REGISTRATION BEFORE COUNTY COMM Municipality: 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 ☑ 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? YES NO. [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over to the next question.] 3. Are you an elected official who is appearing solely on behalf of your office 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?......

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

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: DATE: Municipality: 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 NO 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 NO NO (A reporting period is January to June or from July to December.) 5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?..... NO 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 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?...... 🔼 YES [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.]

Date: 2 / 20 / 5

Print Name Exic Howland

ION BEFORE COUNTY COMMITTEE ALOCY- Joose Name: Committee Name: Municipality: H 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? TYES NO 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? YES [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?......

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Print Name Corinda Paintey-Moore

Committee Name: PPJ Name: Joseph Baring
DATE: 9-21-15 Municipality: Alternatives to Incarceration
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 DO [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?
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: 9-21-75 Signature Pour Baring Print Name Toseph Baring

Committee I	Name: PP+J	Name:	LISA	MUNR	20	
DATE:	9-21-15	Municipa	lity:			
Petition/CU	P #/Resolution/Ordina	nce Amendment/Subje	ct:			
	peak in Support ag in Support	☐ Wish to Speak in Op ☐ Registering in Oppo		□ Available	for Informatio	n Only
[If you checke	rd "NO," <u>STOP</u> ; you need	ally representing an org	is form. If you) checked "YES,"	" go on to the ne	
Comments:						 3
other paid of [If you checke	duties for this person o	presentation or appeari or organization? STOP; you need not comple next question.]		□	YES	□ NO
or for your i	municipality or other	o is appearing solely on governmental body? STOP; you need not compon to the next question.]				□ NO ign this form. ↓
on county lo	bbying activities duri	nization you represent song the current reporting or from July to December.)			YES	□ NO
supervisors	other than at public h	e than 2 contacts with (earings or meetings? Board supervisor who repr		🗆	YES 1 reside.)	□ NO
more than 2 c	ontacts at a later date, yo	nd 5 above, <u>STOP;</u> you nee u must then contact the Cod d "YES" to either question	unty Clerk's offi	ice to file a form	n indicating suc	
spends more financial dis [If you checke	e than \$500 during the closure statement with	that if the person or orge current reporting perion the county clerk?ounty Clerk at 266-4121 or on.]	od, you must	file a □	YES om 106A of the 0	□ NO City-County
Date:	9-21-15		Signature	Lua a	Duenn	
		F	Print Name			

Committee Name:	Praz	Name:	Ninp	RODRIGUEL	
DATE:	9/21/15	Municip	ality:	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
Petition/CUP #/Resolu	ution/Ordinano	ce Amendment/Subj	ect:		
Wish to Speak in Su ☐ Registering in Support	The state of the s	☐ Wish to Speak in C☐ Registering in Opp		☐ Available for Inf	formation Only
1. On this occasion, a [If you checked "NO," S Name, address and tele	TOP; you need n	☐ YES ot complete the rest of t	his form. If you	checked "YES," go on	
Comments:			0.00000		
2. Are you being paid other paid duties for [If you checked "NO" to If you checked "YES," to	this person or the question, <u>STC</u>	organization? OP; you need not comp		□ YES	□ NO
3. Are you an elected or for your municipal [If you checked "YES," to you checked "NO," to the	ity or other gover the question, ST	vernmental body? TOP; you need not com		YES	
4. Has or will the per on county lobbying ac (A reporting period is Jan	tivities during	the current reportir	ng period?		□ NO
5. Do you anticipate supervisors other than (Do not count contacts w	n at public hea	rings or meetings?	• • • • • • • • • • • • • • • • • • • •		□ NO
[If you checked "NO," to more than 2 contacts at a must also sign this form.	later date, you n	must then contact the Co	ounty Clerk's off	ice to file a form indica	ating such activity. You
6. If "YES," do you spends more than \$50 financial disclosure st [If you checked "NO" ple Building, Madison, for m	O during the contact with the case call the Country	urrent reporting per he county clerk? nty Clerk at 266-4121 c	iod, you must	file a	□ NO A of the City-County
Date:9/2(15		Signature	NINO RODRIGI	
			Print Name	NIND RODRIE	EE

Committee Name: PPJ	Name: Jason Murcko
DATE: 9/21/2015	Municipality: Madison
Petition/CUP #/Resolution/Ordin	ance Amendment/Subject: Res 556 Workgroup recommendation (length of stay #4 in particular)
☑ Wish to Speak in Support ☐ Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
[If you checked "NO," <u>STOP</u> ; you nee	ially representing an organization or a person other than yourself? NO ed not complete the rest of this form. If you checked "YES," go on to the next question.] per of each person or organization you are representing:
other paid duties for this person [If you checked "NO" to the question,	epresentation or appearing incidental to your or organization?
or for your municipality or other	no is appearing solely on behalf of your office regovernmental body?
	ing the current reporting period? YES NO or from July to December.)
supervisors other than at public	hearings or meetings?
more than 2 contacts at a later date, y	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do mo you must then contact the County Clerk's office to file a form indicating such activity. You want to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement wi	that if the person or organization you represent ne current reporting period, you must file a th the county clerk? County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County ion.]
Date:	Signature
	Print Name

Committee Name:	PPJ	Name:	MARK Hoo	JEN	
DATE:	9/21/2315	Municipality:	Middlet	Low	
Petition/CUP #/Resolu	pport Wish t	dment/Subject:	County Wa	In Gray no	
on Regum	ing The Gerinin	ed Turtier S	repture	27-1	
	pport □ Wish t	o Speak in Opposit	ion		38
☐ Registering in Suppo	ort	ering in Opposition	n □ Avail	able for Informat	ion Only
[If you checked "NO," SI	re you officially represented to the representation of each perfect the representation of the	YES te the rest of this forterson or organizati	NO m. If you checked "I on you are represen	YES," go on to the	next question.]
Comments:					
other paid duties for [If you checked "NO" to	for your representation this person or organizathe question, <u>STOP</u> ; you not not not to the next question.	tion?eed not complete the		□ YES	⊠ NO
or for your municipal [If you checked "YES," to	l official who is appeariity or other governmen o the question, <u>STOP</u> ; you e question, go on to the nex	tal body?need not complete th			NO sign this form.
on county lobbying ac	rson or organization youtivities during the curr nuary to June or from July	ent reporting per		□ YES	⊠ NO
supervisors other than	making more than 2 con at public hearings or ith the County Board super	meetings?	•••••	YES h you reside.)	□ NO
more than 2 contacts at a	questions 4 and 5 above, a later date, you must then If you checked "YES" to e	contact the County (Tlerk's office to file a	form indicating st	
spends more than \$50 financial disclosure st	understand that if the p 0 during the current re atement with the count ease call the County Clerk tore information.]	eporting period, y	ou must file a	₫ YES	□ NO e City-County
Date:	9/27/15	Sign	ature		
		Print N	Jame MARI	2 HOOVED	_

Committee Name: Name: Joan Repret
DATE: 9/2//2015 Municipality: Madison
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Work (Stouge Cremenel Justic
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? YES NO [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. 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?
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: 9/21/2015 Signature Joan Wurst Print Name Joan Dalrst

Committee Name: PPZ Name: Paul Sae Man
DATE: 9 21/15 Municipality:
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 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:
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 Name: CRIMINAL	Jystice Name: CAROLIN	E WERNER	
	Municipality: DA		
Petition/CUP #/Resolution/Ordina	ance Amendment/Subject:		
Wish to Speak in Support	☐ Wish to Speak in Opposition		2.02
☐ Registering in Support	☐ Registering in Opposition	☐ Available for Informati	on Only
	ally representing an organization o		elf?
[If you checked "NO," STOP; you need	d not complete the rest of this form. If yo	ou checked "YES," go on to the n	ext question.]
Name, address and telephone number	er of each person or organization you	are representing:	
Comments:			
other paid duties for this person	presentation or appearing incident or organization?	□ YES	□ NO
or for your municipality or other	o is appearing solely on behalf of your governmental body?	□ YES	□ NO sign this form. If
	nization you represent spend more ng the current reporting period? or from July to December.)		□ NO
supervisors other than at public h	re than 2 contacts with County Board supervisor who represents the di		□ NO
more than 2 contacts at a later date, yo	and 5 above, <u>STOP</u> ; you need not comple ou must then contact the County Clerk's d "YES" to either question at this time, g	office to file a form indicating su	
spends more than \$500 during the financial disclosure statement wit	that if the person or organization ye current reporting period, you muth the county clerk?	st file a YES	NO City-County
Date: Any training 10'. Behaviors Haveto stop assault uerlally 7 pl	Signature	who are abuse s	urinos.

Committee Name:	Name: Patricia L. Rall
DATE: 9/22/15 P	Municipality:
Petition/CUP #/Resolution/Ordinance Amendme	ent/Subject:
[위하	peak in Opposition □ Available for Information Only
	e rest of this form. If you checked "YES," go on to the next question.]
Comments:	
2. Are you being paid for your representation or other paid duties for this person or organization [If you checked "NO" to the question, <u>STOP</u> ; you need to If you checked "YES," turn over to the next question.]	n?□ YES □ NO
3. Are you an elected official who is appearing so or for your municipality or other governmental language [If you checked "YES," to the question, STOP; you need you checked "NO," to the question, go on to the next question.	body?
4. Has or will the person or organization you re on county lobbying activities during the current (A reporting period is January to June or from July to De	reporting period? □ YES □ NO
5. Do you anticipate making more than 2 contacts supervisors other than at public hearings or mee (Do not count contacts with the County Board supervisors)	etings? 🗆 YES 🗖 NO
	P; you need not complete the rest of this form. However, if you do make act the County Clerk's office to file a form indicating such activity. You r question at this time, go on to the next question.]
6. If "YES," do you understand that if the person spends more than \$500 during the current report financial disclosure statement with the county classification (If you checked "NO" please call the County Clerk at 26 Building, Madison, for more information.]	ting period, you must file a
Date:	Signature
	Print Name

Committee Name:	PPJ Name: Leila C. Pine
DATE: 9-21-15	Municipality: Madison
Petition/CUP #/Resolution	n/Ordinance Amendment/Subject: Res, 556
Wish to Speak in Support ☐ Registering in Support	That ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," <u>STO</u>	you officially representing an organization or a person other than yourself?
Comments:	
other paid duties for thi	r your representation or appearing incidental to your sperson or organization? ————————————————————————————————————
or for your municipality [If you checked "YES," to the	ficial who is appearing solely on behalf of your office or other governmental body?
on county lobbying activ	or organization you represent spend more than \$500 ities during the current reporting period?
supervisors other than a	king more than 2 contacts with County Board public hearings or meetings?
more than 2 contacts at a la	estions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make er date, you must then contact the County Clerk's office to file a form indicating such activity. You checked "YES" to either question at this time, go on to the next question.]
spends more than \$500 of financial disclosure state	lerstand that if the person or organization you represent uring the current reporting period, you must file a ment with the county clerk?
Date:	Signature
	Print Name

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

Print Name

Date: