteriores, <u>DETÉNGASE</u> ; no debe completar el resto del 2 contactos en una fecha posterior, debe comunicarse con la oficina del Secretario que indique dicha actividad. Si marcó la opción "SÍ" en cada pregunta, continúe con
	omprènde que si la persona u organización a la que usted representa gasta ne actual, usted debe presentar una declaración de su situación financiera
	□ sí □ no
(Si marcó la opción "NO", llame al Secretari 210 Martin Luther King Jr., Blvd., Room 106	io del Condado al 266-4121 ø diríjase a la oficina del Secretario en 6A para obtener más iniormación).
Fecha: 9 15 25	Firma:
1	Nombre en letra de imprenta: Bibia na Peretti

Committee Name:	Name: / / whelle ralay
DATE of Meeting: 9157 Municipal Muni	cipality:Made SN
Petition/CUP #/Resolution/Ordinance Amendment/Su	ubject:
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition
	☐ Available for Information Only
(If you checked "NO" STOP ; you do not need to complete th	reganization or a person other than yourself? TYES NO the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or	r organization you are representing:
COMMENTS:	
2. Are you being paid for your representation or app	pearing incidental to your other paid duties for this
person or organization?(If you checked "NO" to the question, <u>STOP</u> ; you do not rigo to the next question.)	need to complete the rest of this form. If you checked "YES",
3. Are you an elected official who is appearing solely	ly on behalf of your office or for your municipality or
other governmental body?(If you checked "YES" to the question, STOP; you do not go to the next question.)	t need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you represe	ent spend more than \$500 on county lobbying activities
during the current reporting period? (A reporting period	iod is January to June, or July to December.) YES 📈 NO
5. Do you anticipate making more than two contacts	s with the County Board supervisors other than at public
hearings or meetings?(Do not count contacts with the County Board supervisor	who represents the district in which you reside.)
if you do make more than 2 contacts at a later date, you r	; you do not need to complete the rest of this form. <u>However,</u> must then contact the County Clerk's office to file a form uestion, please continue to the question below. You must also
	rstand that if the person or organization you represent period, you must file a financial disclosure statement
with the County Clerk? ?	S-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date: S	Signature: Mull My
P	Print Name: Malle R Palay

REGISTRO ANTE EL COMITÉ DEL CONDADO

Nombre del comité:	Su nombre:
FECHA de la reunión:	Municipalidad en la que reside: 796
Petición/N.º de CUP/Resolución/Enmie	enda de la ordenanza/Tema:
☐ Deseo intervenir a favor	☐ Deseo intervenir en contra
☐ Deseo registrarme a favor	Deseo registrarme en contra
	☐ Disponible solo con fines informativos
1. En esta ocasión, ¿representa ofici (Si marcó la opción "NO", <u>DETÉNGASE</u> ; siguiente pregunta).	ialmente a una organización u a otra persona que no sea usted? Sí No no debe completar el resto del formulario. Si marcó la opción "SÍ", continúe con la
Nombre, dirección y número de teléfono	de cada persona u organización a la que está representando:
COMENTARIOS:	
•	or su representación o comparece como consecuencia de sus otras
	ersona u organización? Sí I No a a la pregunta, <u>DETÉNGASE</u> ; no debe completar el resto del formulario. siguiente pregunta).
3. ¿Es un funcionario electo que con	mparece solamente en nombre de su oficina o para su municipalidad u otro
	a la pregunta, <u>DETÉNGASE</u> ; no debe completar el resto del formulario. siguiente pregunta).
4. ¿La persona u organización que re	epresenta ha gastado o gastará más de \$500 en actividades de cabildeo
	orme actual? Sí 🗹 NO e enero a junio o desde julio a diciembre).
5. ¿Anticipa que hará más de dos co	ontactos con los supervisores de la Junta del Condado que no tengan lugar
	l supervisor de la Junta del Condado que represente el distrito en el que usted reside).
formulario. Sin embargo, si no hizo más	a a las preguntas 4 y 5 anteriores, <u>DETÉNGASE</u> ; no debe completar el resto del de 2 contactos en una fecha posterior, debe comunicarse con la oficina del Secretario io que indique dicha actividad. Si marcó la opción "Sĺ" en cada pregunta, continúe con nar este formulario).
6. Si respondió "Sí" a la pregunta 5, más de \$500 durante el período de inf	¿comprende que si la persona u organización a la que usted representa gasta orme actual, usted debe presentar una declaración de su situación financiera
	□ sí □ NO
210 Martin Luther King Jr., Blvd., Room	,
Fecha: 9-/5-2025	Firma:
	Nombre en letra de imprenta: Nont MENDOZA RIVERA

REGISTRATION BEFORE COUNTY COMMITTEE Name: **Committee Name:** Municipality: DATE of Meeting: Petition/CUP #/Resolution/Ordinance Amendment/Subject: __ ☐ Wish to Speak in Support Wish to Speak in Opposition ☐ Wish to Register in Opposition ☐ Wish to Register in Support ☐ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? 🔲 YES 🔟 NO (If you checked "NO" <u>STOP</u>; you do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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? YES NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go 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? (A reporting period is January to June, or July to December.) ☐ YES ☐ NO 5. Do you anticipate making more than two contacts with the County Board supervisors other than at public (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 do not need to 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.) 6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd.. Room 106A for more information. Signature:

Print Name:

REGISTRATION BEFORE C	OUNTY COMMITTEE
Committee Name: Name:	BRIAN STANDULG
DATE of Meeting: 9/15/2025 Municipality:	MADISON
Petition/CUP #/Resolution/Ordinance Amendment/Subject: _	'Res 146
□ Wigh to Chack in Cumpart	Wish to Charle in Opposition
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition
	✓ □ Available for Information Only
1. On this occasion, are you officially representing an organization (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of the state	f the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organize	zation 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 do not need to go to the next question.)	
3. Are you an elected official who is appearing solely on be	half of your office or for your municipality or
other governmental body?	
4. Has or will the person or organization you represent spe	nd more than \$500 on county lobbying activities
during the current reporting period? (A reporting period is Ja	nuary to June, or July to December.) \square YES \square NO
5. Do you anticipate making more than two contacts with the	ne County Board supervisors other than at public
hearings or meetings?	
(Do not count contacts with the County Board supervisor who re	oresents the district in which you reside.)
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do if you do make more than 2 contacts at a later date, you must the indicating such activity. If you checked "YES" to either question, <u>sign this form.</u>)	en contact the County Clerk's office to file a form
6. If you answered "YES" to question 5, do you understand t spends more than \$500 during the current reporting period,	hat if the person or organization you represent you must file a financial disclosure statement
with the County Clerk??	r go to the Clerk's office at 210 Martin Luther King Jr.,
Date: $\frac{9/n}{1025}$ Signatur	re: Mm 4
/	- J. Law M. SPA. Druss

REGISTRATION BEFORE COUNTY COMMITTEE			
Committee Name: Name	Marge Wornes		
DATE of Meeting: 9/15/25 Municipality	: Marison I Day		
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	146- Pogstry Opostry		
Wish to Speak in Support	☐ Wish to Speak in Opposition		
☐ Wish to Register in Support	☐ Wish to Register in Opposition		
1. On this occasion, are you officially representing an organiza (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest			
Name, address and telephone number of each person or organ	nization you are representing:		
	-		
COMMENTS:			
2. Are you being paid for your representation or appearing	g incidental to your other paid duties for this		
person or organization? (If you checked "NO" to the question, <u>STOP</u> ; you do not need to go to the next question.)			
3. Are you an elected official who is appearing solely on b	pehalf of your office or for your municipality or		
other governmental body?			
4. Has or will the person or organization you represent sp	end more than \$500 on county lobbying activities		
during the current reporting period? (A reporting period is J	lanuary to June, or July to December.) YES NO		
5. Do you anticipate making more than two contacts with	the County Board supervisors other than at public		
hearings or meetings?(Do not count contacts with the County Board supervisor who r	represents the district in which you reside.)		
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you diffuse you do make more than 2 contacts at a later date, you must to indicating such activity. If you checked "YES" to either question sign this form.)	hen contact the County Clerk's office to file a form		
6. If you answered "YES" to question 5, do you understand spends more than \$500 during the current reporting period			
with the County Clerk? ?			
(If you checked "NO" please call the County Clerk at 266-4121 Blvd., Room 106A for more information.	or go to the Clerk's office at 210 Martin Luther King Jr.,		
Date: 9/15/25 Signate	ure: Masul Maril		
Print N	ame: MACHIL TORMA-		

DATE of Meeting: 15 Sept 25 Municipality: Tow of Primpose
DATE of Meeting: 15 Sept 25 Municipality: Tow of Primpose
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 725 725 146
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
☐ Wish to Register in Support ☐ Wish to Register in Opposition
☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES NO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "YES" go 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? (A reporting period is January to June, or July to December.) ☐ YES ☐ NO
5. Do you anticipate making more than two contacts with the County Board supervisors other than at public
hearings or meetings?
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: Signature:
Print Name:

REGISTRATION BEFORE CO	UNTY COMMITTEE
Committee Name: Personnel & Finance Name: _	Lechnn, Cox
DATE of Meeting: 9/15/25 Municipality:_	Dave Countr
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	Res 146
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
<u> </u>	-
☐ Wish to Register in Support	Wish to Register in Opposition
	☐ Available for Information Only
1. On this occasion, are you officially representing an organization (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of the state	
Name, address and telephone number of each person or organiza	ation you are representing:
COMMENTS:	
2. Are you being paid for your representation or appearing in	ncidental to your other paid duties for this
person or organization?	
(If you checked "NO" to the question, STOP ; you do not need to c go to the next question.)	
3. Are you an elected official who is appearing solely on beh	alf of your office or for your municipality or
other governmental body?	YÉS 🗘 NO
(If you checked "YES" to the question, STOP; you do not need to go to the next question.)	complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you represent spen	d more than \$500 on county lobbying activities
during the current reporting period? (A reporting period is Jan	
5. Do you anticipate making more than two contacts with the	, ,
hearings or meetings?	
(Do not count contacts with the County Board supervisor who repi	
(If you checked "NO" to questions 4 and 5 above, STOP ; you do n if you do make more than 2 contacts at a later date, you must thei indicating such activity. If you checked "YES" to either question, p sign this form.)	n contact the County Clerk's office to file a form
6. If you answered "YES" to question 5, do you understand the spends more than \$500 during the current reporting period, y	at if the person or organization you represent ou 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 210/Martin Luther King Jr
Date: $\frac{9/15/25}{}$ Signature	e: LeeAnn Cex
Print Nam	ne: Leelfun Cex

Committee Name: PNF Name:	Diana Florencio Martinez
DATE of Meeting: 09/15/25 Municipality	Dane county
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	140
☐ Wish to Speak in Support	\square Wish to Speak in Opposition .
☐ Wish to Register in Support	Wish to Register in Opposition
	☐ Available for Information Only
On this occasion, are you officially representing an organizat (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of Name, address and telephone number of each person or organization.	of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person of organ	zation 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 b	ehalf of your office or for your municipality or
other governmental body?	
4. Has or will the person or organization you represent spe	end more than \$500 on county lobbying activities
during the current reporting period? (A reporting period is Ja	anuary to June, or July to December.) \square YES \square NO
5. Do you anticipate making more than two contacts with the hearings or meetings?	□ YES ☑ NO
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do if you do make more than 2 contacts at a later date, you must the indicating such activity. If you checked "YES" to either question, <u>sign this form.</u>)	nen contact the County Clerk's office to file a form
6. If you answered "YES" to question 5, do you understand spends more than \$500 during the current reporting period	
with the County Clerk??	or go to the Clerk's office at 210 Martin Luther King Jr.,
Date: 09 15 25 Signatu	ire: Chana Moencio Martos
Print Na	ame: Diana Frorencio Martinez

Committee Name: Y T T	ame: David Kreip
DATE of Meeting: 9-15-2025 Municip	pality: M. E. Frar Land
Petition/CUP #/Resolution/Ordinance Amendment/Subj	ject: RES 146
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition
— Wish to Register in Support	☐ Available for Information Only
 On this occasion, are you officially representing an orga (If you checked "NO" <u>STOP</u>; you do not need to complete the 	nization or a person other than yourself? YES NO rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or o	organization you are representing:
COMMENTS:	·
2. Are you being paid for your representation or appear	aring incidental to your other paid duties for this
person or organization?	l'a
(If you checked "NO" to the question, STOP ; you do not ne go to the next question.)	ed 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?	
(If you checked "YES" to the question, STOP; you do not n go to the next question.)	need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you represen	
during the current reporting period? (A reporting period	d is January to June, or July to December.) \square YES $ ot\boxtimes$ NO
5. Do you anticipate making more than two contacts v	with the County Board supervisors other than at public
hearings or meetings?	
(Do not count contacts with the County Board supervisor w	• ,
(If you checked "NO" to questions 4 and 5 above, STOP ; you do make more than 2 contacts at a later date, you muindicating such activity. If you checked "YES" to either questign this form.)	rou do not need to complete the rest of this form. <u>However</u> , ust then contact the County Clerk's office to file a form stion, please continue to the question below. You must also
6. If you answered "YES" to question 5, do you underst	tand that if the person or organization you represent
spends more than \$500 during the current reporting pe	eriod, you must file a financial disclosure statement
with the County Clerk??(If you checked "NO" please call the County Clerk at 266-4 Blvd., Room 106A for more information.	121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date: 9-15-2075 Sig	gnature:
Pri	nt Name: Dand Kneip

Committee Name: PL + Name	ne: Trave Thuras
DATE of Meeting: \(\frac{\sqrt{5/25}}{\text{Municipal}} \)	ity: Madicon
Petition/CUP #/Resolution/Ordinance Amendment/Subjection	ct: <u>RFS - 14 6</u>
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition
•	☐ Available for Information Only
1. On this occasion, are you officially representing an organic (If you checked "NO" <u>STOP</u> ; you do not need to complete the rename, address and telephone number of each person or organic	st of the form. If you checked "YES" go to the next question.)
COMMENTS:	,
2. Are you being paid for your representation or appear	ing incidental to your other paid duties for this
person or organization?(If you checked "NO" to the question, <u>STOP</u> ; you do not need go to the next question.)	·
3. Are you an elected official who is appearing solely or	n 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? (A reporting period is	s January to June, or July to December.) \square YES $ ot ightharpoonup$ NO
5. Do you anticipate making more than two contacts wit	th the County Board supervisors other than at public
hearings or meetings?(Do not count contacts with the County Board supervisor who	
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you if you do make more than 2 contacts at a later date, you mus indicating such activity. If you checked "YES" to either questions sign this form.)	t then contact the County Clerk's office to file a form
6. If you answered "YES" to question 5, do you understar spends more than \$500 during the current reporting periods.	nd that if the person or organization you represent od, you must file a financial disclosure statement
with the County Clerk??	
Date: Signa	ature:
Print	Name: Travis Thuras

Committee Name:	Name: Ognation Viggras
DATE of Meeting: <u>9.15.25</u> Munic	cipality:
Petition/CUP #/Resolution/Ordinance Amendment/Su	ubject:
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition of 146
	Available for Information Only
1. On this occasion, are you officially representing an or (If you checked "NO" <u>STOP</u> ; you do not need to complete to	rganization or a person other than yourself? YES NO the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person o	r organization you are representing:
· · · · · · · · · · · · · · · · · · ·	
COMMENTS:	
2. Are you being paid for your representation or app	pearing incidental to your other paid duties for this
person or organization?(If you checked "NO" to the question, <u>STOP</u> ; you do not go to the next question.)	need to complete the rest of this form. If you checked "YES",
3. Are you an elected official who is appearing sole	ly on behalf of your office or for your municipality or
	t need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you repres	sent spend more than \$500 on county lobbying activities
during the current reporting period? (A reporting per	iod is January to June, or July to December.) \square YES $ ot \!$
5. Do you anticipate making more than two contact hearings or meetings?	s with the County Board supervisors other than at public
(Do not count contacts with the County Board supervisor	
if you do make more than 2 contacts at a later date, you	?; you do not need to complete the rest of this form. <u>However</u> , must then contact the County Clerk's office to file a form uestion, please continue to the question below. You must also
	erstand that if the person or organization you represent period, you must file a financial disclosure statement
Blvd., Room 106A for more information.	6-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date: 9-15.25	Signature:
	Print Name: Joachan Wiggers

Committee Name: P+F Name:	
DATE of Meeting: 915 25 Municipality:	City of markin
Petition/CUP #/Resolution/Ordinance Amendment/Subject: _	
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition of 140
	☐ Available for Information Only
 On this occasion, are you officially representing an organization (If you checked "NO" <u>STOP</u>; you do not need to complete the rest of Name, address and telephone number of each person or organization. 	the form. If you checked "YES" go to the next question.)
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 be	
other governmental body?(If you checked "YES" to the question, STOP; you do not need to go to the next question.)	
4. Has or will the person or organization you represent spe	
during the current reporting period? (A reporting period is Ja	nuary to June, or July to December.)□ YES ☑ NO
5. Do you anticipate making more than two contacts with the hearings or meetings?	□ YES 🗹 NO
(If you checked "NO" to questions 4 and 5 above, STOP ; you do if you do make more than 2 contacts at a later date, you must the indicating such activity. If you checked "YES" to either question, sign this form.)	en contact the County Clerk's office to file a form
6. If you answered "YES" to question 5, do you understand spends more than \$500 during the current reporting period,	
with the County Clerk??	
Date: 0 Signatu	re: Marie de la companya della companya della companya de la companya de la companya della compa
Print Na	me: Maldna Wiasshoff

Committee Name: Personal (+ Pavenue Name: Dan Upp
DATE of Meeting: 09/15/2025 Municipality: Madizen
Petition/CUP #/Resolution/Ordinance Amendment/Subject: <u>7025</u> RES-146
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
☐ Wish to Register in Support
☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES ONO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organization you are representing: AFSCME, 33 Nob LI: [I Road Madison WI 537] (08-426-1932
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? (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?
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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:
Print Name: Dow Upy

Committee Name: Name: haw	a Davie Booker
DATE of Meeting: 911525 Municipality:	
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	0
☐ Wish to Speak in Support ☐	Wish to Speak in Opposition
	Wish to Register in Opposition
	Available for Information Only
On this occasion, are you officially representing an organization or a partial (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of the form Name, address and telephone number of each person or organization years.	m. If you checked "YES" go to the next question.)
COMMENTS: 2. Are you being paid for your representation or appearing incider	ntal to your other paid duties for this
person or organization? (If you checked "NO" to the question, <u>STOP</u> ; you do not need to comple go to the next question.)	YES NO
3. Are you an elected official who is appearing solely on behalf of	your office or for your municipality or
other governmental body?(If you checked "YES" to the question, STOP; you do not need to complet go to the next question.)	
4. Has or will the person or organization you represent spend mor	e than \$500 on county lobbying activities
during the current reporting period? (A reporting period is January to	o June, or July to December.) \square YES \square NO
5. Do you anticipate making more than two contacts with the Count hearings or meetings? (Do not count contacts with the County Board supervisor who represents (If you checked "NO" to questions 4 and 5 above, STOP; you do not need to be a supervisor who represents the country of the supervisor who represents the supervi	s the district in which you reside.)
if you do make more than 2 contacts at a later date, you must then containdicating such activity. If you checked "YES" to either question, please sign this form.)	act the County Clerk's office to file a form
6. If you answered "YES" to question 5, do you understand that if the spends more than \$500 during the current reporting period, you mu	ne person or organization you represent ust file a financial disclosure statement
with the County Clerk??	
Date:	
Print Name:	Anna Davik Boxee

Committee Name:	Name:
DATE of Meeting: Mu	unicipality:
Petition/CUP #/Resolution/Ordinance Amendmen	nt/Subject:
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	☐ Wish to Register in Opposition
	☐ Available for Information Only
On this occasion, are you officially representing a (If you checked "NO" <u>STOP</u> ; you do not need to complet Name, address and telephone number of each personal statement of the statement o	n organization or a person other than yourself? YES NO ete the rest of the form. If you checked "YES" go to the next question.) on or organization you are representing:
COMMENTS:	·
2. Are you being paid for your representation or	appearing incidental to your other paid duties for this
	not need to complete the rest of this form. If you checked "YES",
3. Are you an elected official who is appearing s	solely on behalf of your office or for your municipality or
	o not need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you rep	present spend more than \$500 on county lobbying activities
during the current reporting period? (A reporting	period is January to June, or July to December.) \square YES \square NO
	tacts with the County Board supervisors other than at public
(Do not count contacts with the County Board superv	visor who represents the district in which you reside.)
if you do make more than 2 contacts at a later date,	TOP ; you do not need to complete the rest of this form. <u>However</u> , you must then contact the County Clerk's office to file a form er question, please continue to the question below. You must also
	nderstand that if the person or organization you represent ing period, you must file a financial disclosure statement
	YES NO
(If you checked "NO" please call the County Clerk at Blvd., Room 106A for more information.	266-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date:	Signature:
	Print Name:

REGISTRATION BEFORE CO	REGISTRATION BEFORE COUNTY COMMITTEE			
Committee Name: Name:	Josh Seeley			
DATE of Meeting: $9-15-25$ Municipality:				
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	00 5 14C			
Petition/COP #/Resolution/Ordinarios / unonament campus ==				
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition			
☐ Wish to Register in Support	Wish to Register in Opposition			
	☐ Available for Information Only			
1. On this occasion, are you officially representing an organization (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of	he form. If you checked "YES" go to the next question.)			
Name, address and telephone number of each person or organization	tion you are representing:			
COMMENTS:				
2. Are you being paid for your representation or appearing in	ncidental to your other paid duties for this			
person or organization?	,			
(If you checked "NO" to the question, STOP ; you do not need to co go to the next question.)	omplete the rest of this form. If you checked "YES", .			
3. Are you an elected official who is appearing solely on beh	alf of your office or for your municipality or			
other governmental body?				
4. Has or will the person or organization you represent spen	d more than \$500 on county lobbying activities			
during the current reporting period? (A reporting period is January	uary to June, or July to December.) YES NO			
5. Do you anticipate making more than two contacts with the	County Board supervisors other than at public			
hearings or meetings?(Do not count contacts with the County Board supervisor who repr	🗆 YES 🗹 NO			
(If you checked "NO" to questions 4 and 5 above, STOP ; you do n if you do make more than 2 contacts at a later date, you must then indicating such activity. If you checked "YES" to either question, plain this form.)	contact the County Clerk's office to file a form			
6. If you answered "YES" to question 5, do you understand the spends more than \$500 during the current reporting period, you	at if the person or organization you represent ou 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 g Blvd., Room 106A for more information.	go to the Clerk's office at 210 Martin Luther King Jr.,			
Date: 2-15-23 Signature				
Print Nam	e: Josh Serley			

Committee Name:	Nam Nam	ie: <u>Jase 1</u>	Lea
DATE of Meeting:	9/15/25 Municipali	ty: Dane	•
Petition/CUP #/Res	Municipalicolution/Ordinance Amendment/Subject	t: Employee	Health Insurance
1	☐ Wish to Speak in Support	☐ Wish to Spea	k in Opposition
!	☐ Wish to Register in Support	💢 Wish to Regi	ster in Opposition
		☐ Available for	Information Only
(If you checked "N	n, are you officially representing an organi O" <u>STOP</u> ; you do not need to complete the re I telephone number of each person or org	st of the form. If you check	red "YES" go to the next question.)
COMMENTS: 2. Are you being	paid for your representation or appear	ing incidental to your	other paid duties for this
person or organiz	ation? O" to the question, STOP ; you do not need		☐ YES 🛱 NO
3. Are you an ele	cted official who is appearing solely o	n behalf of your office	or for your municipality or
other government (If you checked "YE go to the next ques	al body? ES" to the question, STOP; you do not neetion.)	ed to complete the rest o	of this form. If you checked "YES",
	person or organization you represent		
during the current	t reporting period? (A reporting period in	s January to June, or Ju	ly to December.)□ YES 📈 NO
hearings or meeting	nate making more than two contacts wings?acts with the County Board supervisor wh		🗆 YES 🏳 NO
if you do make mor	O" to questions 4 and 5 above, <u>STOP</u> ; you re than 2 contacts at a later date, you mus ivity. If you checked "YES" to either quest	t then contact the Coun	ty Clerk's office to file a form
	d "YES" to question 5, do you understand the standard standard the surrent reporting per		
(If you checked "NO	lerk? ? O" please call the County Clerk at 266-41. for more information.	21 or go to the Clerk's of	ffice at 210 Martin Luther King Jr.,
Date: 9/5/	75 Sign	ature:	Rea
	Prin	t Name: Jose	Rea

REGISTRATION BEFORE CO	UNTY COMMITTEE
Committee Name: Name:	Seoff Drummon2
DATE of Meeting: 9/15/25 Municipality:_	
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	Res. 146
Petition/Cop #/Resolution/ordinarios / anonament carejoon	
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition
	☐ Available for Information Only
 On this occasion, are you officially representing an organization (If you checked "NO" <u>STOP</u>; you do not need to complete the rest of to Name, address and telephone number of each person or organization 	he form. If you checked "YES" go to the next question.)
COMMENTS:	
2. Are you being paid for your representation or appearing in	ncidental to your other paid duties for this
person or organization?	omplete the rest of this form. If you checked "YES",
3. Are you an elected official who is appearing solely on beh	alf of your office or for your municipality or
other governmental body?	
4. Has or will the person or organization you represent spen	d more than \$500 on county lobbying activities
during the current reporting period? (A reporting period is Jan	uary to June, or July to December.) YES N
5. Do you anticipate making more than two contacts with the	County Board supervisors other than at public
hearings or meetings?(Do not count contacts with the County Board supervisor who repart	normalistrict in which you reside.)
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do r if you do make more than 2 contacts at a later date, you must thei indicating such activity. If you checked "YES" to either question, p <u>sign this form.</u>)	n contact the County Clerk's office to file a form
6. If you answered "YES" to question 5, do you understand the spends more than \$500 during the current reporting period, y	
with the County Clerk??	
Date: 9115/25 Signature	
Print Nam	Saft A Culaina

Committee Name:	PAF PAF	_ Name:〔	nurlotte	. Tellou	<u>t</u>
DATE of Meeting:	9/5/25 Mun	icipality:	2		
Petition/CUP #/Resolut	tion/Ordinance Amendment/S	Subject:	Res !	+10	
□ v	Vish to Speak in Support	[☐ Wish to Spea	k in Opposition	
□ v	Wish to Register in Support		☑ Wish to Regis	ster in Opposition	
		[☐ Available for I	nformation Only	
(If you checked "NO" <u>S</u>	e you officially representing an of the properties of each person	the rest of the	form. If you checke	ed "YES" go to the n	YES V NO ext question.)
COMMENTS:			doutel to your o	ther poid duties	for this
	for your representation or a			_	YES NO
	1? the question, <u>STOP;</u> you do no)				
3. Are you an elected	official who is appearing so	lely on behalf	of your office o	or for your munic	pality or
	ody? o the question, STOP; you do r)				YES NO Necked "YES",
4. Has or will the pers	son or organization you repre	esent spend r	nore than \$500	on county lobbyi	ng activities
during the current rep	orting period? (A reporting pe	eriod is Januai	y to June, or July	y to December.) \Box	YES NO
5. Do you anticipate i	making more than two conta	cts with the C	ounty Board su	pervisors other t	han at public
	with the County Board supervis				YES NO
if you do make more that	questions 4 and 5 above, <u>STC</u> an 2 contacts at a later date, you If you checked "YES" to either	ou must then c	ontact the Count	y Clerk's office to t	ile a form
	ES" to question 5, do you und 0 during the current reportin				
(If you checked "NO" plo Blvd., Room 106A for m					YES NO Luther King Jr.,
Date: 915/2	5	Signature:_,	Land (DAGU	<u> </u>
		Print Name:	Charlot	te Teuk)e/7