Committee Name: Name: Sic Job and
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 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?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? YES NO [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. you checked "NO," to the question, go on to the next question.]
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: Signature En Hawlus

Committee Name: Name: Name: Name:
DATE: 6 13 17 Municipality: 9 MM162
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Option 3 Mad Hut 10 port
☑ 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?  [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. you checked "NO," to the question, go on to the next question.]
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date:
Print Name North KOSSIAT

Committee Name: PP+3 Name: Falph Jacks
DATE: 13 June 17 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Jan Replaced Story
☐ 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?   YES NO [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: 13 Dane 14  Print Name Foliah Hodache de.

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: PP&J Name: Tim Kiefer  DATE: Jule 13, 2017 Municipality:
DATE: JULE 13, 2017 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
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 D NO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:  Directory Bowd District 25
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, 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?  [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. you checked "NO," to the question, go on to the next question.]
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ 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: Jone 13, 2017  Signature Jim KIEFER  Print Name TIM KIEFER
Print Name TIM KIEFER

Committee Name:	Name: de leposte Option #3
DATE: 6/13/17	Municipality: County Done
Petition/CUP #/Resolution/Ordinance Amendm	ent/Subject:
	peak in Opposition  In a part of the property
1. On this occasion, are you officially represent	ing an organization or a person other than yourself?  YES □ NO  the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person	on or organization you are representing:
Comments:	
2. Are you being paid for your representation of other paid duties for this person or organizatio [If you checked "NO" to the question, <u>STOP</u> ; you need If you checked "YES," turn over to the next question.]	n?
3. Are you an elected official who is appearing or for your municipality or other governmental [If you checked "YES," to the question, <u>STOP</u> ; you nee you checked "NO," to the question, go on to the next q	body?
4. Has or will the person or organization you ron county lobbying activities during the current (A reporting period is January to June or from July to I	t reporting period?
5. Do you anticipate making more than 2 conta supervisors other than at public hearings or me (Do not count contacts with the County Board supervisors)	eetings?   VES   NO
	OP; you need not complete the rest of this form. However, if you do make tact the County Clerk's office to file a form indicating such activity. You her question at this time, go on to the next question.]
6. If "YES," do you understand that if the perspends more than \$500 during the current reporting financial disclosure statement with the county of [If you checked "NO" please call the County Clerk at 2 Building, Madison, for more information.]	orting period, you must file a
Date: 4/3/17	Signature Patty Plants

Committee Name: PP & J Name: Barbie Jackson
DATE: 6/13/17 Municipality: Madison
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Mead > 1/unt Report
□ 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," <u>STOP</u> ; 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:  M 09E5
Registering in support of elimination of solitary confinences  Comments: and building of solitary spaces, especially on bender  of the mentally ill.
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: 6/13/17 Signature Bashie Jackson