Committee Name:	Name:	gary	Mils	ou	
DATE: JULY 26 2016	Municipal	ity: <i>100</i>	WOF BO	erry	
Petition/CUP #/Resolution/Ordinance			LONE	TWO G	375
			11000	····	***
	Wish to Speak in Oppos Registering in Oppos		☐ Available f	for Information	n Only
1. On this occasion, are you officially [If you checked "NO," <u>STOP</u> ; you need not		Q NO			
Name, address and telephone number of	each person or organ	ization you ar	e representing:		
Comments:			-		——
2. Are you being paid for your representation of the paid duties for this person or of the control of the control of the properties of the properties of the person of the	rganization? P; you need not complet			YES	9 NO
3. Are you an elected official who is a or for your municipality or other gove [If you checked "YES," to the question, STO you checked "NO," to the question, go on to	e <mark>rnmental body?</mark> OP; you need not comple		□	YES that you must sig	NO No gn this form.
4. Has or will the person or organiza on county lobbying activities during t (A reporting period is January to June or from	he current reporting			YES	□ NO
5. Do you anticipate making more the supervisors other than at public hearing (Do not count contacts with the County Box	ings or meetings?		🗆 `	YES reside.)	₽ NO
[If you checked "NO," to questions 4 and 5 more than 2 contacts at a later date, you must also sign this form. If you checked "Y	ust then contact the Cou	nty Clerk's offi	ce to file a form	indicating such	if you do make activity. You
6. If "YES," do you understand that spends more than \$500 during the curfinancial disclosure statement with the [If you checked "NO" please call the Count Building, Madison, for more information.]	rrent reporting perio e county clerk?	d, you must	file a □	YES In 106A of the C	□ NO City-County
Date: _ Fly26 201	6	Signature	DAY W	USON WELSON	

Committee Name:	ZLR	Name:	FANICE	G.	DOYLE		
DATE: $7/26$	12016	Municipa	lity: Towns	SHIP OF	CROSS	PLAINS	5
Petition/CUP #/Reso	/ lution/Ordinance	Amendment/Subje	ct: REZON	JE # 1	1002		a
☑ Wish to Speak in S☐ Registering in Sup		Wish to Speak in Oppo Registering in Oppo		□ Availab	le for Inform	ation Onl	у
1. On this occasion, [If you checked "NO," Name, address and te	STOP; you need not	YES complete the rest of th	is form. If you o) checked "YE	S," go on to th		stion.]
Comments:				·			•8
2. Are you being pa other paid duties for [If you checked "NO" to If you checked "YES,"	r this person or or to the question, <u>STOI</u>	ganization? 2; you need not comple		□	YES		NO
3. Are you an elected or for your municipal [If you checked "YES," you checked "NO," to the second of the second o	a <mark>lity or other gove</mark> to the question, <u>STC</u>	rnmental body? PP; you need not comp					NO s form. If
4. Has or will the poor county lobbying a (A reporting period is J.	activities during th	ne current reporting			1 YES		NO
5. Do you anticipat supervisors other the (Do not count contacts	an at public heari	ngs or meetings?		🗆			NO
[If you checked "NO," more than 2 contacts at must also sign this form	a later date, you mu	st then contact the Con	unty Clerk's offi	ce to file a fo	orm indicating		
6. If "YES," do you spends more than \$5 financial disclosure s [If you checked "NO" p Building, Madison, for	500 during the cur statement with the please call the County	rent reporting peri-	od, you must f	ïle a □			NO ounty
Date;			Signature				
		F	Print Name				

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
□ Wish to Speak in Support □ Wish to Speak 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.]
□ Wish to Speak in Support □ Wish to Speak 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.]
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.]
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
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: 7-26-16 Signature Josh Aeschball Print Name Josh Aeschball

Committee Name:	Name:	Vich	Morri	5	
DATE: 7-26-16	Municip	ality: Albu	201, 10	washi	W
Petition/CUP #/Resolution/Ordinar	nce Amendment/Subj	ect: 110	04		1
Wish to Consile in Comment	Wish to Casals in C	Nana sitian			
☐ Wish to Speak in Support Registering in Support	☐ Wish to Speak in C☐ Registering in Opp	21023	☐ Available	for Information	Only
1. On this occasion, are you official. [If you checked "NO," <u>STOP</u> ; you need	X YES	□ NO			
Name, address and telephone number Ruclisill LL Leit Henghel	of each person or orga	anization you are	representing	:	
Comments:		ď			
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, Single Jump of the paid the p	r organization? TOP; you need not comp		□ `	YES)	NO
3. Are you an elected official who or for your municipality or other ge [If you checked "YES," to the question, go or checked "NO," to the question, go or other general properties.	overnmental body? STOP; you need not com		□		NO this form.
4. Has or will the person or organion county lobbying activities durin (A reporting period is January to June or	g the current reportir	ng period?		yes)	NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County I	arings or meetings?			YES reside.)	NO NO
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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 per the county clerk? unty Clerk at 266-4121 c	iod, you must f	ile a □	YES □ n 106A of the Cit	NO y-County
Date: 7-26-16		Signature	icu !	louris	
		Signature	-26-16 icki X	1011is	

Committee Name:	Name:	Amy H	oesly			
DATE: 7/26/16	Municipa	ality: <u>(Mris</u>	tiana			
Petition/CUP #/Resolution/Ordinar	nce Amendment/Subje	ect: Rezone	11005	CUP23	54_	
₩ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppo	C. (313)	□ Availab	le for Informa	ntion On	ly
1. On this occasion, are you official [If you checked "NO," <u>STOP</u> ; you need	YYES	□ NO				estion.]
Name, address and telephone number Pan and David Hoesl					5362 8) 511	23 0-3611
Comments:						
2. Are you being paid for your reporter paid duties for this person of [If you checked "NO" to the question, SI If you checked "YES," turn over to the telephone to the telephone paid for your paid the paid to t	r organization? FOP; you need not comple			YES	×	NO
3. Are you an elected official who or for your municipality or other go [If you checked "YES," to the question, go o ou checked "NO," to the question, go o	overnmental body? STOP; you need not comp				🙇 st sign thi	
4. Has or will the person or organion county lobbying activities during (A reporting period is January to June or	g the current reporting			1 YES	岚	NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County I	arings or meetings?				M	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 Co	unty Clerk's offi	ce to file a fo	orm indicating .		
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Cor Building, Madison, for more information	current reporting peri the county clerk? unty Clerk at 266-4121 or	od, you must f	ile a □			NO County
Date:	s - 2	Signature				
	Ĩ	Print Name				

Committee Name: ZLR	Name: Municipa	WAYNE	Web	ser	
DATE: 7-26-16	Municipa	ality: Town	s of	Vero	Na
Petition/CUP #/Resolution/Ordinal					
Wish to Speak in Support □ Registering in Support	☐ Wish to Speak in Oppo☐ Registering in Oppo		Available f	or Informatic	on 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 th	NO	ked "YES,"	-	
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 first you checked "YES," turn over to the first your years.	r organization? TOP; you need not comple		□ Y	ES	₩ NO
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 o	overnmental body? STOP; you need not comp		□		NO No sign this form.
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			YES	X NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County l	earings or meetings?			YES reside.)	NO X
[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 Co	unty Clerk's office to	file a form	indicating suc	
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 perion the county clerk?	od, you must file	by	YES n 106A of the (□ NO City-County
Date: 7-26-16		Signature	acy	De	Sur

Committee Name:Name:Name:
DATE: July 26, 2016 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
 □ Wish to Speak in Support □ Registering in Support □ Registering in Opposition □ 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:
317 Severson Lane, Strught, wit, 53589
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: 7/26/2016 Signature Sun L. Slinde

Committee Name: Zunn, + land Reg Nar	me: MARK JUMNSTEN
DATE: 7/26/12 Mun	nicipality: Primrose
Petition/CUP #/Resolution/Ordinance Amendment/S	Subject: Rezone 11008 CUP 2348
☐ Wish to Speak in Support ☐ Wish to Speak	in Opposition
Registering in Support	5-8
1. On this occasion, are you officially representing a	
Name, address and telephone number of each person or MARK Johnston 227 Jeans He Rd B	
Comments:	(WO) 3) 3 0 °
 Are you being paid for your representation or ap other paid duties for this person or organization? . [If you checked "NO" to the question, STOP; you need not of If you checked "YES," turn over to the next question.] Are you an elected official who is appearing solel or for your municipality or other governmental body 	y on behalf of your office
	complete the rest of this form except that you must sign this form. I
4. Has or will the person or organization you represon county lobbying activities during the current reporting period is January to June or from July to December 1.	orting period? 🗆 YES 📈 NO
5. Do you anticipate making more than 2 contacts valuervisors other than at public hearings or meeting (Do not count contacts with the County Board supervisor where Board supervisor where the county Board supervisor where Board su	gs? 🗆 YES 🔯 NO
	ou need not complete the rest of this form. However, if you do make he County Clerk's office to file a form indicating such activity. You estion at this time, go on to the next question.]
6. If "YES," do you understand that if the person of spends more than \$500 during the current reporting financial disclosure statement with the county clerk? [If you checked "NO" please call the County Clerk at 266-4. Building, Madison, for more information.]	g period, you must file a
Date: 7/26/16	Signature 1
	Print Name MARIZ Johnsh

Committee Name: ZLR	Name:	OWEN	STORLIE	5		
DATE: 7-26-16	Municip	ality: To u	IN OF DO	EERFIELD		
Petition/CUP #/Resolution/Ordina	nce Amendment/Subj	ect: //0	09			
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		□ Availa	ble for Informa	tion Onl	y
1. On this occasion, are you official. [If you checked "NO," STOP; you need	YES	1 🗆	OV			estion.]
Name, address and telephone number Storice JT IRRE 1008 ZECHER RD	er of each person or orga レ レルタフル	anization you RAM <i>on</i>	are represent	ing: EUERLY J		
1008 ZECHER RD	PEERFIELD.					
Comments:						
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? STOP; you need not comp		⊏	1 YES	地	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 com			.□ YES cept that you mus		NO
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June of	ng the current reportin	ng period?		□ YES	П	NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?		[NO
[If you checked "NO," to questions 4 a more than 2 contacts at a later date, yo must also sign this form. If you checked	u must then contact the Co	ounty Clerk's d	office to file a f	form indicating 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 Communication, Madison, for more information.	e current reporting per th the county clerk? ounty Clerk at 266-4121 o	iod, you mus	st file a [□ YES		NO County
Date: 7-26-16		Signature <i>L</i>	2 St	9		
		Print Name	UWEN S	STORCIE		

Committee Name: Name: Swisper
DATE: 7/26/16 Municipality: Blooming Grove
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? 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: Trhy 26, 2016 Signature Signature
Date: Vnhy 26, 2016 Signature Parl Spets

Committee Name:	Name: Name: Name:
DATE: 7-26-16	Municipality: TOWN OF DUNKTRK
Petition/CUP #/Resolution/Ordin	ance Amendment/Subject: [[O]]
☐ Wish to Speak in Support ■ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
	ially representing an organization or a person other than yourself? NO In the next question. If you checked "YES," go on to the next question.]
AND DESCRIPTION OF PROPERTY AND ADDRESS AND ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY OF	per of each person or organization you are representing:
BERIOTNE ALME	919 TOWER DR STOUGHTON WI
Comments:	
other paid duties for this person	epresentation or appearing incidental to your or organization?
or for your municipality or other	o is appearing solely on behalf of your office governmental body?
	ing the current reporting period? YES NO or from July to December.)
supervisors other than at public	re than 2 contacts with County Board 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 mak ou must then contact the County Clerk's office to file a form indicating such activity. You ed "YES" to either question at this time, go on to the next question.]
spends more than \$500 during th financial disclosure statement wi	that if the person or organization you represent e current reporting period, you must file a th the county clerk?
Date: 7-26-16	Print Name DALE ALME
	Print Name DALE ALME

Committee Name: Chvistian DATE: 726/16	Name:	Robert	AVE	EUM
DATE: /26/16	Municipalit	y: Christiana		
Petition/CUP #/Resolution/Ordin	nance Amendment/Subject:	1108	2	
✓ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Oppo		vailable for In	formation Only
La Registering in Support	Li Registering in Opposit		tvanable for m	torniation Only
1. On this occasion, are you office. [If you checked "NO," <u>STOP</u> ; you ne	YES eed not complete the rest of this j	form. If you check	ed "YES," go on	550
Name, address and telephone num	ber of each person or organiz	ation you are rep	resenting:	
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	n or organization?		□ YES	□ №
3. Are you an elected official whor for your municipality or othe [If you checked "YES," to the question, gou checked "NO," to the question, g	r governmental body? on, <u>STOP</u> ; you need not complete		YES	
4. Has or will the person or org on county lobbying activities du (A reporting period is January to June	ring the current reporting p			□ NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Count	hearings or meetings?			□ NO
[If you checked "NO," to questions 4 more than 2 contacts at a later date, must also sign this form. If you check	you must then contact the Count	ty Clerk's office to	file a form indice	ating such activity. You
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement we [If you checked "NO" please call the Building, Madison, for more information of the statement we have a supplied to the statement with the statement we have a supplied to the statement with the statem	he current reporting period ith the county clerk? County Clerk at 266-4121 or go	, you must file a	D YES	
Date: 7/26/16	Si	ignature /	utqu	Juna Voum
	Prin	nt Name KA6	PST F	+ Vrum

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: 2 R Name: Howard Lour Souste. Carly
DATE: 7/26/20/6 Municipality: (Mustine)
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 1(0)3
₩ 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?
[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? ☐ 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: Jules 26,204 Signature Colory San

Committee Name:	Name: Bruce & Debre Dorn
DATE: 7/26/16	Municipality: Dane to Town york
Petition/CUP #/Resolution/Ordinance	e Amendment/Subject: 1)014
	☐ Wish to Speak in Opposition
☐ Registering in Support ☐	Registering in Opposition
	y representing an organization or a person other than yourself? NO of complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number o	of each person or organization you are representing:
	DOFA 920-988-0920
839 Lun Ave	Waterloo WI 53594
Comments:	
other paid duties for this person or o	esentation or appearing incidental to your organization?
or for your municipality or other gov	appearing solely on behalf of your office yernmental body?
•	the current reporting period? Tom July to December.)
5. Do you anticipate making more the supervisors other than at public hear (Do not count contacts with the County Bo	
more than 2 contacts at a later date, you m	5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make nust 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 cu financial disclosure statement with th	t if the person or organization you represent arrent reporting period, you must file a the county clerk?
Date: 7-26-16	Signature Brue Don's
	Print Name Brue Doni

Committee	Name: ZLR	Name: Adm TEN	MPLER	
DATE:	7/26/16	Municipality: <u> </u>	- Majon	
Petition/C	UP #/Resolution/Ordina	nce Amendment/Subject: Регоид	11018	
	Speak in Support ing in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐	Available for Information	on Only
		Ily representing an organization or a per Section 1 NO not complete the rest of this form. If you chec		
		of each person or organization you are re		
Novato	in Serier Aprilme	utr, LLC YON 80th St,	Kenosha, WI	53142
Mid to	our Center, LL	utr, LLC YON 80th St,		
Comments				
other paid [If you check	duties for this person o	resentation or appearing incidental to yr organization?	□ YES	₽ NO
or for your [If you check	r municipality or other g	is appearing solely on behalf of your of overnmental body?	□ YES	NO No sign this form.
on county		ization you represent spend more than g the current reporting period? from July to December.)		NO VA
supervisor	s other than at public h	e than 2 contacts with County Board earings or meetings?		NO NO
more than 2	contacts at a later date, you	d 5 above, <u>STOP</u> ; you need not complete the must then contact the County Clerk's office t "YES" to either question at this time, go on t	to file a form indicating suc	
spends mo financial d [If you chec	re than \$500 during the isclosure statement with	nat if the person or organization you reported the county clerk?	a □ YES	□ NO City-County
Date:	7/24/2014	Signature	M TEMPLER	
		Print Name	IN TEMPLER	

Committee Name: ZLR	Name:	Matthe	w D. M.	eier		
DATE: 7/26/2016	Municipa	ality: <u>Town</u>	of Modi	ron		
Petition/CUP #/Resolution/Ordin	nance Amendment/Subje	ect: <u>Rezov</u>	e 11015			
□ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppo	ASS	⊠ Availabl	e for Inform	ation On	ly
1. On this occasion, are you office. [If you checked "NO," <u>STOP</u> ; you ne	YES		1O			estion.]
Name, address and telephone num	ber of each person or organ	V.**	770	g:		· · · · · · · · · · · · · · · · · · ·
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	n or organization? g, <u>STOP</u> ; you need not comple		□	YES	ja	NO
3. Are you an elected official wlor for your municipality or other [If you checked "YES," to the question, good checked "NO," to the question, g	r governmental body? on, <u>STOP</u> ; you need not comp		E			NO is form. If
4. Has or will the person or orgon county lobbying activities dual (A reporting period is January to June	ring the current reporting	g period?		YES		NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Coun	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	you must then contact the Co	unty Clerk's o	ffice to file a for	m indicating		
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement was [If you checked "NO" please call the Building, Madison, for more informatical disclosure statement.	he current reporting peri- ith the county clerk? County Clerk at 266-4121 or	od, you mus	t file a			NO County
Date: 7/26/2016		Signature	Mother Many he w	L Mu:		

Committee Na	ame: DANE Co. Z	LLR	Nar	ne:K	EVIN	13.	arow		
DATE:	7-26-14		Mu	nicipality:	TOWN	of	MADISON	J	
Petition/CUP	#/Resolution/Ordin	nance Amer	ndment/S	Subject:	110	15			
☐ Wish to Spe	pole in Cupport	D Wich	to Charle	in Opposit	ion				
Registering	The second second		DOMEST CONTRACTOR DESCRIPTION	Opposition	The second secon	X Ava	ilable for Info	rmation On	ly
[If you checked Name, address	casion, are you office "NO," <u>STOP;</u> you ne and telephone num IE & BRUCE	ed not completed ber of each p	ete the respectively	(ES st of this form corganization	□ NO n. If you ch	ecked	"YES," go on to		estion.]
	UNIVERSIM				MIDDO	RT	w, W1	5356	2
Comments:							0.5		
other paid du [If you checked If you checked 3. Are you an or for your mu [If you checked you checked "N 4. Has or will	ing paid for your raties for this person "NO" to the question "YES," turn over to the elected official when the elected official when it is a to the question of the elected of the elected official when it is a to the question, go to the person or orgo bying activities during activities activities during activities	or organiz, STOP; you he next questino is appear government, STOP; you o on to the ne	ation? . need not of on.] ring sole ntal bod need not ext questic	complete the ly on behal y? complete the on.] sent spend	rest of this f of your o e rest of this	form. Office s form	□ YES except that you	must sign th	***
	iod is January to June		COACH MENTING TO THE		0α ;		LI YES	Þ	NO
supervisors of	ticipate making mother than at public ontacts with the Coun	hearings or	· meeting	gs?			☐ YES ch you reside.)	母	NO
more than 2 con	"NO," to questions 4 tacts at a later date, y his form. If you check	you must then	contact t	he County C	lerk's office	e to file	a form indicati	ing such acti	
spends more t financial discl [If you checked	do you understand han \$500 during the osure statement wie "NO" please call the on, for more informate	ne current r ith the coun County Clerk	eporting ty clerk	g period, yo	ou must fil	e a	□ YES		NO County
Date:7	. 26 . 16			Signa	ture <u></u>	ni.	Burow		
				Print N	ame Ké	NIV	Bursw		

Committee Name: ZLR	Name: AM)	Detringer	
DATE: 7/24/16	Municipality: 💢 🗘	Nn of Madis	60 Section?
Petition/CUP #/Resolution/Ordi	nance Amendment/Subject: Re2	one 11015	
☐ Wish to Speak in Support	Wish to Speak in Opposition		
☐ Registering in Support	☐ Registering in Opposition	☐ Available for Inform	ation Only
[If you checked "NO," <u>STOP;</u> you no	icially representing an organization YES weed not complete the rest of this form. If you have not each person or organization you	NO you checked "YES," go on to th	
Comments:			
other paid duties for this person	representation or appearing incident or organization?		⊠ NO
or for your municipality or other	who is appearing solely on behalf of yer governmental body?	YES	🖄 NO ust sign this form. 1
	ganization you represent spend mor ring the current reporting period?. te or from July to December.)		□ NO
supervisors other than at public	ore than 2 contacts with County Bo c hearings or meetings? nty Board supervisor who represents the county		□ NO
more than 2 contacts at a later date,	4 and 5 above, <u>STOP;</u> you need not comp you must then contact the County Clerk's ked "YES" to either question at this time,	s office to file a form indicating	
spends more than \$500 during t financial disclosure statement w	d that if the person or organization the current reporting period, you mixith the county clerk?	ust file a	□ NO the City-County
Date: 7 26 20 6	SignaturePrint Name	Dami Detti Tami Dettin	rder—

Committee Name: ZLP Name: SCHWGNKER
DATE: 7/76/16 Municipality: TOWN
Petition/CUP #/Resolution/Ordinance Amendment/Subject: \\\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ R
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: Pour Overspmont 4081 87 H. Shut Kenoska W. 53147
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: 1/24/2011 Signature Goseph Sch Wewller

Committee Name: ZLR	Name:	Thomas	Deffinger		
- 1	Municipa	_	of Madison		
Petition/CUP #/Resolution/Ordin	nance Amendment/Subject	ct: Rezo	ne 11015		
□ Wish to Speak in Support □ Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppos	•	☐ Available for In	formation Onl	у
1. On this occasion, are you office [If you checked "NO," STOP; you need Name, address and telephone numbers.	ed not complete the rest of thi	is form. If you) checked "YES," go on		stion.]
Comments:					
2. Are you being paid for your roother paid duties for this person [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization?		□ YES		NO
3. Are you an elected official whor for your municipality or other [If you checked "YES," to the question, good checked "NO," to the question, go	r governmental body? n, <u>STOP</u> ; you need not compl		YES		NO s form. Ij
4. Has or will the person or orga on county lobbying activities dur (A reporting period is January to June	ing the current reporting	~			NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Count	hearings or meetings?				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 the Cou	ınty Clerk's offi	ce to file a form indic	ating such activ	
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement wi [If you checked "NO" please call the Building, Madison, for more informat	ne current reporting period the county clerk?	od, you must	file a		NO ounty
Date: 17/26/2016		Signature Y	homas Deff	Ling Gr.	
•	P	rint Name	homas Deff	inger	

Committee Name: ZLR	Name: 🗘			
DATE: 07/26/16	Municipality	: Christ	iana	
Petition/CUP #/Resolution/Ordi				
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Oppos ☐ Registering in Opposition		vailable for Infori	nation Only
1. On this occasion, are you office. [If you checked "NO," STOP; you need to be a superior of the state of t	eed not complete the rest of this fo	□ NO orm. If you checke	ed "YES," go on to t	
Comments:	11		1	
2. Are you being paid for your of other paid duties for this person [If you checked "NO" to the question If you checked "YES," turn over to the paid t	n or organization?		□ YES	□ NO
3. Are you an elected official wor for your municipality or othe [If you checked "YES," to the question, gou checked "NO," to the question, go	er governmental body? on, <u>STOP</u> ; you need not complete		□ YES	□ NO nust sign this form. I
4. Has or will the person or org on county lobbying activities du (A reporting period is January to June	ring the current reporting pe			□ NO
5. Do you anticipate making me supervisors other than at public (Do not count contacts with the Count	hearings or meetings?			□ NO
[If you checked "NO," to questions 4 more than 2 contacts at a later date, must also sign this form. If you check	you must then contact the County	Clerk's office to f	file a form indicating	
6. If "YES," do you understand spends more than \$500 during to financial disclosure statement w [If you checked "NO" please call the Building, Madison, for more information of the statement with the stat	he current reporting period, with the county clerk?	you must file a		□ NO the City-County
Date:	Sig	nature		
	Print	Name		,

Committee Name:	ZLR	Name:	DAN BI	RRENKOTT	·
Committee Name: DATE: <i>7. 26</i>	2016	Municip	ality:		
Petition/CUP #/Resol	ution/Ordinan	ce Amendment/Subj	ect:/O_	992	
Wish to Speak in Su □ Registering in Supp	apport - 16	☐ Wish to Speak in C☐ Registering in Opp	Opposition osition	☐ Available for Inform	nation Only
1. On this occasion, a [If you checked "NO," S Name, address and tele	STOP; you need r	not complete the rest of t	□ N his form. If you	a person other than you O a checked "YES," go on to the are representing:	rrself?
Comments:					
2. Are you being paid other paid duties for [If you checked "NO" to If you checked "YES," I	this person or the question, <u>ST</u>	organization?		·····YYES	□ NO
	lity or other go to the question, §	overnmental body? STOP; you need not com		nr office □ YES this form except that you m	NO NO ust sign this form. If
4. Has or will the peon county lobbying a (A reporting period is Ja	ctivities during	g the current reportir	ng period?		JP NO
5. Do you anticipate supervisors other that (Do not count contacts v	ın at public hea	arings or meetings?			NO
more than 2 contacts at	a later date, you	must then contact the Co	ounty Clerk's of	e the rest of this form. Howe fice to file a form indicating to on to the next question.]	
6. If "YES," do you spends more than \$5 financial disclosure s [If you checked "NO" p. Building, Madison, for r	00 during the o tatement with lease call the Cou	current reporting per the county clerk? unty Clerk at 266-4121 c	iod, you must	file a	□ NO the City-County
Date: 7-80	6-20/	4	Signature	In BINNEARE	
			Print Name	IN BINNEWKO	577