## REGISTRATION BEFORE COUNTY BOARD

DATE: 11/4/16  Item #/Petition/CUP # or Subject:  Municipality: Madison  Municipality: Madison
☐ Wish to Speak in Support ☐ Wish to Speak 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?  WES
Early Con Emproyee Month 100
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: 11/14/16 Signature angela faircloth  Print Name Angela Faircloth

## REGISTRATION BEFORE COUNTY BOARD

DATE: 11-14-16  Name: Deborah SELJE  Municipality: Madison
tem #/Petition/CUP # or Subject: Municipality: Mad LSove
Employee Rase 3% nee
Wish to Speak in Support □ Wish to Speak in Opposition □ Registering in Support □ Registering in Opposition □ Available for Information Only
On this occasion, are you officially representing an organization or a person other than yourself?  WES
Name, address and telephone number of each person or organization you are representing:
Dane County Emp-Group Assoc. 720
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?□\YES□NO [If you checked "YES," to the question, <u>STOP</u> ; you need not complete the rest of this form except that you must sig 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□YNO (A reporting period is January to June or from July to December.)
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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.]
Date: 11-14-16 Signature Deboyah SELJE
Print Name Deboyah SELJE

REGISTRATION BEFORE COUNTY BOARD
REGISTRATION BEFORE COUNTY BOARD  Name: Sharm Maier  Item #/Petition/CUP # or Subject: Municipality: Had 5 Males Municipality: M
Item #/Petition/CUP # or Subject: Municipality: Dane Made 5 M
Empraise 3% Dec valle than 10
☐ 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?
Name, address and telephone number of each person or organization you are representing:
Tane County Emp. Group Jesoc. 720
Comments:
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[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:
Date:

## REGISTRATION BEFORE COUNTY BOARD

DATE: November 14, 2016 Name: Kathryn (Kate) Schulle
Item #/Petition/CUP # or Subject: Municipality: City of Madison
DATE: November 14, 2016  Name: Kathryn (Kate) Schulte  Item #/Petition/CUP # or Subject:  Passage of Joe Parisi's Clean Energy Poposals  in 2017 Bulget
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?□YES
[If you checked "NO," <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?
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.)
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[If you checked "NO," to questions 4 and 5 above, <u>STOP;</u> you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? □YES□NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: 11/14/2016 Signature Kathryn Schulte  Print Name Kathryn Schulte
Print Name Kathryn Schulte

DATE: 2/23/20/7 Name: KATHLEEN WICHOLS  Item #/Petition/CUP # or Subject: Municipality: MADLS
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
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