TUC		
1 1	REGISTRATION BEFORE COUN	TY BOARD
DATE: 10 29/19	Name: He	de Weglenten
Item #/Petition/CUP # or Subject:	Municipality:	Madday
ZUR 0-1		
	= M/Lab to Occasi in Occasi in Occasi	
☐ Wish to Speak in Support ☐ Registering in Support	Wish to Speak in OppositionRegistering in Opposition	Available for Information Only
	0 0 11	
	Ily representing an organization or a	
[If you checked "NO," STOP; you need	d not complete the rest of this form. If y	you checked "YES," go on to the next question.]
Name, address and telephone number	r of each person or organization you ar	e representing:
Commenter		
Comments:		
		ental to your other paid duties for this
	on, <u>STOP</u> ; you need not complete th	
If you checked "YES," continue to		
3 Are you an elected official wh	o is appearing solely on behalf o	f your office or for your municipality or
other governmental body?		□YES□NO
		the rest of this form except that you must sign
this form. If you checked 'NO, to	the question, go on to the next ques	stion.j
		ore than \$500 on county lobbying activities
during the current reporting peri (A reporting period is January to Ju		□YES□NO
(A reporting period is daridary to de	ine of from only to becember.)	
		oard supervisors other than at public
		nts the district in which you reside.)
		ot complete the rest of this form. However, if act the County Clerk's office to file a form
		"YES" to either question at this time, go on to
the next question.]	and digitality to the state of	o to other queener at the time, go on to
6 If "VES " do you understand t	hat if the person or organization	you represent spends more than \$500
during the current reporting peri	od, you must file a financial discl	losure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more		o the Clerk's office at Room 106A of the City-
costa, banding, madion, for more		
Date:	Signaturo	
Date:	Signature	

Print Name

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name:Your Name: Bill Walner
DATE of Meeting: 10 2019 Municipality You Reside in: Town & Montrost
Petition/CUP #/Resolution/Ordinance Amendment/Subject: EANR 0-02 RAVR C-03
Wish to Speak in Support
☐ Wish to Register in Support ☐ Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organization you are representing:
Dane County Read Council
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, <u>STOP</u> ; you do not need to complete the rest of this form. If you checked "YES", go 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 NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES go 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 two contacts with the County Board supervisors other than at public
hearings or meetings? YES 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 do not need to complete the rest of this form. <u>However,</u> 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr. Blvd., Room 106A for more information.
Date: Signature:
015-151 7/18 Printed Name:

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: Silverwood Park Your Name: Daniel Bursey
DATE of Meeting: 10-21-2019 Municipality You Reside in: Sage An WI/Ridgeway IA
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2ANR C-03
Wish to Speak in Support Wish to Speak in Opposition
☐ Wish to Register in Support ☐ Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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 NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the County Board supervisors other than at public
hearings or meetings? YES 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 do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: 10-29-2019 Signature: Salve Salvey
015-151 7/18 Printed Name: Daniel Bussey

EANR			
	GISTRATION BEFORE	COUNTY E	BOARD
DATE: 10/29/2019	Name:	1) ke	Richmad
Item #/Petition/CUP # or Subject:	Municipalit	v: m	adisan
EANR-C-03		, -	
		111	
	Wish to Speak in Oppo Registering in Opposition		☐ Available for Information Only
1. On this occasion, are you officially re	presenting an organizat	ion or a pers	son other than yourself?
[If you checked "NO," <u>STOP;</u> you need not	complete the rest of this f	orm. If you c	hecked "YES," go on to the next question.]
Name, address and telephone number of e	ach person or organizatio	n you are rep	presenting:
Friends of Silven			
11/2203 2 3//100	Y DOC II WAR		
Comments:			
2. Are you being paid for your represensation?	TOP; you need not com		YESNO
3. Are you an elected official who is	annearing solely on h	ehalf of you	ur office or for your municipality or
other governmental body?			TYES NO
[If you checked "YES," to the question, this form. If you checked "NO," to the q	STOP; you need not co	mplete the i	rest of this form except that you must sigr
4. Has or will the person or organiza during the current reporting period?			han \$500 on county lobbying activities
(A reporting period is January to June of	r from July to Decembe	er.)	
5. Do you anticipate making more th			
hearings or meetings?(Do not count contacts with the County			
Ilf you checked "NO " to questions 4 an	d 5 above STOP: you i	need not co	mplete the rest of this form. However, if
you do make more than 2 contacts at a	later date, you must the	en contact th	
6. If "YES," do you understand that is during the current reporting period, y	you must file a financi	al disclosu	re statement with the county clerk?
	************************		□ YES□NO • Clerk's office at Room 106A of the City-
County Building, Madison, for more info		or go to the	CIETA'S OFFICE AT MOOTH TOOA OF THE CITY-

EARR	
REGISTRATION BEFORE COUNTY BOA	ARD
DATE: 102913 Name: Herson	Wylerto
Item #/Petition/CUP # or Subject: Municipality:	iddi
SANR C-2	
☐ 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	
[If you checked "NO," <u>STOP</u> ; you need not complete the rest of this form. If you check	ked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are represe	entina:
, , , , , , , , , , , , , , , , , , , ,	ů
Comments:	
O. Are you being maid for your representation or encouring incidental to	varin alban malid distina for this
2. Are you being paid for your representation or appearing incidental to person or organization?	wour other paid duties for this
[If you checked "NO" to the question, <u>STOP</u> ; you need not complete the rest of If you checked "YES," continue to the next question.]	f this form.
	Mine on for your maniple of the or
3. Are you an elected official who is appearing solely on behalf of your other governmental body?	□YES□NO
[If you checked "YES," to the question, <u>STOP</u> ; you need not complete the rest this form. If you checked "NO," to the question, go on to the next question.]	of this form except that you must sign
	AFOO
4. Has or will the person or organization you represent spend more than during the current reporting period?	\$500 on county lobbying activities
(A reporting period is January to June or from July to December.)	
5. Do you anticipate making more than 2 contacts with County Board su	pervisors other than at public
hearings or meetings? (Do not count contacts with the County Board supervisor who represents the county Boa	listrict in which you reside.)
[If you checked "NO," to questions 4 and 5 above, STOP; you need not comple	ete the rest of this form. However, if
you do make more than 2 contacts at a later date, you must then contact the C	County Clerk's office to file a form
indicating such activity. You must also sign this form. If you checked "YES" to the next question.]	o either question at this time, go on to
6. If "YES," do you understand that if the person or organization you rep	resent spends more than \$500
during the current reporting period, you must file a financial disclosure s	tatement with the county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Cle	erk's office at Room 106A of the City-
County Building, Madison, for more information.]	
Deter	
Print Name	

EANK REGISTRATION BEFORE COUNTY BOARD
10/29 110 Vacad Claude
DATE: 10/29 119 Name: Yogash Chaula
DATE: 10/29 19 Name: Yogosh Chaula Item #/Petition/CUP # or Subject: Municipality: Sant Capital ammendment - Suport - Other mendments added
Contraction
Wish to Speak 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:
Comments:
If you checked "YES," continue 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. 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
(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.)
(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?
County Building, Madison, for more information.]
Date: Signature
Date: Signature Print Name Yegsh Chawla

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Your Name: Jeannine Richards
DATE of Meeting:	Municipality You Reside in: Black Earth
	rdinance Amendment/Subject:
Wish to Speak in Su	upport
Wish to Register in	Support Wish to Register in Opposition
	Available for Information Only
☐ YES ☐ NO	ou do not need to complete the rest of the form. If you checked "YES" go to the next
Name, address and telephone	number of each person or organization you are representing:
Savanna Just	itute Madison WI
COMMENTS:	
person or organization? (If you checked "NO" to the que go to the next question.) 3. Are you an elected official other governmental body?	restion, STOP; you do not need to complete the rest of this form. If you checked "YES", all who is appearing solely on behalf of your office or for your municipality or
4. Has or will the person or	organization you represent spend more than \$500 on county lobbying activities
during the current reporting (A reporting period is January to	period? YES NO to June; or July to December.)
5. Do you anticipate making	g more than two contacts with the County Board supervisors other than at public
hearings or meetings? \(\sum_{\text{N}}\)	YES NO e County Board supervisor who represents the district in which you reside.)
if you do make more than 2 co.	ions 4 and 5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However,</u> entacts at a later date, you must then contact the County Clerk's office to file a form checked "YES" to either question, please continue to the question below. You must also
	question 5, do you understand that if the person or organization you represent ng the current reporting period, you must file a financial disclosure statement
with the County Clerk?? (If you checked "NO" please can Blvd., Room 106A for more info	all the County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date:	Signature:
015-151 7/18	Brintod Nama: Deanntre Dichard

EANIC		
DATE: 10-29-19	REGISTRATION BEFORE COUNTY B	
DATE: 10-29-19	Name:	UG Jones
Item #/Petition/CUP # or Subject:	Name: Municipality: C-02	4 6-05
Wish to Speak in Support Registering in Support	□ Wish to Speak in Opposition□ Registering in Opposition	□ Available for Information Only
1. On this occasion, are you official	lly representing an organization or a pers	on other than yourself?
Ilf you checked "NO." STOP; you need	not complete the rest of this form. If you cl	mecked "YES," go on to the next question.]
	of each person or organization you are rep	
warne, address and telephone number	or each person or organization you are repl	esenting.
Comments:		
Comments.		
If you checked "YES," continue to a state of the state of	tion, <u>STOP</u> ; you need not complete the rethe question, go on to the next question. nization you represent spend more the od? nie or from July to December.)	ur office or for your municipality or YES
hearings or meetings?	re than 2 contacts with County Board unty Board supervisor who represents the	YES NO
you do make more than 2 contacts	4 and 5 above, <u>STOP;</u> you need not con at a later date, you must then contact th also sign this form. If you checked "YES	
during the current reporting period	hat if the person or organization you od, you must file a financial disclosur	e statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	e County Clerk at 266-4121 or go to the	Clerk's office at Room 106A of the City-
Date: 10-29	Signature	

Print Name

EXE C

, ,	REGISTRATION BEFORE C	OUNTY BOARD	
DATE: 16 29 19	Name:	Herder Wyleyron	
Item #/Petition/CUP # or Subject: P+f-0-Z	Municipality:		
₩ish to Speak in Support Registering in Support	☐ Wish to Speak in Opposit☐ Registering in Opposition	tion Available for Information Only	
On this occasion, are you officially [If you checked "NO," STOP; you need Name, address and telephone number of the control of the contr	not complete the rest of this forn	m. If you checked "YES," go on to the next question	7.]
Comments:			
2. Are you being paid for your reperson or organization?	n, <u>STOP;</u> you need not comple	ncidental to your other paid duties for this YESNO lete the rest of this form.)
other governmental body?	on, <u>STOP;</u> you need not comp	nalf of your office or for your municipality or Plete the rest of this form except that you must t question.])
	d?	nd more than \$500 on county lobbying activi □YES□NO)	
hearings or meetings?		nty Board supervisors other than at public YESNO oresents the district in which you reside.))
you do make more than 2 contacts a	at a later date, you must then	red not complete the rest of this form. However a contact the County Clerk's office to file a form acked "YES" to either question at this time, go of	
during the current reporting perio	d, you must file a financial	ation you represent spends more than \$500 disclosure statement with the county clerk?	?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or	r go to the Clerk's office at Room 106A of the C	`ity-
Date:	Signature		
	Print Name _		

REGISTRATION BEFORE COUNTY COMMITTEE	
Committee Name: Pecsonal & Finance Your Name: Sr. Fran Hoff	man
DATE of Meeting: 10/29/19 Municipality You Reside in: Town of I	Burte
lear 1.1 t	Decarctivation
☐ Wish to Speak in Support ☐ Wish to Speak in Oppo	esition Plan
Wish to Register in Support	position ParF-0 =
Available for Information Only	,
1. On this occasion, are you officially representing an organization or a person other that YES NO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "Y 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 do not need to complete the rest of this form. If go to the next question.)	f you checked "YES",
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 do not need to complete the rest of this form. go to the next question.)	If you checked "YES",
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 July to December.)	
5. Do you anticipate making more than two contacts with the County Board supervisors	other than at public
hearings or meetings? YES NO (Do not count contacts with the County Board supervisor who represents the district in which you	u reside.)
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do not need to complete the rest of if you do make more than 2 contacts at a later date, you must then contact the County Clerk's of indicating such activity. If you checked "YES" to either question, please continue to the question sign this form.)	ffice to file a form
6. If you answered "YES" to question 5, do you understand that if the person or organizate spends more than \$500 during the current reporting period, you must file a financial disc	
with the County Clerk??	Martin Luther King Jr.,
Date: 10/29/19 Signature: S. Transes Aufman	
015-151 7/18 Printed Name: Sn. Frances Hoffman	

CANE REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: P4F Your Name: ERIC ANDERSON
DATE of Meeting: 29 oct 19 Municipality You Reside in: Town of Primpose
Petition/CUP #/Resolution/Ordinance Amendment/Subject: PWT 0 - 01, EAMR 0 - 2, EXEC 0-3
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
Wish to Register in Support Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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 NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES" go 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 July to December.)
5. Do you anticipate making more than two contacts with the County Board supervisors other than at public
hearings or meetings? YES 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 do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information. Date: 29 out 19 Signature:
015-151 7/18 Printed Name: FZIK ANDERSON

FANR PWT		
EXEC REGISTRATI	ON BEFORE COUNTY BOAR	D
DATE: 10/29/19	Name: <u>Mathew Mo</u> Municipality: <u>Madison</u>	oberg
Item #/Petition/CUP # or Subject:	Municipality: Madison	
Operating EANR O-2, DWT O-1,	xec 0-3	
	peak in Opposition ng in Opposition	ailable for Information Only
1. On this occasion, are you officially representing	g an organization or a person of	her than yourself?
[If you checked "NO," <u>STOP</u> ; you need not complete t	he rest of this form. If you checked	□YESNO d "YES," go on to the next question.]
Name, address and telephone number of each person	or organization you are represent	ing:
	<u> </u>	
	1	
Comments:		
2. Are you being paid for your representation person or organization?	or appearing incidental to yo	our other paid duties for this
[If you checked "NO" to the question, <u>STOP</u> ; you If you checked "YES," continue to the next quest	need not complete the rest of ti	
3. Are you an elected official who is appearin	g solely on behalf of your offi	ce or for your municipality or
other governmental body?		
this form. If you checked "NO," to the question, g		this form except that you must sign
4. Has or will the person or organization you	represent spend more than \$	500 on county lobbying activities
during the current reporting period?(A reporting period is January to June or from Jul		
5. Do you anticipate making more than 2 conf	acts with County Board supe	rvisors other than at public
hearings or meetings?(Do not count contacts with the County Board sup		☐ YES □ NO
•		
[If you checked "NO," to questions 4 and 5 above you do make more than 2 contacts at a later date	, <u>STOP;</u> you need not complete , you must then contact the Co	e the rest of this form. However, if unty Clerk's office to file a form
indicating such activity. You must also sign this the next question.]		
6. If "YES," do you understand that if the pers	son or organization you lep re	sent spends more than \$500
during the current reporting period, you must	file a financial disclosure sta	tement with the county clerk?
[If you checked "NO" please call the County Clert County Building, Madison, for more information.]	at 266-4121 or go to the Clerk	's office at Room 106A of the City-
Date: 10/29/19	Signature Motthew	Mabey
Dale.	Print Nama Matthen	Mobera
	THILL INALLIE TO WELL	

HHN	
REGISTRATION BEFORE COUNTY BOARD	
DATE: 10 29 19 Name: Heidi Weller	ren
Item #/Petition/CUP # or Subject: Municipality:	
HHN 0-6,0-9, C-1	
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	auestion.1
	quodionij
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	or this
person or organization? YES	
[If you checked "NO" to the question, <u>STOP</u> ; you need not complete the rest of this form. If you checked "YES," continue to the next question.]	
	nolity or
3. Are you an elected official who is appearing solely on behalf of your office or for your municipather governmental body?	NO
[If you checked "YES," to the question, <u>STOP</u> ; you need not complete the rest of this form except that ye this form. If you checked "NO," to the question, go on to the next question.]	ou must sign
4. Has or will the person or organization you represent spend more than \$500 on county lobbying the current reporting period?	
(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
(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 indicating such activity. You must also sign this form. If you checked "YES" to either question at this time.	ne, go on to
the next question.]	, 0
6. If "YES," do you understand that if the person or organization you represent spends more that	ın \$500
during the current reporting period, you must file a financial disclosure statement with the count	y 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.]	
Date: Signature	
Print Name	

HHN		
DATE: 10/29/19	REGISTRATION BEFORE COUNTY BO Name:	
Item #/Petition/CUP # or Subject:	Municipality:	
₩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	Ily representing an organization or a persor	cked "YES," go on to the next question.]
Comments:		
person or organization?	epresentation or appearing incidental to on, <u>STOP</u> ; you need not complete the rest the next question.] o is appearing solely on behalf of your tion, <u>STOP</u> ; you need not complete the rest the question, go on to the next question.]	office or for your municipality or
4. Has or will the person or orga during the current reporting peri (A reporting period is January to Ju	nization you represent spend more that od? une or from July to December.)	n \$500 on county lobbying activiti □YESNO
hearings or meetings?	re than 2 contacts with County Board su unty Board supervisor who represents the	YES₩0
you do make more than 2 contacts	4 and 5 above, <u>STOP</u> ; you need not comp at a later date, you must then contact the also sign this form. If you checked "YES" t	County Clerk's office to file a form
during the current reporting peri-	hat if the person or organization you re od, you must file a financial disclosure	statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more		erk's office at Room 106A of the City
Date: 10/29/19	Signature	a Sorensen
	Print Name Meliss	a Sorensen

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REGISTRATION BEFORE COUNTY BOARD

DATE: 10 29	REGISTRATION BEFORE COUNT	
Item #/Petition/CUP # or Subject:	Name:	idio a
#HN-C-OI	- Wurticipality.	ous - C
Wish to Speak in Support Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition	□ Available for Information Only
	ly representing an organization or a p	
[If you checked "NO," <u>STOP;</u> you need	not complete the rest of this form. If you	u checked "YES," go on to the next question.]
Name, address and telephone number	of each person or organization you are	representing:
Comments:		
person or organization?	n, <u>STOP</u> ; you need not complete the	tal to your other paid duties for this YES NO rest of this form.
other governmental body?		your office or for your municipality or YES NO ne rest of this form except that you must sign
4. Has or will the person or organ	nization you represent spend more	e than \$500 on county lobbying activities
hearings or meetings?		ard supervisors other than at public
you do make more than 2 contacts	at a later date, you must then contact	complete the rest of this form. However, if the County Clerk's office to file a form 'ES" to either question at this time, go on to
during the current reporting period	od, you must file a financial disclo	ou represent spends more than \$500 sure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or go to to information.]	the Clerk's office at Room 106A of the City-
Date:	Signature GM	Allost Vacativ
	Drive About 1a	met Vasatis

Keyster

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REGISTRATION BEFORE COUNTY BOARD

DATE: 10-29-19	Name:	Erin	Fabrizias	
Item #/Petition/CUP # or Subject: 日HNー0-05	Municipalit	y: Mwis	700	
₩ish to Speak in Support Registering in Support	☐ Wish to Speak in Oppo☐ Registering in Opposition		☐ Available for Information Only	у
1. On this occasion, are you officially	representing an organizat	ion or a pers	on other than yourself?	
[If you checked "NO," <u>STOP;</u> you need r	not complete the rest of this f	orm. If you ch	ecked "YES," go on to the next que	estion.]
Name, address and telephone number of	of each person or organization	n you are repr	esenting:	
New Bridge Madisi	M			
Mygyw MI E	53713			
Comments:				
2. Are you being paid for your repperson or organization?	, <u>STOP;</u> you need not com		YES	NO
3. Are you an elected official who other governmental body?	on, <u>STOP</u> ; you need not co	mplete the r	est of this form except that you	
4. Has or will the person or organ during the current reporting period (A reporting period is January to Jun	d?			
5. Do you anticipate making more hearings or meetings?(Do not count contacts with the Court			YES	
[If you checked "NO," to questions 4 you do make more than 2 contacts a indicating such activity. You must al the next question.]	nt a later date, you must the	en contact th	e County Clerk's office to file a l	form
6. If "YES," do you understand the during the current reporting period	d, you must file a financi	al disclosur	e statement with the county c	lerk?
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-4121	or go to the	□YESClerk's office at Room 106A of t	he City-
Date: 10-29-19	Signature	\leq	+55	
	Print Name	Erin	tubrizion	-

HHN	REGISTRATIO	ON BEFORE CO	OUNTY COMMITTEE
Committee Name:	.1	I WOULD Your Na	1100
DATE of Meeting:	10/29/19		Reside in: Town of Bauks
	olution/Ordinance Ame		HHN-OX
	peak in Support		☐ Wish to Speak in Opposition
Wish to R	egister in Support		☐ Wish to Register in Opposition
~		Available for Inform	
☐ YES	NO		ization or a person other than yourself? of the form. If you checked "YES" go to the next
Name, address and t	telephone number of eac	ch person or organiza	ation you are representing:
COMMENTS:			
2. Are you being p	aid for your represent	ation or appearing i	incidental to your other paid duties for this
person or organizate (If you checked "NO" go to the next question	to the question, STOP;	NO you do not need to c	complete the rest of this form. If you checked "YES",
3. Are you an elect	ted official who is appe	earing solely on beh	alf of your office or for your municipality or
other governmental (If you checked "YES go to the next question	" to the question, STOP,	NO; you do not need to	complete the rest of this form. If you checked "YES",
4. Has or will the p	erson or organization	you represent spen	d more than \$500 on county lobbying activities
	reporting period? \(\bar{\text{\tin}\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\text{\text{\texi}\text{\text{\text{\text{\texi}\text{\text{\texit{\texi{\texi{\texi{\texi{\texi}\texi{\texi{\texi}\titt{\text{\texi}\text{\text{\texi}\texit{\texi{\texi{\texi{\texi}		
5. Do you anticipat			County Board supervisors other than at public
hearings or meeting (Do not count contact			resents the district in which you reside.)
if you do make more	than 2 contacts at a late	r date, you must ther	not need to complete the rest of this form. <u>However,</u> in contact the County Clerk's office to file a form lease continue to the question below. You must also
			eat if the person or organization you represent ou must file a financial disclosure statement
with the County Cle (If you checked "NO" Blvd., Room 106A for	please call the County	NO Clerk at 266-4121 or	go to the Clerk's office at 210 Martin Luther King Jr.,
Date: 10/24/	9 Signat	ture: S. fr	ander Hoffman
015-151 7/18	Printed Na	ame:	Trances Hoffman

HHM	N BEFORE COUNTY COMMITTEE
DATE of Meeting: 29 oct 19	Municipality You Reside in: TOWN OF PRIMPOSE
Petition/CUP #/Resolution/Ordinance Amen	dment/Subject: HttN - 0 - 04
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
Wish to Register in Support	☐ Wish to Register in Opposition
	Available for Information Only
☐ YES ☐ NO	esenting an organization or a person other than yourself? to complete the rest of the form. If you checked "YES" go to the next person or organization you are representing:
person or organization? ☐ YES ☐	tion or appearing incidental to your other paid duties for this NO ou do not need to complete the rest of this form. If you checked "YES",
	ring solely on behalf of your office or for your municipality or
other governmental body? ☐ YES ☐	
4. Has or will the person or organization ye	ou represent spend more than \$500 on county lobbying activities
during the current reporting period? YI (A reporting period is January to June, or July	
5. Do you anticipate making more than two	contacts with the County Board supervisors other than at public
	Supervisor who represents the district in which you reside.)
if you do make more than 2 contacts at a later	ve, STOP ; you do not need to complete the rest of this form. <u>However</u> , date, you must then contact the County Clerk's office to file a form o either question, please continue to the question below. You must also
	you understand that if the person or organization you represent reporting period, you must file a financial disclosure statement
	NC lerk at 266-4121 or go to the Clerk's office at .210 Martin Luther King Jr.,

 Date:
 29 o o 19
 Signature:
 FIX AND GRESON

 015-151 7/18
 Printed Name:
 FRIK AND GRESON

EANR HAN EXEC	REGISTRA	TION BEFO	RE COUNTY	COMMITT	EE
Committee Name:	P4F		Your Name:	Mannon	Mair
DATE of Meeting: _	10-29-19	Municipal	ity You Reside in	: Maai	FOR
Petition/CUP #/Res	olution/Ordinance A	mendment/S	ubject: EANR-	0-02, P	WT-0-01, EXEC.O.
☐ Wish to S	peak in Support		_ v	Vish to Speak	in Opposition
Wish to R	egister in Support		□ v	Vish to Registe	er in Opposition
		Available	for Information Or	nly	
X YES	□ NO				ecked "YES" go to the next
Name, address and	telephone number of	each person o	r organization you	are represen	ting:
	AKSCME-	DANG	COUNTY	EBR	720
	60B	347-70	277		
COMMENTS:					
person or organiza (If you checked "NO" go to the next questi 3. Are you an elec other governmenta (If you checked "YES go to the next questi 4. Has or will the p	tion? YES "to the question, STC on.) ted official who is a I body? YES S" to the question, ST on.)	NO per you do not per you do not NO OP; you do not on you repres YES	need to complete ly on behalf of you t need to complete ent spend more NO	the rest of thi	her paid duties for this is form. If you checked "YES", for your municipality or his form. If you checked "YES", a county lobbying activities
5. Do you anticipa	te making more tha	n two contact	s with the County	y Board supe	ervisors other than at public
hearings or meeting (Do not count contact	gs? YES [cts with the County Bo	NO pard supervisor	r who represents t	the district in v	which you reside.)
if you do make more	than 2 contacts at a	later date, you	must then contac	t the County (the rest of this form. <u>However,</u> Clerk's office to file a form question below. You must also
					rganization you represent cial disclosure statement
with the County Cle (If you checked "NO Blvd., Room 106A fo	" please call the Cour or more information.	<	6-4121 or go to the	e Clerk's office	e at 210 Martin Luther King Jr.,
Date: 10/79/	19 Sig	nature:	Jr. P	n	
015-151 7/18	Printed	Name:	Shannon	Male	

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/29/19 Name: Janet Krestr
AA ad a co
HW-0-09 AND HITN-0-06
1100011111000-06
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this oceasion, 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:
 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 activitie 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?
[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.]
() 11, f
Date: Signature
Print Name Jamet Koresta