Committee Name: Public HEADWE Name:	TOM FO	らをひ	
DATE: 2/28/17 Municipality:			
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	11090	+ 11891	
 □ Wish to Speak in Support □ Registering in Support □ Registering in Opposition 		vailable for Informa	tion Only
1. On this occasion, are you officially representing an organized of this formula of the rest of the rest of this formula of the rest	NO NO		
Name, address and telephone number of each person or organizati	on you are repre	esenting:	
FOSEID FAIRM, LLC, 948:	5 BPALL	N Rd, BLA	to14 Eart
767-3356			
Comments:			
2. Are you being paid for your representation or appearing in other paid duties for this person or organization?		□ YES	P NO
3. Are you an elected official who is appearing solely on behalor for your municipality or other governmental body?		□ YES	NO st sign this form. If
4. Has or will the person or organization you represent spend on county lobbying activities during the current reporting per (A reporting period is January to June or from July to December.)			□ NO
5. Do you anticipate making more than 2 contacts with Counsupervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who represents)			□ NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not more than 2 contacts at a later date, you must then contact the County C must also sign this form. If you checked "YES" to either question at this	Clerk's office to fi	le a form indicating s	V3: 3
6. If "YES," do you understand that if the person or organizate spends more than \$500 during the current reporting period, you financial disclosure statement with the county clerk?	ou must file a	🗆 YES	□ NO ne City-County
Date: 2/28/17 Sign:	ature The	one I of	Taxin
Daine N	James THA	MAS L. F.	05 5 11)

Committee Name: Polic Hearisce Name:	ef S. Mayreace
DATE: Z - Z 2 - 17 Municipalit	y: Thrap C.P. / Vermont
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	11090/1091
 ☐ Wish to Speak in Support ☐ Registering in Support ☐ Registering in Opposit 	
1. On this occasion, are you officially representing an organ YES [If you checked "NO," STOP; you need not complete the rest of this you have, address and telephone number of each person or organized by Token 9485 Braun Rd	□ NO form. If you checked "YES," go on to the next question.] ration you are representing:
Comments:	
2. Are you being paid for your representation or appearing other paid duties for this person or organization?	YES № NO
3. Are you an elected official who is appearing solely on be or for your municipality or other governmental body? [If you checked "YES," to the question, STOP; you need not complete you checked "NO," to the question, go on to the next question.]	YES NO
4. Has or will the person or organization you represent spe on county lobbying activities during the current reporting p (A reporting period is January to June or from July to December.)	
5. Do you anticipate making more than 2 contacts with Cossupervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who represent	□ YES □ NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need to more than 2 contacts at a later date, you must then contact the Count must also sign this form. If you checked "YES" to either question at	ty Clerk's office to file a form indicating such activity. You
6. If "YES," do you understand that if the person or organ spends more than \$500 during the current reporting period financial disclosure statement with the county clerk?	you must file a YES INO to the Clerk's office at Room 106A of the City-County
Date: 2 - 28 - 17 Si	ignature Le S. Mayrack nt Name Cre S. Mayrack
Prir	nt Name Cre S. Mayrack

Committee Name:	Name:	Kundall	Aschbunnic	
DATE: 42/2	Name: Name: Municipalit	y: _ 13 lour	my brue	
Petition/CUP #/Resolution/C	Ordinance Amendment/Subject:		<u>*</u> *	
☑ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Oppo ☐ Registering in Opposit		☐ Available for I	nformation Only
***************************************	officially representing an organ	☑ NO		
_	number of each person or organiz LLC Randall Aschbr			608-843-6666
Comments:				
other paid duties for this pe	our representation or appearing erson or organization?stion, <u>STOP</u> ; you need not complete to the next question.]		□ YES	E NO
or for your municipality or	al who is appearing solely on be other governmental body? uestion, <u>STOP;</u> you need not complete on, go on to the next question.]		□ YE	
on county lobbying activitie	organization you represent spe s during the current reporting p June or from July to December.)			S E NO
supervisors other than at pu	g more than 2 contacts with Coublic hearings or meetings?			
more than 2 contacts at a later of	ons 4 and 5 above, <u>STOP</u> ; you need r late, you must then contact the Count checked "YES" to either question at	ty Clerk's office	to file a form indic	cating such activity. You
spends more than \$500 duri financial disclosure stateme	tand that if the person or organing the current reporting period int with the county clerk?	, you must file	e a	
Date:3/28/17	Si	ignature	Call Ashby	
	Prir	nt Name <u>C</u>	undall Aschby	enner

Committee Name:	Name:	John 4	Sandra	Zirglen	-	
DATE: 2/28/2017	/ Munici	pality:				
Petition/CUP #/Resolution/Or	dinance Amendment/Sub	ject: <u>Reze</u>	BNE /	1.089	Crep	1369
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in ☐ Registering in Op	* *	🗷 Availabl	e for Inform	ation Onl	ly
1. On this occasion, are you on the sound of	need not complete the rest of	this form. If you	O checked "YES	"," go on to th		estion.]
Comments:						
2. Are you being paid for you other paid duties for this pers [If you checked "NO" to the quest If you checked "YES," turn over t	son or organization? ion, <u>STOP</u> ; you need not com		□	YES	凶	NO
3. Are you an elected official or for your municipality or ot [If you checked "YES," to the question you checked "NO," to the question	her governmental body?. stion, STOP; you need not con		□			NO is form. Į
4. Has or will the person or on county lobbying activities of (A reporting period is January to Jan	during the current report	ing period?		YES	×	NO
5. Do you anticipate making supervisors other than at pub (Do not count contacts with the Co	lic hearings or meetings?.		🗆	YES ou reside.)	以	NO
[If you checked "NO," to question more than 2 contacts at a later dat must also sign this form. If you ch	te, you must then contact the C	County Clerk's of	fice to file a for	rm indicating		
6. If "YES," do you understa spends more than \$500 during financial disclosure statement [If you checked "NO" please call t Building, Madison, for more inform	g the current reporting pe with the county clerk? he County Clerk at 266-4121	riod, you must	file a □			NO ounty
Date: 2-28-17	7	Signature	John C	Zeegl/	eg le	R

Committee Name:	Name:	MIKE	LARSON)		
DATE: 22817	Municipa	MIKE ality: Town	of cle	SUIANG 22		
Petition/CUP #/Resolution/Ordinal	nce Amendment/Subje	ect: 11087				
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available	for Information	on Onl	у
1. On this occasion, are you official [If you checked "NO," STOP; you need Name, address and telephone number	YES not complete the rest of th	uis form. If you c	hecked "YES,	" go on to the ne		stion.]
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	r organization? TOP; you need not compl		□	YES		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 of the control of the property of the pro	governmental body? STOP; you need not comp					NO s form. I
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reportin			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 a 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	unty Clerk's offic	e to file a fori	n 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 Combuilding, Madison, for more information	current reporting perion the county clerk? Sounty Clerk at 266-4121 or	od, you must f	ile a □	YES om 106A of the 0		NO ounty
Date:		Signature				
	Ī	Print Name				

Committee Name: ZLR	Name: Bruce Kadema	acher				
DATE: 2-28-17 Municipality: Town of Medina						
Petition/CUP #/Resolution/Ordina	ance Amendment/Subject: 11086	-				
₩ 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 need	ally representing an organization or a person other the					
Comments:						
other paid duties for this person	presentation or appearing incidental to your or organization?	S 🗆 NO				
or for your municipality or other	, STOP; you need not complete the rest of this form except that	ES □ NO you must sign this form. If				
	nization you represent spend more than \$500 ng the current reporting period? I YE or from July to December.)	cs 🗆 NO				
supervisors other than at public h	re than 2 contacts with County Board learings or meetings?					
more than 2 contacts at a later date, yo	and 5 above, <u>STOP;</u> you need not complete the rest of this form ou must then contact the County Clerk's office to file a form ind d "YES" to either question at this time, go on to the next quest	licating such activity. You				
spends more than \$500 during the financial disclosure statement wit	that if the person or organization you represent e current reporting period, you must file a h the county clerk?					
Date:	Signature					
	Print Name					

Committee Name: ZLL Name: Devis U(ve) Ad
DATE: 2-2017 Municipality: DAVE WI.
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
Tetitoli/eet #/Resolutioli/ortinance 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? 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?
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 mai more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. Yo 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: 2-29-3017 Signature & Mush
Print Name DENNIS MUESTA-d

REGISTRATION BEFORE COUNTY COMMITTEE buner, D.C. Zoning + Lard Committee Amy Galagher Baky Committee Name: Amy Galagher Baky Coak Date: 2 2 28 2017 Municipality: Town of Dane Farm LC Petition/CUP #/Resolution/Ordinance Amendment/Subject: Dezone (3) parcels 1665.
(2) RH2 (1) RH1
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?
[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:
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? ☐ 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: 2/28/2017 Signature Comy Gallagher Print Name Amy Gallagher

REGISTRATION BEFORE COUNTY COMMITTEE \ Mighty Oak
Committee Name: Zoving Hard Regulations: Susan Riedosel Farm LLC
Committee Name: Zoving Hard Regulationne: Susan Riedesel Farm LLC DATE: 2/28/17 Municipality: Jown of Dane
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Rezone 1035
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? 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?
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: 2/28/14 Signature Susan Riedose (

Committ	tee Name: 20ning+			Riede		
DATE:_	2-28-17	Municip	ality: <u>Tow</u>	n of Da	ne.	
Petition/	CUP #/Resolution/Ordin	nance Amendment/Subj	ect: Mig	hty Dal	L farm	1 1108
	to Speak in Support ering in Support	☐ Wish to Speak in C☐ Registering in Opp		☐ Available	for Informatior	ı Only
[If you che	is occasion, are you office ecked "NO," <u>STOP;</u> you ne	☐ YES sed not complete the rest of t	this form. If you	O checked "YES,"	go on to the nex	
Commen	nts:					
other pa [If you che	ou being paid for your raid duties for this person ecked "NO" to the question ecked "YES," turn over to the	n or organization? a, <u>STOP</u> ; you need not comp			YES	NO NO
or for you [If you che	you an elected official whom we municipality or other ecked "YES," to the question, g	r governmental body? on, <u>STOP</u> ; you need not com		□		NO gn this form. Į
on count	or will the person or org y lobbying activities du ng period is January to June	ring the current reportin	ng period?		YES	∕ NO
superviso	ou anticipate making moors other than at public ount contacts with the Coun	hearings or meetings?		П	YES reside.)	NO NO
more than	ecked "NO," to questions 4 12 contacts at a later date, y sign this form. If you check	you must then contact the C	ounty Clerk's of	fice to file a form	indicating such	
spends m financial [If you che Building, l	ES," do you understand nore than \$500 during the disclosure statement wheeked "NO" please call the Madison, for more information	he current reporting per ith the county clerk? County Clerk at 266-4121 (tion.]	riod, you must or go to the Cler	tile a	n 106A of the C	0
Date:	2-28-17		Signature <u>U</u>	Shuck R	NH Riedese	<u> </u>

Committee Name: 20 hung + Land Nam	ie: <u>Eva</u>	Riedu	sel	
DATE: 2-28-17 Mun	icipality: To	wn of	Dane	11085
Petition/CUP #/Resolution/Ordinance Amendment/S	ubject: <u>M</u> (4	hty Oak	Farm	Rezone
4	0		1	
₩ish to Speak in Support ☐ Wish to Speak in Registering in C☐ Wish to Speak in C☐ Registering in C☐ R		☐ Avail	able for Inform	nation Only
1. On this occasion, are you officially representing an	ES A. t of this form. If	NO you checked "?	YES," go on to t	
Comments:				
2. Are you being paid for your representation or appropriate other paid duties for this person or organization? [If you checked "NO" to the question, <u>STOP</u> ; you need not configure the checked "YES," turn over to the next question.]			□ YES	NO NO
3. Are you an elected official who is appearing solely or for your municipality or other governmental body [If you checked "YES," to the question, <u>STOP</u> ; you need not a you checked "NO," to the question, go on to the next question	?complete the res			NO ust sign this form. I
4. Has or will the person or organization you represon county lobbying activities during the current repo (A reporting period is January to June or from July to December 1988).	rting period?.		□ YES	A NO
5. Do you anticipate making more than 2 contacts we supervisors other than at public hearings or meetings (Do not count contacts with the County Board supervisor who	s?		☐ YES n you reside.)	Þ∕ NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you more than 2 contacts at a later date, you must then contact the must also sign this form. If you checked "YES" to either questions.	e County Clerk'	s office to file a	form indicating	
6. If "YES," do you understand that if the person or 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 266-412 Building, Madison, for more information.]	period, you m	ust file a	□ YES	NO the City-County
Date: 2-28-17	Signature	Evor	Riedesel Riede	<u>.</u>
	Print Name	Eva	Kiede	1Se

Committee Name:	Name:	Thom.	as Ga	Marken	
DATE: 4/28/17	Municip	pality: <u> </u>	Dank	J	
Petition/CUP #/Resolution/Ordin	nance Amendment/Subj	ject:/ <i></i>	86	11085	
☐ Wish to Speak in Support	☐ Wish to Speak in (Opposition	30000-14000	· · · · · · · · · · · · · · · · · · ·	
Registering in Support	☐ Registering in Opp	* *	☐ Availab	le for Informa	tion Only
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	this form. If you	O checked "YE.	S," go on to the	
Comments:					
2. Are you being paid for your r other 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 th	or organization? , <u>STOP</u> ; you need not comp			YES	☑ 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 com				NO NO t sign this form.
4. Has or will the person or orgon county lobbying activities dur (A reporting period is January to June	ring the current reporting	ng 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	you must then contact the C	ounty Clerk's off	ice to file a fo	rm indicating s	100 0
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Building, Madison, for more information of the statement with the	ne current reporting per th the county clerk? County Clerk at 266-4121 (riod, you must	file a □	A STATE OF THE STA	□ NO e City-County
Date:		Signature Print Name	Now as	A. Cro	Marher

Committee Name: ZLR Com. Name: DAMES GROTHIMAN Municipality: Town UP ON NE.
DATE: 2 28 12017 Municipality: TOWN UP ONNE
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:
MIGHTY ORK FORM LLC
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: 2/28/2017 Signature VEXINGS / JAMES E. GRETHMAN

Committee Name:	Name:	Nea	Elsing		
DATE:	Municipal	lity: <u> / </u> e	sant Sprine	35	
Petition/CUP #/Resolution/Ordin	ance Amendment/Subjec	et: <u>//</u> 0	84	, 	
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppos	•	☐ Available fo	or Information Only	<i>-</i>
1. On this occasion, are you office [If you checked "NO," STOP; you nee Name, address and telephone numb Mark A Elsilus		☐ I is form. If you ization you	NO u checked "YES," g	o on to the next ques	tion.]
_ Trong	a my ger j				
Comments:	2				
2. Are you being paid for your reother paid duties for this person [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization?		YI	es 🗹	/ NO
3. Are you an elected official wh or for your municipality or other [If you checked "YES," to the question you checked "NO," to the question, go	governmental body? , <u>STOP</u> ; you need not compl		□		NO form. I
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June	ing the current reporting			YES DY	NO
5. Do you anticipate making mosupervisors other than at public I (Do not count contacts with the County	nearings or meetings?				NO
[If you checked "NO," to questions 4 a more than 2 contacts at a later date, you must also sign this form. If you checket	ou must then contact the Cou	ınty Clerk's e	office to file a form in	ndicating such activi	
6. If "YES," do you understand spends more than \$500 during th financial disclosure statement wit [If you checked "NO" please call the C Building, Madison, for more information of the control of the co	e current reporting perion the county clerk?	od, you mus	st file a	Y ES □ N 106A of the City-Co	
Date: 2/28/2017	p	Signature	New 6. E.	hip Using	

Committee Name: 2LK	Name: Brad Reghin () Municipality:	(20m)
DATE:	Municipality:	
Petition/CUP #/Resolution/Ord	inance Amendment/Subject://083	
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Info	ormation Only
1. On this occasion, are you off [If you checked "NO," <u>STOP</u> ; you n	ficially representing an organization or a person other than y	ourself?
Comments:		
other paid duties for this perso	representation or appearing incidental to your on or organization?	NO NO
or for your municipality or other	who is appearing solely on behalf of your office er governmental body?	NO musy sign this form. I
	rganization you represent spend more than \$500 uring the current reporting period?	NO NO
supervisors other than at public	nore than 2 contacts with County Board c hearings or meetings?	NO
more than 2 contacts at a later date,	4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. Ho, you must then contact the County Clerk's office to file a form indicate (cked "YES" to either question at this time, go on to the next question.]	ing such activity. You
spends more than \$500 during the financial disclosure statement v	the current reporting period, you must file a with the county clerk? E County Clerk at 266-4121 or go to the Clerk's office at Room 106A mation.]	□ NO of the City-County
Date: 2-28-17	Signature Band 534	n
v	Print Name Eval Beach	7

Committee Name: ZONING: LAND REG Name: JAN ZIMMECMANN, REAL ESTATE
Committee Name: 200/NG: LAND REC Name: TAN ZIMMECMANN, REAL ESTATE COORDINATOR, DANS CO. L.: W Municipality: BOCKE
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2. PLATS & SURVEYS 2016 - LD -052
☐ 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 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:
DANE COUNTY PARKS, JAHN REVOCABLE TRUST, PAUL TUITE
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: 2/28/2017 Signature and Bring Print Name JANIS ZITURER MANN

Committee Name: Dun Cornly Tonny & Ca	Name: Seff Levatre
DATE: 1-78-19	Municipality: Town of Cherstine
Petition/CUP #/Resolution/Ordinance Amend	Municipality: Town of Christians ment/Subject: Add to Dod restrictions SCL Prestule LLC
	Speak in Opposition ring in Opposition Available for Information Only
	the rest of this form. If you checked "YES," go on to the next question.]
Comments:	
2. Are you being paid for your representation other paid duties for this person or organization [If you checked "NO" to the question, STOP; you need If you checked "YES," turn over to the next question	ion?
3. Are you an elected official who is appearing or for your municipality or other governments [If you checked "YES," to the question, STOP; you not you checked "NO," to the question, go on to the next	al body? YES ANO need not complete the rest of this form except that you must sign this form. I
4. Has or will the person or organization you on county lobbying activities during the curre (A reporting period is January to June or from July to	nt reporting period? 🗆 YES 🗷 NO
5. Do you anticipate making more than 2 con supervisors other than at public hearings or m (Do not count contacts with the County Board superv	neetings? 🗆 YES 💋 NO
	TOP; you need not complete the rest of this form. However, if you do make ontact the County Clerk's office to file a form indicating such activity. You ther question at this time, go on to the next question.]
6. If "YES," do you understand that if the pe spends more than \$500 during the current rep financial disclosure statement with the county [If you checked "NO" please call the County Clerk at Building, Madison, for more information.]	oorting period, you must file a
Date: 2-28-17	Print Name Seff Lovake
	Print Name Jeff Lovake

Committee Name:	Name:	Sc	014	Blasing			
DATE: 2-28-17	Municipa	ality: _	De	erfield	٤		
Petition/CUP #/Resolution/Ordinal	nce Amendment/Subj	ect:	1109	2			
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo	ppositio	on	☐ Available f	or Informatio	on Only	
1. On this occasion, are you official [If you checked "NO," STOP; you need Name, address and telephone number	not complete the rest of the	his form	If you c	hecked "YES,"			m.]
Comments:		8					
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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 comp				YES hat you must s	NO NO ign this for	
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5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County l	arings or meetings?				YES reside.)) 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 peri the county clerk? unty Clerk at 266-4121 o	iod, you	ı must f	ile a □		NO City-Coun	
Date: 2-28-17		Signat Print Na	ure	But 1 Scott B	Pasina		

Committee Name:	2LR	Na	me: _B	tant	Dar	m	Mother's	property
DATE: D-28	- [/	Mu	ınicipality:					
Petition/CUP #/Res	olution/Ordina	nce Amendment	/Subject:	11096	-			-
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a registering in su	pport	in the state of th	Соррожией			0	ition om	J
1. On this occasion		ally representing □		ion or a pers	on other	than your	self?	
[If you checked "NO,"	' <u>STOP</u> ; you need	l not complete the re	est of this form.	If you checke	d "YES,"	go on to the	next que	stion.]
Name, address and t	elephone numb	er of each person of	or organization	you are repr	esenting:			
Comments:								
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3. Are you an elector for your municipal [If you checked "YES, you checked "NO," to	pality or other " to the question	governmental boo STOP; you need no	dy? ot complete the		□	YES hat you mus		NO s form. I
4. Has or will the pon county lobbying (A reporting period is	activities duri	ng the current re	porting period			YES	4	NO
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Committee Name:_	pANE CY	Zons	_ Name:	Isaac	Penti	mak;	
Committee Name:_ DATE: <i>2/2</i> }	12017		Municipality: _	Deart	Re 18 7	Ens 24	
Petition/CUP #/Res	olution/Ordina	nce Amendn	nent/Subject:		1/095		To.
Wish to Speak in Registering in Suj	Support oport		Speak in Oppositing in Opposition		vailable for	· Information (Only
1. On this occasion [If you checked "NO," Name, address and to	' <u>STOP</u> ; you need	not complete	☐ YES the rest of this form	NO n. If you checke	ed "YES," go		question.]
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3. Are you an elect or for your municip [If you checked "YES, you checked "NO," to	oality or other g " to the question,	g <mark>overnmenta</mark> <u>STOP</u> ; you ne	l body?ed not complete the		□ Y		l NO this form. Į
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Date:	121		Signa	ituro		2	
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Committee Name:	Name:	Cyny	thin A.	Pretz	21
Committee Name: DATE:2/28/17	Municipali	ity:		•	## 1 # //
Petition/CUP #/Resolution/Ordina	ance Amendment/Subject	t: <u> ()</u>	93		
		1,000			
✓ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opp ☐ Registering in Opposi		☐ Available	for Information	n Only
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[If you checked "NO," <u>STOP</u> ; you need	YES)		
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3. Are you an elected official who or for your municipality or other [If you checked "YES," to the question you checked "NO," to the question, go	governmental body?, STOP; you need not comple		□		NO gn this form.
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June	ng the current reporting			YES	Ø NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	nearings or meetings?			YES reside.)	NO
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Date: 2/28/17	S Pri	Signature ()	pothia 1	a.Prod A.Pretz	tzel el