REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Name:	Dance	Mers	
DATE: 6-12-2016	Municipa	ality:		
Petition/CUP #/Resolution/Ordin				
☑ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available for Info	rmation Only
1. On this occasion, are you office	ed not complete the rest of the	his form. If you	O checked "YES," go on to	
Comments:				
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?		YES	₽ NO
3. Are you an elected official whor for your municipality or other [If you checked "YES," to the question, you checked "NO," to the question, g	r governmental body? n, <u>STOP</u> ; you need not com		IES	NO must sign this form. I
4. Has or will the person or orgon county lobbying activities dur (A reporting period is January to June	ring the current reportin	ng period?	han \$500 □ YES	₽ NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Count	hearings or meetings?		L IES	E/ 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 of	псе то јне а јогт така	ing such activity. 20th
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.	he current reporting per ith the county clerk? County Clerk at 266-4121 o	riod, you mus	t me a	NO of the City-County
Date:		Signature	Banc Let	The state of the s
		Print Name		

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Homeless Isa	Suls Name:	SUSAN PASTOR	
DATE: June 13, 2016			
Petition/CUP #/Resolution/Ordinal	nce Amendment/Subject:	Operations Fording for Comprehensing	Day Centes
☐ Wish to Speak in Support ☐ Registering in Support	☐ Registering in Opposition	☐ Available for Infor	mation Only
Please support Con 1. On this occasion, are you official [If you checked "NO," STOP; you need Name, address and telephone numbe	ally representing an organization YES not complete the rest of this form	ation or a person other than you NO m. If you checked "YES," go on to	ourself? the next question.]
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 complete the	YES	□ 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 complete the	YES	□ NO must sign this form. If
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June of	ng the current reporting per	d more than \$500 iod? □ YES	□ NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?	L 1E3	□ 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	ou must then contact the County	Clerk's office to file a form inaican	ng such activity. Tou
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the C Building, Madison, for more information	e current reporting period, y h the county clerk? County Clerk at 266-4121 or go to	ou must file a	□ NO of the City-County
Date:	Sign	nature	
	Print	Name	

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: CITY-CTS HOME USS KEITH VALIGHETTE
DATE:
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
✓ Wish to Speak in Support
1. On this occasion, are you officially representing an organization or a person other than yourself? YES NO NO
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?
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. 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?
Print Name SELLO UNCLUBE