Committee Name:	ZLR	Name	: Mic	relle	Hot	er		
DATE:		Munic	ipality:			8 8558		
Petition/CUP #/Resol	ution/Ordina	nce Amendment/Su	bject:		(\$0	11139		
☑ Wish to Speak in Su☐ Registering in Supp	* *	☐ Wish to Speak in ☐ Registering in Op	Opposition oposition		Available f	or Informatio	on Onl	ly
1. On this occasion, a [If you checked "NO," S Name, address and tele	TOP; you need	not complete the rest of	$S \qquad \Box$ f this form. If	NO you check	ed "YES,"	-		estion.]
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2. Are you being paid other paid duties for [If you checked "NO" to If you checked "YES," to	this person of the question, §	r organization? TOP; you need not con			□ Y	TES		NO
3. Are you an elected or for your municipal [If you checked "YES," to the you checked "NO," to the	ity or other goother goothe question,	governmental body? <u>STOP</u> ; you need not co	mplete the res	• • • • • • • • • • • • •	□	YES hat you must s		NO s form. Į
4. Has or will the per on county lobbying ac (A reporting period is Jan	ctivities durin	ig the current repor	ing period?.			YES		NO
5. Do you anticipate supervisors other tha (Do not count contacts w	n at public h	earings or meetings?				YES reside.)	П	NO
[If you checked "NO," to more than 2 contacts at a must also sign this form.	ı later date, yo	ı must then contact the	County Clerk'	s office to	file a form	indicating suc		
6. If "YES," do you spends more than \$50 financial disclosure st [If you checked "NO" ple Building, Madison, for n	0 during the atement with case call the Co	current reporting p the county clerk? ounty Clerk at 266-412	eriod, you m	ust file a	🗆 '	YES 106A of the G		NO ounty
Date:	0/27/1	7	_ Signature(Lle Miche	chelle elle Fi	Fulle	L	

Committee Name:	Zh		Name:			ER/)	0
DATE:	6/27/	19 n	Municipalit	y: <u>5p</u>	rengt	rela To	wus	nip
Petition/CUP #/Resolut	ion/Ordinanc	e Amendme	nt/Subject:	#	2	11140		
☐ Wish to Speak in Supp	port [☐ Wish to Sp	eak in Oppo	sition				
☐ Registering in Suppor		☐ Registering			☐ Avail	able for Inforn	nation On	ly
1. On this occasion, are		□	YES	Ø N	O	× = a		
[If you checked "NO," STO Name, address and telepl	55.71E-0					and water	ie next qui	zsuon. j
Comments:							a	10
2. Are you being paid for the paid duties for the [If you checked "NO" to the If you checked "YES," turn	n <mark>is person or o</mark> ne question, <u>STC</u>	o rganization <u>OP</u> ; you need i	?	• • • • • • • • • • • • • • • • • • • •		□ YES	K	NO
3. Are you an elected or for your municipality [If you checked "YES," to you checked "NO," to the o	y or other gov the question, <u>ST</u>	v <mark>ernment</mark> al l <u>TOP</u> ; you need	body? I not complete				70.0	NO is form. l੍
4. Has or will the person county lobbying acti (A reporting period is Janua	vities during	the current	reporting p			□ YES	×	NO
5. Do you anticipate m supervisors other than (Do not count contacts with	at public hear	rings or mee	tings?			☐ YES h you reside.)	À	NO
[If you checked "NO," to q more than 2 contacts at a lo must also sign this form. If	ater date, you n	nust then conto	act the Count	y Clerk's oj	ffice to file a	form indicating		
6. If "YES," do you un spends more than \$500 financial disclosure stat [If you checked "NO" pleas Building, Madison, for more	during the cutement with the court with the court	irrent repor he county clo ity Clerk at 26	ting period erk?	you must	t file a	□ YES		NO County
Date:	6/27	117	Si	gnature 4		M	X R	

Committee Name: 20 W/ W G Name: TO LANG
DATE: JUN 27, 2017 Municipality: TN DEERFIELS
Petition/CUP #/Resolution/Ordinance Amendment/Subject: / / 4 /
☐ 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 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:
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: JUN 27, 2017 Signature Jon Holl TIMAN Print Name JON Holl TIMAN
Print Name TON HORTZMAN

Committee Na	me: ZLR	Name: John Breurig	
DATE: 6	-27-17	Municipality: Town of Bristol	
Petition/CUP	#/Resolution/O	rdinance Amendment/Subject: Rezone 11142	
Wish to Spe ☐ Registering		☐ Wish to Speak in Opposition☐ Registering in Opposition☐ Available for Information On	ly
[If you checked	"NO," <u>STOP</u> ; yot	officially representing an organization or a person other than yourself? NO u need not complete the rest of this form. If you checked "YES," go on to the next quantumber of each person or organization you are representing:	estion.]
Comments:			
other paid du [If you checked	ties for this per "NO" to the ques	ur representation or appearing incidental to your reson or organization?	NO
or for your m	unicipality or of "YES," to the que	I who is appearing solely on behalf of your office ther governmental body?	NO is form. Į
on county lob	bying activities	organization you represent spend more than \$500 during the current reporting period? ☐ YES ☐ June or from July to December.)	NO
supervisors of	her than at pub	g more than 2 contacts with County Board blic hearings or meetings?	NO
more than 2 con	itacts at a later da	ns 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you nte, you must then contact the County Clerk's office to file a form indicating such activ hecked "YES" to either question at this time, go on to the next question.]	
spends more t financial discl [If you checked	han \$500 durin osure statemen	the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-C	NO County
Date:	0-27-17	Print Name John Breunig	
		Print Name John Breunig	

Committee Name: ZLR Name: ERIC GROVEN
Committee Name: ZLR Name: ERIC GROVEN DATE: 6 3-7 17 Municipality: OREGON
Petition/CUP #/Resolution/Ordinance Amendment/Subject:/ // 45
☑ 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?
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: 6/27/17 Signature ERIC GROVER

Committee Name:	ZLR	Name:	Danie	1 taul	SON	
DATE: Co. 2	7-17	Municij				
Petition/CUP #/Reso	lution/Ordina	nce Amendment/Sub	ject:	146		
Wish to Speak in S ☐ Registering in Supp		☐ Wish to Speak in Opp		☐ Available	for Information	n Only
		Ily representing an o		C		
STAN Rav	15 G76	r of each person or org lo Portage V 3283 Willowd	2 Defor	est WI	53532	(608) 846:3469
Comments:	grave w	X83 WIIIMA	ec cary ci	en ova WI	7	*
2. Are you being pai other paid duties for	r this person o o the question, <u>S</u>	resentation or appear organization? TOP; you need not compart of the property of the p			YES	□ NO
or for your municipa	ality or other g to the question,	is appearing solely or overnmental body? STOP; you need not con on to the next question.]		□		NO gn this form.
on county lobbying a	ctivities durin	ization you represent g the current reporti from July to December	ng period?		YES	NO K
supervisors other tha	an at public he	e than 2 contacts with earings or meetings? Board supervisor who re		🗆 `	YES reside.)	⊠ NO
more than 2 contacts at	a later date, you	d 5 above, <u>STOP</u> ; you no nust then contact the C "YES" to either questio	ounty Clerk's off	ice to file a form	indicating such	
spends more than \$5 financial disclosure s	00 during the tatement with lease call the Co	nat if the person or or current reporting per the county clerk? unty Clerk at 266-4121 of h.]	riod, you must	file a □	10.00.00.000.000.000.000.000.000.000.00	□ NO Eity-County
Date:	,17		Signature \(\) Print Name \(\)	Sanil	A. Fall	
			Print Name 1	Daniel A.	taulson	

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Municipality: DATE: Petition/CUP #/Resolution/Ordinance Amendment/Subject: 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 [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 DE 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 NO 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. 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?...... \(\square\) 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?..... (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.]

Committee Name: ZLR	Name:	Denni	13 Je	1/e		
DATE: 6-27-2017	Municip	ality: <u>Blu</u>	e mou	onds	500	
Petition/CUP #/Resolution/Ordina	nce Amendment/Subj	ect:	1114	9		
Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available	for Informat	ion On	ly
1 0 01 0 00 1					100	- -
1. On this occasion, are you officiangle. [If you checked "NO," STOP; you need		A NO)			estion.]
Name, address and telephone numbe	r of each person or orga	nnization you ar	e representing	; :		
Comments:						
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, Solution of the checked "YES," turn over to the	or organization? STOP; you need not compl		□	YES		NO
3. Are you an elected official who	is appearing solely on	behalf of your	office			
or for your municipality or other g [If you checked "YES," to the question, you checked "NO," to the question, go o	governmental body? STOP; you need not comp			YES that you must		NO is form. I
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	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 1 reside.)		NO
[If you checked "NO," to questions 4 an more than 2 contacts at a later date, you must also sign this form. If you checked	ı must then contact the Co	ounty Clerk's offic	ce to file a form	n indicating su		
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Consultation, Madison, for more information.	current reporting perion the county clerk? county Clerk at 266-4121 or	iod, you must f	ĭle a □	YES m 106A of the		NO County
Date: 4-27-2017	e .	Signature Signature)enni	Jill	1	
	,	Print Name	ennis	Jelle		

Committee Name: ZL12	Name:	Paul.	Schlie	ve	
DATE: 6-27-2017	Municipa	lity: Tow	1999	(Tax)	
Petition/CUP #/Resolution/Ordina	nce Amendment/Subject	ct: Barber	Road	11150	
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppos		☐ Available	e for Informatio	n Only
1. On this occasion, are you official [If you checked "NO," STOP; you need Name, address and telephone number Adam & Britany &	ally representing an org YES I not complete the rest of the	ganization or Notes is form. If you	a person otho O checked "YES,	er than yoursel	ır?
Comments:					
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, So If you checked "YES," turn over to the	or organization? STOP; you need not comple		□	YES	NO 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 compl				□ NO ign this form. I
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	ng the current reporting	The second second second second second		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 u reside.)	□ NO
[If you checked "NO," to questions 4 an more than 2 contacts at a later date, you must also sign this form. If you checked	u must then contact the Cou	unty Clerk's off	ice to file a for	m indicating sucl	
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Combuilding, Madison, for more information.	current reporting perion the county clerk?ounty Clerk at 266-4121 or	od, you must	file a □		□ NO City-County
Date: 6-27-2017		Signature /	Tul J St	Schlieue	
	P	rint Name 1	zul L.	Schlieue	

Committee Name: ZLR Name: ROBERT BROWNELL
DATE: 6-27-17 Municipality: TOWN OFDUNN
Petition/CUP #/Resolution/Ordinance Amendment/Subject: BARBER RD. 11150
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? YES □ 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:
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: Signature
Print Name ROBERS BPOUNELL

Committee Name: 24R	Name:	Christia	. 6. Karege	, 5 lemp	lete isk	stichem
DATE:	Municip	ality: <u>Ton</u>	nshipofl	Lestian	cy	
Petition/CUP #/Resolution/Ordi	nance Amendment/Subj	ect: <u>///</u>	51			
Wish to Speak in Support	☐ Wish to Speak in C					
☐ Registering in Support	☐ Registering in Opp	osition	☐ Available	e for Inforn	nation On	ly
1. On this occasion, are you office of the second of the s	TES eed not complete the rest of t	\Box 1 this form. If ye	NO ou checked "YES,	," go on to tl		estion.]
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2. Are you being paid for your other paid duties for this person [If you checked "NO" to the question If you checked "YES," turn over to a	n or organization? n, <u>STOP</u> ; you need not compl		□	YES		NO
3. Are you an elected official w	ho is appearing solely on	behalf of yo	our office			
or for your municipality or othe [If you checked "YES," to the question, you checked "NO," to the question,	er governmental body? on, <u>STOP</u> ; you need not comp					NO is form. If
4. Has or will the person or orgon county lobbying activities du (A reporting period is January to Jun	ring the current reportin	ıg period?		YES		NO
5. Do you anticipate making m supervisors other than at public (Do not count contacts with the Count	hearings or meetings?		🗆	YES ou reside.)		NO
[If you checked "NO," to questions a more than 2 contacts at a later date, must also sign this form. If you chec	you must then contact the Co	ounty Clerk's o	office to file a for	m indicating		
6. If "YES," do you understand spends more than \$500 during to financial disclosure statement was [If you checked "NO" please call the Building, Madison, for more informatical discountry.	he current reporting per with the county clerk? County Clerk at 266-4121 o	iod, you mu	st file a	YES om 106A of		NO Sounty
Date:		Signature_	Master 19	Ky .		
	2	Print Name	Chister 6	Kares	<i>.</i>	

Committee Name: Z	Name: Ruct Les/ie	<u> </u>
DATE: 6 - 27	200 (201	
Petition/CUP #/Resolution	on/Ordinance Amendment/Subject: /// 5 2	4
Wish to Speak in Suppo		
☐ Registering in Support		Only
[If you checked "NO," <u>STO</u>	you officially representing an organization or a person other than yourself	
Comments:		
other paid duties for this	or your representation or appearing incidental to your sperson or organization?	□ NO
or for your municipality [If you checked "YES," to th	ficial who is appearing solely on behalf of your office or other governmental body?	□ NO on this form. If
on county lobbying activ	n or organization you represent spend more than \$500 ities during the current reporting period?	□ NO
supervisors other than a	the County Board supervisor who represents the district in which you reside.)	□ NO
more than 2 contacts at a lat	estions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, is ter date, you must then contact the County Clerk's office to file a form indicating such you checked "YES" to either question at this time, go on to the next question.]	
spends more than \$500 d financial disclosure state	lerstand that if the person or organization you represent luring the current reporting period, you must file a ment with the county clerk?	110
Date:	Signature	
	Print Name	

Committee Name: ZLZ	Name:	Danie	of Taulson	
DATE: 6.27.17	Municipality	:		
Petition/CUP #/Resolution/Ordinar		1 1 1 1	53	
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition		☐ Available for Info	rmation Only
1. On this occasion, are you officia [If you checked "NO," <u>STOP</u> ; you need	YES	\square NO		
Name, address and telephone number Brandon Getchel		PD" Ve		53593
Comments:		*		
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, SI If you checked "YES," turn over to the results of the paid to	<u>TOP</u> ; you need not complete to			□ NO
3. Are you an elected official who or for your municipality or other go [If you checked "YES," to the question, you checked "NO," to the question, go of the checked "NO," to the question the checked "NO," to the question the checked "NO," to the	overnmental body? STOP; you need not complete		□ YES	NO must sign this form.
4. Has or will the person or organ on county lobbying activities during (A reporting period is January to June or	g the current reporting pe) NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County I	arings or meetings?			NO 🛱
[If you checked "NO," to questions 4 an more than 2 contacts at a later date, you must also sign this form. If you checked	must then contact the County	Clerk's office	e to file a form indicati	ing such activity. You
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Combuilding, Madison, for more information	current reporting period, the county clerk?unty Clerk at 266-4121 or go	you must fi	le a	-
Date:(a- 77-)7	Sig	nature L	Danil A. Tauk	ale sol

Committee Name: 1	LK	Name: Bro	oks	Fechl	nelm		
DATE: 627	.7N	Iunicipality:	Town	of P	leasant	Spria	95
Petition/CUP #/Resolutio	n/Ordinance Amendmer	nt/Subject:	2381	e e			7
Wish to Speak in Support	ort	eak in Opposition in Opposition	n 7	[A vailabl	le for Informa	tion Only	
1. On this occasion, are y [If you checked "NO," STOP Name, address and telepho	□ ?; you need not complete the	YES [rest of this form.	NO If you che	ecked "YES	S," go on to the		tion.]
Comments:							
2. Are you being paid for other paid duties for this [If you checked "NO" to the If you checked "YES," turn of	person or organization? question, <u>STOP</u> ; you need no	?		□	YES	□ 1	NO
3. Are you an elected off	icial who is appearing so	olely on behalf o	of your o	ffice			
or for your municipality of [If you checked "YES," to the you checked "NO," to the qu	or other governmental b e question, <u>STOP</u> ; you need t	ody?not complete the i		E	20 2000-2011-02-0		NO form. If
4. Has or will the person on county lobbying activity (A reporting period is January	ties during the current r	reporting period			YES		NO
5. Do you anticipate mal supervisors other than at (Do not count contacts with t	public hearings or meet	ings?			YES ou reside.)		NO
[If you checked "NO," to que more than 2 contacts at a late must also sign this form. If y	er date, you must then contac	ct the County Cler	rk's office	to file a for	rm indicating st		
6. If "YES," do you und spends more than \$500 definancial disclosure states [If you checked "NO" please Building, Madison, for more	uring the current reportinent with the county clerical the County Clerk at 266	ing period, you rk?	must file	e a □		□ No e City-Co	
Date:		Signatu	re				
		Print Nan	ne				

Committee Name: ZZZZ Name: Soel E Hougan
DATE: 6/27/17 Name: Soel E Hougan Municipality: Pleasant Spring S
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 238/
☐ 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: 6/27/17 Signature Dael E. Wongen Print Name Toel F Hougan
Print Name <u>Joel</u> F Hougan

Committee Name: ZLB Name: JEN Helvesson
Committee Name: ZLB Name: JEN Helves John DATE: 6-27-17 Municipality: Pleasant Actions
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2381
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 □ 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:
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: 6-27-17 Signature Print Name Frig (UZSSO)

Committee Name: Z LK	Nam	e: Ginges	- Hugema	とろと		
DATE: 6- 27-17	Muni	e: Gingsa icipality: Too	wh of	Albion)	
Petition/CUP #/Resolution/Ordin				5 - 4 - 85 - 53 - A.		
	tod ne extreme ove	D 00				
Wish to Speak in Support Registering in Support	☐ Wish to Speak i☐ Registering in C		□ Availab	le for Inform	ation On	157
Li Registering in Support	Li Registering in C	opposition	L Availab	ic for illioni	iation On	ly
1. On this occasion, are you office. [If you checked "NO," <u>STOP</u> ; you need	□ YI	ES 🗆	NO	3 0.		estion.]
Name, address and telephone number	ber of each person or o	organization you	are representi	ng:		
Comments:						
2. Are you being paid for your rother paid duties for this person [If you checked "NO" to the question If you checked "YES," turn over to the content of the person of the content of the person of th	or organization? STOP; you need not co			YES	П	NO
3. Are you an elected official whor for your municipality or other [If you checked "YES," to the question, gou checked "NO," to the question, g	r governmental body n, <u>STOP</u> ; you need not d	?complete the rest of				NO is form. Ij
4. Has or will the person or orgon county lobbying activities dur (A reporting period is January to June	ing the current repo	rting period?		YES		NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Count	hearings or meetings	§?	🗆	YES ou reside.)		NO
[If you checked "NO," to questions 4 more than 2 contacts at a later date, y must also sign this form. If you check	ou must then contact th	e County Clerk's	office to file a fo	rm indicating		
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement will [If you checked "NO" please call the Building, Madison, for more information of the statement will be used to	ne current reporting the the county clerk?. County Clerk at 266-412	period, you mu	st file a □	to the state of th		NO County
Date:		Signature				
		Print Name				

Committee Name:	Name:	Dory	\ G	19d		
DATE: 6/27/17	Municip	ality:				
Petition/CUP #/Resolution/Ordinance A	mendment/Subj	ect: C	P	2388	۷ ,	
Sta	ted " Not in	Opportion"	Just	had gu	ortes	N
	Yish to Speak in O Registering in Oppo		Ukute J Availabl	el Sulfo le for Inform		lv
La Registering in Support	legistering in Oppo	osition .	i Avanaoi	ic for inform	ation On	19
1. On this occasion, are you officially re		No. of the last of	person oth	er than you	rself?	
[If you checked "NO," <u>STOP</u> ; you need not co		his form If you ch	ecked "YFS	" an on to th	e next au	estion 1
ij jon checkeu 110, <u>5101</u> , jon need not et	imprese the rest of the	as joins 1) you en	eckeu 125	, 50 011 10 111	e next qui	on. j
Name, address and telephone number of e	ach person or orga	nnization you are	representir	ng:		
Comments:						
2. Are you being paid for your represent other paid duties for this person or org [If you checked "NO" to the question, STOP; If you checked "YES," turn over to the next question.	anization? you need not compl		□	YES		NO
3. Are you an elected official who is ap	pearing solely on	behalf of your o	office			
or for your municipality or other govern [If you checked "YES," to the question, <u>STOP</u> you checked "NO," to the question, go on to t	nmental body? ?; you need not comp					NO is form. If
4. Has or will the person or organization county lobbying activities during the (A reporting period is January to June or from	current reportin	g period?		YES		NO
5. Do you anticipate making more than	a 2 contacts with	County Board				
supervisors other than at public hearing (Do not count contacts with the County Board	gs or meetings?					NO
[If you checked "NO," to questions 4 and 5 at more than 2 contacts at a later date, you must must also sign this form. If you checked "YES	then contact the Co	ounty Clerk's office	to file a for	rm indicating		
6. If "YES," do you understand that if spends more than \$500 during the curre	ent reporting per	iod, you must fil	e a	»	/	
financial disclosure statement with the of [If you checked "NO" please call the County (Building, Madison, for more information.]						NO County
Data		Cionation				
Date:		Signature				
		Print Name				

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: ZLR Name: Victa Anderson
DATE: 6/27/2017 Municipality: Town of Springdale
Petition/CUP #/Resolution/Ordinance Amendment/Subject: # 2092
Support of purcation
Wish to Speak in Support
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: Town 3 Springdall 2379 Town Hall Rd., Mt Harb, WI 53572 608 1437 6230
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
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: 6 27 2017 Signature Vick Anderson Print Name Vicki Anderson

		E COUNTY COMMITTEE	
Committee Name: ZLR	Name:	John Rosenbaum pality: Springdale	Town Supervision
DATE: 6-27-/7	Munici	pality: Springdale	
Petition/CUP #/Resolution/Ordina	nce Amendment/Sub	oject: 2092	
		₩ IATW	
Wish to Speak in Support Registering in Support	☐ Wish to Speak in ☐ Registering in Op	Opposition Support of Revo	mation Only
1. On this occasion, are you offici	ally representing an o	organization or a person other than yo	urself?
	X YES	S D NO f this form. If you checked "YES," go on to	
Name, address and telephone number Springdale Town	er of each person or org	ganization you are representing:	
Comments:			
2. Are you being paid for your reother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	STOP; you need not com	yey 1120	□ NO
3. Are you an elected official who	is appearing solely o	on behalf of your office	
or for your municipality or other [If you checked "YES," to the question, you checked "NO," to the question, go	STOP; you need not cor	n behalf of your office YES supplete the rest of this form except that you n	□ NO nust sign this form. If
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current report	ing period? □ YES	X NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?.	25-10-24 1-10-	NO NO
more than 2 contacts at a later date, yo	u must then contact the (need not complete the rest of this form. How County Clerk's office to file a form indicatin on at this time, go on to the next question.]	The state of the s
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	e current reporting pe h the county clerk? ounty Clerk at 266-4121	eriod, you must file a	□ NO f the City-County
Date: 6-27-17		Signature John Rosento	
		Print Name John Rosento	aum

Committee Name:	Name:	DAN MLL	EN	
DATE: 6/27/17	Municipalit	y: ARINGT.	ALE JUNSH	P
Petition/CUP #/Resolution/Ordinanc	e Amendment/Subject:	2092		
Wish to Speak in Support	Wish to Speak in Oppo Registering in Opposit		Available for Informa	ation Only
1. On this occasion, are you officially [If you checked "NO," STOP; you need no Name, address and telephone number of	□ YES of complete the rest of this j	NO NO form. If you check	ed "YES," go on to the	
Comments:		,	d.	
2. Are you being paid for your representer paid duties for this person or of [If you checked "NO" to the question, STO If you checked "YES," turn over to the new	organization? OP; you need not complete		□ YES	☑ NO
3. Are you an elected official who is or for your municipality or other gov [If you checked "YES," to the question, ST you checked "NO," to the question, go on	vernmental body? TOP; you need not complete		□ YES	NO st sign this form. If
4. Has or will the person or organize on county lobbying activities during (A reporting period is January to June or fi	the current reporting p			□NO
5. Do you anticipate making more the supervisors other than at public hear (Do not count contacts with the County Bo	rings or meetings?			□ NO
[If you checked "NO," to questions 4 and more than 2 contacts at a later date, you must also sign this form. If you checked "	nust then contact the Count	ty Clerk's office to	file a form indicating .	
6. If "YES," do you understand tha spends more than \$500 during the cufinancial disclosure statement with the [If you checked "NO" please call the Cour Building, Madison, for more information.]	nrent reporting period he county clerk? hty Clerk at 266-4121 or go	you must file a to the Clerk's offi	D YES ce at Room 106A of the	□ NO he City-County
Date: 6/27/17	Si	gnature Ass	ALLEN	-

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: Stein Waver Name: Hice L. Allen
DATE: 6-27-17 Municipality: Springdale
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2092
REVOCATION
 ✓ Wish to Speak in Support ✓ 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:
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:

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REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Municipality: _) / > / > / DATE: Petition/CUP #/Resolution/Ordinance Amendment/Subject: Wish to Speak in Opposition ☐ Wish to Speak in Support ☐ 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 \square 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: **Comments:** 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? 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 or for your municipality or other governmental body?...... YES [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?..... 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?..... (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.] 6/27/17

Committee Name: Name:	Liyene Wolfer
DATE: 6 V) VOIZ Munici	pality: 3PRIngdale1
Petition/CUP #/Resolution/Ordinance Amendment/Sub	ject: 2092
☐ Wish to Speak in Support ☐ Registering in Support ☐ Registering in Opposit	
1. On this occasion, are you officially representing an or YES [If you checked "NO," STOP; you need not complete the rest of Name, address and telephone number of each person or org	□ NO this form. If you checked "YES," go on to the next question.]
Comments:	
2. Are you being paid for your representation or appear other paid duties for this person or organization? [If you checked "NO" to the question, <u>STOP</u> ; you need not compart you checked "YES," turn over to the next question.]	YES X NO
3. Are you an elected official who is appearing solely o	n behalf of your office
or for your municipality or other governmental body?.	
4. Has or will the person or organization you represen on county lobbying activities during the current reporti (A reporting period is January to June or from July to December	ng period? □ YES ▷□ NO
5. Do you anticipate making more than 2 contacts with supervisors other than at public hearings or meetings?. (Do not count contacts with the County Board supervisor who re	□ YES Þ. NO
	need not complete the rest of this form. However, if you do make County Clerk's office to file a form indicating such activity. You on at this time, go on to the next question.]
6. If "YES," do you understand that if the person or of spends more than \$500 during the current reporting perfinancial disclosure statement with the county clerk? [If you checked "NO" please call the County Clerk at 266-4121 Building, Madison, for more information.]	riod, you must file a
Date:6-27-17	Signature Edgene K. Colollan Print Name Edgene K 1070/181
	Print Name Edgene Kledoller

Committee Name:	Name:	Im wollen	
DATE: 6/27/2017	Municipality	: SPRINGOALE	
Petition/CUP #/Resolution/Ordinar		2092	
☐ Wish to Speak in Support ☐ Registering in Support	₩ish to Speak in Oppos Kar Registering in Opposition		Information Only
1. On this occasion, are you officia [If you checked "NO," STOP; you need Name, address and telephone number	not complete the rest of this fo	NO rm. If you checked "YES," go	
Comments: 2. Are you being paid for your repother paid duties for this person of			s Dr no
[If you checked "NO" to the question, S. If you checked "YES," turn over to the	TOP; you need not complete th	ne rest of this form.	14 110
3. Are you an elected official who or for your municipality or other g [If you checked "YES," to the question, you checked "NO," to the question, go of the checked "NO," to the question, go of the question is the question of the question.	overnmental body? STOP; you need not complete	YI	
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reporting pe		s ''n no
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County)	earings or meetings?		
[If you checked "NO," to questions 4 an more than 2 contacts at a later date, you must also sign this form. If you checked	must then contact the County	Clerk's office to file a form ind	icating such activity. You
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co Building, Madison, for more information	current reporting period, you the county clerk?	you must file a To the Clerk's office at Room 10	
Date: 6 27 7017	_	Name Timothy wo	uti

Committee Name: ZLR committee Name: JEFF HILLIARD
DATE: 6/27/2017 Municipality: Spring dale township
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CUP 209 Z
☐ 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: 6/27/2017 Signature
Print Name J.S. Hilliard

Committee Name:	Name:	Bob	Schultz		
DATE: <u>6/27/17</u>	Name: Municipality	•	Springd	ule	
Petition/CUP #/Resolution/Ordinan		A .	092		
	☑ Wish to Speak in Oppos ☐ Registering in Opposition		☐ Available	for Information	Only
1. On this occasion, are you officiall [If you checked "NO," STOP; you need no Name, address and telephone number		₩ N rm. If you	IO u checked "YES,'	" go on to the next	
Comments:					
2. Are you being paid for your reprother paid duties for this person or [If you checked "NO" to the question, ST If you checked "YES," turn over to the new teacher to the new teacher than the paid that the second	organization?OP; you need not complete th		□	YES [□ NO
3. Are you an elected official who is or for your municipality or other go [If you checked "YES," to the question, So you checked "NO," to the question, go on	vernmental body? TOP; you need not complete			YES [that you must sign	NO this form. 1
4. Has or will the person or organiz on county lobbying activities during (A reporting period is January to June or f	the current reporting pe			YES	□ NO
5. Do you anticipate making more supervisors other than at public hea (Do not count contacts with the County B	rings or meetings?			YES [reside.)	□ NO
[If you checked "NO," to questions 4 and more than 2 contacts at a later date, you must also sign this form. If you checked "	must then contact the County	Clerk's of	ffice to file a forn	n indicating such a	
6. If "YES," do you understand the spends more than \$500 during the crimancial disclosure statement with tagged [If you checked "NO" please call the Cou Building, Madison, for more information.	urrent reporting period, y the county clerk? nty Clerk at 266-4121 or go t	you must	t file a	YES □ m 106A of the Cit	
Date: 6/27/17	Sign	nature Name	Robert 9	Schult J Schultz	

Committee Name: LLK Name: KILAND Bloom Field
DATE: 6.27,2017 Municipality: Spring dale.
Petition/CUP #/Resolution/Ordinance Amendment/Subject: UP 2092
 □ Wish to Speak in Support □ 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 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:
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: Signature
Print Name

Committee Nam	e: ZLR		Name:/V	ve 1 h	lurron			
DATE: 6-3		N	Aunicipality:	SPA	KOUES	Le.		
Petition/CUP #/I	Resolution/Ordina	ince Amendme	nt/Subject:	.20	92			
☐ Wish to Speak☐ Registering in	~ ~	☑ Wish to Sp ☐ Registering			□ Availabl	e for Informat	tion On	ly
[If you checked "N	ion, are you offici O," <u>STOP</u> ; you need	l not complete the	YES rest of this for	n. If you c	hecked "YES	," go on to the		estion.]
Comments:								-
other paid dutie [If you checked "N	g paid for your rest for this person of O" to the question, gets," turn over to the	or organization STOP; you need n	?		□	YES		NO
or for your muni [If you checked "Y	lected official who icipality or other ES," to the question, to the question, go	governmental h <u>STOP</u> ; you need	ody? not complete th		E			NO is form. Ij
on county lobbyi	ne person or organing activities during is January to June o	ng the current	reporting peri			YES '		NO
supervisors othe	ipate making mor r than at public h acts with the County	earings or mee	tings?			YES ou reside.)	П	NO
more than 2 contac	O," to questions 4 a ets at a later date, yo form. If you checked	u must then conta	ct the County C	lerk's offic	ce to file a for	rm indicating st		
spends more that financial disclosu [If you checked "N	you understand to \$500 during the tree statement with O" please call the C for more information.	current report the county cle ounty Clerk at 26	ting period, yeerk?	ou must f	ile a □			NO County
Date:	1/2017			ature	last 1	lulf	22	0
			Print N	lame _ //	ou pr	111017		

Committee Name:	Name: MATT SCHEENER
DATE: 6/13/17	Municipality: TONN OF WESTPORT ce Amendment/Subject: 2017 LD - 012 /013
Petition/CUP #/Resolution/Ordinan	ce Amendment/Subject: 2017 LD - 012 /013
Wish to Speak in Support	The wind of the control of the contr
	☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," STOP; you need in Name, address and telephone number	ly representing an organization or a person other than yourself? NO not complete the rest of this form. If you checked "YES," go on to the next question.] of each person or organization you are representing: BAY FRAIRE
Comments:	
2. Are you being paid for your reprother paid duties for this person or [If you checked "NO" to the question, SI If you checked "YES," turn over to the n	resentation or appearing incidental to your organization? ————————————————————————————————————
3. Are you an elected official who i	s appearing solely on behalf of your office
or for your municipality or other go	overnmental body?
	zation you represent spend more than \$500 g the current reporting period?
<u>:</u> ₩:	than 2 contacts with County Board arings or meetings?
more than 2 contacts at a later date, you	Is above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make must then contact the County Clerk's office to file a form indicating such activity. You "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the c financial disclosure statement with	at if the person or organization you represent current reporting period, you must file a the county clerk? The Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County of the Clerk's like the Clerk's office at Room 106A of the City-County of the Clerk's like the Clerk's office at Room 106A of the City-County of the Clerk's like the Clerk's like the Clerk's office at Room 106A of the City-County of the Clerk's like the Cle
Date: 6 27 17	Signature
	Print Name MATT SCHRENER