REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Exec, Comm. Name: Ann Fleschle
ATE: 12/3/15 Municipality: MADISON
etition/CUP #/Resolution/Ordinance Amendment/Subject: 2015 RES. 314 # 2
Wish to Speak in Support
1 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? YES NO Yes NO Tyou checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.] Tame, address and telephone number of each person or organization you are representing:
omments:
Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
Has or will the person or organization you represent spend more than \$500 in county lobbying activities during the current reporting period?
Do you anticipate making more than 2 contacts with County Board upervisors other than at public hearings or meetings?
f 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 ore than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You ust also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
If "YES," do you understand that if the person or organization you represent pends more than \$500 during the current reporting period, you must file a nancial disclosure statement with the county clerk?
ate: (2/3/15) Signature Signature
Print Name ANN FLEISCHLI

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Execut	omm 'Nar	ne: Back	na Re	red		
DATE: 12/3/15		Mui	nicipality: <u>Ma</u>	dison	-		
Petition/CUP #/Resol	ution/Ordina	nce Amendment/S	Subject: 2015	Res 3	314772		
☐ Wish to Speak in St Registering in Supp		☐ Wish to Speak☐ Registering in		☐ Avai	lable for Info	rmation On	ly
1. On this occasion, a [If you checked "NO," S Name, address and tele	STOP; you need	l not complete the res	TES St of this form. If y	NO you checked "	YES," go on to		estion.]
Comments:							
2. Are you being paid other paid duties for [If you checked "NO" to If you checked "YES," to the state of the	this person of the question,	or organization? . STOP; you need not d			□ YES		NO
3. Are you an elected or for your municipa [If you checked "YES," you checked "NO," to the state of the state	lity or other pation,	governmental bod <u>STOP;</u> you need not	y? complete the rest				NO is form. Ij
4. Has or will the pe on county lobbying a (A reporting period is Ja	ctivities duri	ng the current rep	orting period?		□ YES		NO
5. Do you anticipate supervisors other that (Do not count contacts v	n at public h	earings or meeting	gs?		☐ YES ch you reside.)		NO
[If you checked "NO," t more than 2 contacts at must also sign this form.	a later date, yo	u must then contact t	he County Clerk's	office to file of	a form indicati	ing such acti	
6. If "YES," do you spends more than \$56 financial disclosure s [If you checked "NO" pl Building, Madison, for r	00 during the tatement with lease call the Co	current reporting the county clerk ounty Clerk at 266-4	g period, you mı ?	ıst file a	□ YES		NO County
Date:12d	3/15		Signatur	Borba	AHC HRes	eed	
			Print Name	Borbara	- HRes	0	