Committee Name: 2 LR	Name:	Kex C	onnely	
DATE: 8/25/2015	Municipa	ality: Medi	ng Township	
Petition/CUP #/Resolution/Ordin	ance Amendment/Subje	ect: 1080	04	
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available for Inform	nation Only
1. On this occasion, are you office. [If you checked "NO," STOP; you nee Name, address and telephone numb	YES ed not complete the rest of th	his form. If you	O checked "YES," go on to the	
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? <u>STOP</u> ; you need not compl		□ YES	₽ 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? n, <u>STOP</u> ; you need not comp		□ YES	NO Noust sign this form.
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June	ing the current reportin	g period?		□ NO
5. Do you anticipate making mo supervisors other than at public I (Do not count contacts with the Count	hearings 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 Co	ounty Clerk's off	ice to file a form indicating	
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	e current reporting perith the county clerk? County Clerk at 266-4121 or	iod, you must	file a □ YES	□ NO the City-County
Date: 08/25/2015	2	Signature	Rex A. Connety	
	j	Print Name <u></u>	lex A. Conney	

Committee Name: Name: Kochelle Chadn, of
DATE: 8/25/15 Municipality: Medina
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Long 10864
 □ 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? ———————————————————————————————————
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 mak 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: Signature
Print Name

REGISTRATION BEFORE COUNTY COMMITTEE Name: Carmon 5, Wilson Committee Name: ZLR 8-25-2015 Municipality: Town of Verona Petition/CUP #/Resolution/Ordinance Amendment/Subject: 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? M 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? YES NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over 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 [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 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?...... 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, STOP; 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?...... \square 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: _

Print Name

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Municipality: DATE: Petition/CUP #/Resolution/Ordinance Amendment/Subject: 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," 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? YES NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over 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 \square NO [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?...... \(\square\) 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?......

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, STOP; 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?..... \square YES [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: ____ 8/25/5 Signature

Print Name

Committee Name: <u>Zoning & Regulation</u> Name DATE: 8/25/2015 Munic	: Loveen Kempfer
DATE: 8/25/2015 Munic Petition/CUP #/Resolution/Ordinance Amendment/Su	cipality: 10 w N 6+ Barke Object: R1 to R3 Rezone 10861
☐ Wish to Speak in Support ☐ Wish to Speak in	n Opposition
☐ Registering in Support ☐ Registering in O	pposition
1. On this occasion, are you officially representing an YE [If you checked "NO," STOP; you need not complete the rest of Name, address and telephone number of each person or o	of this form. If you checked "YES," go on to the next question.]
Comments:	
2. Are you being paid for your representation or apper 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.]	
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, STOP; you need not convolved you checked "NO," to the question, go on to the next question.	omplete the rest of this form except that you must sign this form. If
4. Has or will the person or organization you represe on county lobbying activities during the current report (A reporting period is January to June or from July to December.)	rting period? 🗆 YES 🖎 NO
5. Do you anticipate making more than 2 contacts wi supervisors other than at public hearings or meetings (Do not count contacts with the County Board supervisor who	? □ YES ☒ NO
	need not complete the rest of this form. However, if you do make County Clerk's office to file a form indicating such activity. You tion at this time, go on to the next question.]
6. If "YES," do you understand that if the person or spends more than \$500 during the current reporting person of the 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 must file a
Date: $8/25/2015$	Print Name Loveen Courter

Committee Name: LLK Name: Judy C. Dreun's
DATE: 8 25 15 Municipality: Town of Dane
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10869
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 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?
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: 8/25/15 Signature Judy Breunig Print Name Judy Breunig

Committee Name:	Name: //w Street
DATE:	Municipality: Rotland
Petition/CUP #/Resolution/Ordin	nance Amendment/Subject: Rezone 1087(
Wish to Speak in Support ☐ Registering in Support	 ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," STOP; you ne	cially representing an organization or a person other than yourself?
Comments:	
other paid duties for this person	representation or appearing incidental to your n or organization?
or for your municipality or othe	ho is appearing solely on behalf of your office or governmental body?
	ganization you represent spend more than \$500 ring the current reporting period?
supervisors other than at public	ore than 2 contacts with County Board hearings or meetings?
more than 2 contacts at a later date,	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make you must then contact the County Clerk's office to file a form indicating such activity. You ked "YES" to either question at this time, go on to the next question.]
spends more than \$500 during t financial disclosure statement w	that if the person or organization you represent the current reporting period, you must file a rith the county clerk?
Date:	Signature
	Print Name

ZLZ REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: ZOWING Name: Rhonda Wethal DATE: 8-25-15 Municipality: Rutland
DATE: 8-25-15 Municipality: Rutland
Petition/CUP #/Resolution/Ordinance Amendment/Subject: <u>/0872</u>
 ☐ 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 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? [If you checked "YES," to the question, <u>STOP</u> ; you need not complete the rest of this form except that you must sign this form. 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? (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: 8-25-15 Signature Phonda Wethal Print Name Rhonda Wethal

Committee Name: Name: Name: Name:	
DATE: 8-25-15 Municipality: WILLA 40	
Petition/CUP #/Resolution/Ordinance Amendment/Subject: REZOME 10873	
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 DO [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:	n.]
· · · · · · · · · · · · · · · · · · ·	
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 more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. 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?	ty
Date: Signature	
Print Name	

Committee Name: 7	_LR Name: _	Dack Wendtland	
DATE: 8/25/15	Municipali	ty:	1.5001)
Petition/CUP #/Resolution	on/Ordinance Amendment/Subject		1087-
Wish to Speak in Support ☐ Registering in Support		osition tion Availab	le for Information Only
[If you checked "NO," <u>STO.</u>	you officially representing an organization of this properties of each person or organization	NO form. If you checked "YES	S," go on to the next question.]
Comments:			
other paid duties for thi	or your representation or appearing sperson or organization?	□	YES NO
or for your municipality [If you checked "YES," to the	ficial who is appearing solely on be or other governmental body? ne question, <u>STOP</u> ; you need not complete uestion, go on to the next question.]		
on county lobbying activ	n or organization you represent specities during the current reporting pays to June or from July to December.)		l YES □ NO
supervisors other than a	aking more than 2 contacts with Cott public hearings or meetings? the County Board supervisor who repres	🗆	
more than 2 contacts at a la	nestions 4 and 5 above, <u>STOP</u> ; you need ter date, you must then contact the Coun you checked "YES" to either question at	nty Clerk's office to file a fo	rm indicating such activity. You
spends more than \$500 c financial disclosure state	derstand that if the person or organ luring the current reporting period ement with the county clerk? e call the County Clerk at 266-4121 or go information.]	l, you must file a	
Date:	S	Signature	
	Pri	nt Name	

Committee Name: Zoneing DATE: 8-25-15 Petition/CUP #/Resolution/Ordin	Land Name:	Chepie,	Trick			
DATE: 8-25-15	Munici	pality:				
Petition/CUP #/Resolution/Ordin	nance Amendment/Sub	oject: /C	1875			
	0					
Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in ☐ Registering in Op		□ Available	for Informa	tion On	1y
1. On this occasion, are you office	cially representing an <i>c</i>	rganization or	a nerson othe	er than your	self?	
	□ YES	S PLNC)			
[If you checked "NO," <u>STOP</u> ; you ne	ed not complete the rest of	this form. If you	checked "YES,	" go on to the	next que	estion.]
Name, address and telephone number	ber of each person or org	ganization you ar	re representing	j'.		
		_				
Comments:						
2. Are you being paid for your rother paid duties for this person [If you checked "NO" to the question If you checked "YES," turn over to the control of the person of the control of the person of th	n or organization? g, <u>STOP</u> ; you need not com		□	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?. on, <u>STOP</u> ; you need not con	nplete the rest of t	□			NO is form.
4. Has or will the person or orgon county lobbying activities dur (A reporting period is January to June	ring the current reporti	ing period?		YES		NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Count	hearings or meetings?.			YES u 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	County Clerk's offi	ice to file a fort	n indicating st		
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement wis [If you checked "NO" please call the Building, Madison, for more information of the statement with the s	ne current reporting pe ith the county clerk? County Clerk at 266-4121	eriod, you must	file a □	YES om 106A of the		NO County
Date:						
		Print Name				

Committee Name:	Name:	RICHARD	VEOVI	G & MI	KE BRALI
DATE: 08/25/2015	Municipa	lity: Town	OF AI	bioN	
Petition/CUP #/Resolution/Ordinance An					
* **	ish to Speak in Oppo		l Available	for Information	on Only
1. On this occasion, are you officially reposition of the content	□ YES uplete the rest of the	is form. If you che	cked "YES,'	" go on to the n	
Comments:					
2. Are you being paid for your represent other paid duties for this person or organ [If you checked "NO" to the question, STOP; you checked "YES," turn over to the next question.	nization? ou need not comple		□	YES	NO NO
3. Are you an elected official who is app or for your municipality or other governia [If you checked "YES," to the question, STOP; you checked "NO," to the question, go on to the	mental body? you need not comp		□		NO sign this form. I
4. Has or will the person or organization on county lobbying activities during the c (A reporting period is January to June or from J	current reporting			YES	A NO
5. Do you anticipate making more than supervisors other than at public hearings (Do not count contacts with the County Board s	or meetings?			YES reside.)	₹ NO
[If you checked "NO," to questions 4 and 5 abo more than 2 contacts at a later date, you must t must also sign this form. If you checked "YES"	hen contact the Co	unty Clerk's office i	to file a forn	n indicating suc	
6. If "YES," do you understand that if the spends more than \$500 during the current financial disclosure statement with the conflict [If you checked "NO" please call the County Clauding, Madison, for more information.]	nt reporting periounty clerk?	od, you must file	a □	YES m 106A of the	□ NO City-County
Date: 08/25/2015		Signature	helag	Bra	ley
	F	Print Name	11CHA	E1 BR	MEY

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: ZLZ Name: MANDER Municipality: BELLY Petition/CUP #/Resolution/Ordinance Amendment/Subject: ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition Available for Information Only Registering in Support ☐ Registering in Opposition 1. On this occasion, are you officially representing an organization or a person other than yourself? YES □ 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: get Handel '008 707-3137 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 need not complete the rest of this form. If you checked "YES," turn over 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 ON C [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?...... \(\square\) YES 'D' 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?..... (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, STOP; 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?..... \square 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: 8/25/15

LTILY Keylor

Print Name LILLY ROUTES

Committee Name: Name: Kim Donovan-
DATE: 9/2 The Municipality: Town of Vore
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10879
☐ 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 other than yourself? YES □ 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: MARGATER LIPSTEIN KM H15 JHNE Angell Meddle Bonk?
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: B/2/1 Signature Jun W. Davork
108 6998797 Print Name KIM W. DONOR

Committee Name: ZCR Name: Scott M Gettigan
DATE: 8-25-15 Municipality: Town of Verona
Petition/CUP #/Resolution/Ordinance Amendment/Subject: DC PREZ-2015-10878
⊠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? 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: Kuct C. Nilkel Nesbit Rd, CCC 6343 Nesbit Rd
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:
Print Name Sest Mc Cotto, any

Committee Name: 2 L K Name: Sasa Broken de
DATE: Azz 25 2015 Municipality: Town of Dana
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Rezon App# 10879
✓ 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:
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: Ang 25, 2015 Signature AM Print Name Sssn V Brabende

Committee Name: 7LR	Name:	hais	Day		
DATE: 8/25/15	Municipality: _	Town	of Mad	ison	
Petition/CUP #/Resolution/Ordinance Amend	lment/Subject:	10880			
	o Speak in Opposition ering in Opposition		☐ Available f	or Information	Only
1. On this occasion, are you officially representation of the second of	⊠ YES	□ NO			
Name, address and telephone number of each pe	erson or organization	n you are	representing:		
Midtown Center LLC, 34. 53703 (608) 268-8105	5 W. Washing	ton Au	e. 51e 30	11 Madison	WI
53703 (608) 268-8105					
Comments:					
2. Are you being paid for your representatio other paid duties for this person or organiza [If you checked "NO" to the question, <u>STOP</u> ; you not If you checked "YES," turn over to the next question	tion? eed not complete the r			ES	□ NO
3. Are you an elected official who is appearing or for your municipality or other governmen [If you checked "YES," to the question, STOP; you have you checked "NO," to the question, go on to the next	tal body?need not complete the		□		Z , NO n 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	ent reporting perio			YES	Ø NO
5. Do you anticipate making more than 2 co supervisors other than at public hearings or to (Do not count contacts with the County Board super	meetings?			YES reside.)	Z NO
[If you checked "NO," to questions 4 and 5 above, some than 2 contacts at a later date, you must then comust also sign this form. If you checked "YES" to e	contact the County Cle	erk's office	to file a form	indicating such a	
6. If "YES," do you understand that if the p spends more than \$500 during the current re financial disclosure statement with the county [If you checked "NO" please call the County Clerk a Building, Madison, for more information.]	porting period, you y clerk?	u must fil	е a □ Y	YES 106A of the Cit	NO sy-County
Date: 8/25/15	Signate	ure <u>C</u>	2	2	
	Print Na	me_ C	hris Dus	1	

Committee Name: Name: Mich
Committee Name: Na
Petition/CUP #/Resolution/Ordinance Amendment/Subject: petitive Aczona 1088)
 □ 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 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?
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: daj 25-15 Signature Print Name NE Reserved

Committee Name: ZLR Name: Gregory 4 Anita Heisig
DATE: 6-25-15 Municipality: Dane Co - Cottnee Conve
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
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?
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: Signature Unita Heisig Print Name Anita Heisig

Committee Name: 2 NR	Name: David R. Dinki	ts
DATE: 8/25/2015	Municipality: Town of Deer face	
Petition/CUP #/Resolution/Ordin	nance Amendment/Subject: 10883	
☑ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only	у
	cially representing an organization or a person other than yourself? YES □ NO red not complete the rest of this form. If you checked "YES," go on to the next ques	stion.]
	ber of each person or organization you are representing: Appin 68379-6506 (Ruegen Rows, Et 1, Marshall 53531	
Comments:		
other paid duties for this person	n, <u>STOP</u> ; you need not complete the rest of this form.	NO
or for your municipality or other	on, <u>STOP</u> ; you need not complete the rest of this form except that you must sign this	NO s form. l
	용서에서 💬 - 1844에는 그런터인 레인터인데인데인터 인터를 검색한 시장사는 라이지 바다를 하게 되었다면 12 10 10 10 10 10 10 10 10 10 10 10 10 10	NO
supervisors other than at public	hearings or meetings?	NO
more than 2 contacts at a later date, y	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you want then contact the County Clerk's office to file a form indicating such activitied "YES" to either question at this time, go on to the next question.]	
spends more than \$500 during th	I that if the person or organization you represent he current reporting period, you must file a ith the county clerk? County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-Cotion.]	(O ounty
Date:8/25/2015	Print Name Davish Dull	
	Print Name Davis Per miles	

Committee Name:_	ZLR	Name:	Ben	# .	Jocelyn	Sorb	odeer
DATE: 8\2	5/2015	Municipa	ality:C	Mbio	n		
Petition/CUP #/Reso	olution/Ordina	nce Amendment/Subje	ct:\088'	4			
Wish to Speak in S □ Registering in Sup		☐ Wish to Speak in Oppo		□ Avai	lable for Info	rmation Or	nly
[If you checked "NO,"	<u>STOP</u> ; you need	ally representing an org	□ NO nis form. If you cl	hecked "	YES," go on to		estion.]
Comments:			a .				
other paid duties fo	r this person of the question, §	presentation or appearing or organization?			□ YES		NO
or for your municip [If you checked "YES,"	ality or other a to the question,	o is appearing solely on governmental body? STOP; you need not compon to the next question.]					NO nis form. If
on county lobbying	activities durin	nization you represent song the current reporting from July to December.)	The same of the sa		□ YES		NO
supervisors other th	an at public h	e than 2 contacts with (earings or meetings? Board supervisor who rep			☐ YES h you reside.)		NO
more than 2 contacts at	a later date, yo	nd 5 above, <u>STOP;</u> you nee u must then contact the Co l "YES" to either question	unty Clerk's office	e to file d	ı form indicati		
spends more than \$5 financial disclosure	500 during the statement with please call the Co	hat if the person or org current reporting perion the county clerk? county Clerk at 266-4121 or on.]	od, you must fi	le a	□ YES		NO County
Date: 8 25 15			Signature 150	Soul	ahe (Jocely	n Naibo
		T	Dulant NI	en -	2 ()201	Savl	200600

Committee Name: 2LR	Name:	ebecca Kan	renmeyer	
DATE: 8/25/15	Municipality:	Soun of Be	Coming Dr	ove
Petition/CUP #/Resolution/Ord	nance Amendment/Subject:_	2323		
Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Oppos ☐ Registering in Oppositio		ble for Information	n Only
1. On this occasion, are you off [If you checked "NO," <u>STOP</u> ; you n	YES	\square NO		
Name, address and telephone nur Nancy Surci	the			
4566 Rustic	Dr. Madison, WI	537/4 60	18-217 953	3
Comments:				
2. Are you being paid for your other paid duties for this perso [If you checked "NO" to the question If you checked "YES," turn over to	n or organization? n, <u>STOP</u> ; you need not complete th		I YES	NO
3. Are you an elected official vor for your municipality or othe [If you checked "YES," to the question, you checked "NO," to the question,	er governmental body?on, <u>STOP</u> ; you need not complete i		□ YES ept that you must si	NO gn this form. I
4. Has or will the person or or on county lobbying activities du (A reporting period is January to Jun	ring the current reporting per		□ YES	NO
5. Do you anticipate making n supervisors other than at public (Do not count contacts with the Count	hearings or meetings?	E	en reputenzar	NO
[If you checked "NO," to questions more than 2 contacts at a later date, must also sign this form. If you check	you must then contact the County	Clerk's office to file a f	form indicating such	
6. If "YES," do you understant spends more than \$500 during financial disclosure statement value [If you checked "NO" please call the Building, Madison, for more information of the statement of	the current reporting period, you that the county clerk?	you must file a	□ YES □	□ NO City-County
Date:8/25/15	Sign	nature //	Katronnyo	
	Print	Name Kebeca	a Katennije	7

Committee Name:	Name:	(37)	2)(/	Sentember	Joh!	$\sqrt{}$
DATE: \$15-\S	Municip	oality:	Cityof	Madison		
Petition/CUP #/Resolution/Ordina	ance Amendment/Subj	ect: (V)	12353			
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in C☐ Registering in Opp		☐ Available	for Informatio	n Only	ž
1. On this occasion, are you offici	YES	∑ NC)			tion.]
Name, address and telephone number of Self	er of each person or orga	anization you ar	e representing	; :		
Comments:						
2. Are you being paid for your reother 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 comp		□	YES		1 0
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? , <u>STOP</u> ; you need not com			YES that you must so	□ N gn this	
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reportin	ıg period?		YES		Ю
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?			YES 1 reside.)		10
[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 Co	ounty Clerk's offic	ce to file a forn	n indicating such		
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 per h the county clerk? ounty Clerk at 266-4121 o	iod, you must f	ile a		□ N(City-Cou	
Date:	15	Signature	She			
		Print Name	Sgóða	nki Joh	W	

Committee Name: ZLR	Name:	Most	John			
DATE: 8-25-15	Municip	ality: C, 4	of M	adison		
Petition/CUP #/Resolution/Ordin		-				
Wish to Speak in Support Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		□ Available	e for Informati	ion On	lv
Li Registering in Support	☐ Registering in Oppo	OSILIOII	LI Available	ior intormati	.on On	ly
1. On this occasion, are you office	YES	X NO)			estion.]
Name, address and telephone num	ber of each person or orga	anization you a	e representing	g:		
Comments:						
 Are you being paid for your rother paid duties for this person [If you checked "NO" to the question If you checked "YES," turn over to the control of the cont	n or organization? a, <u>STOP</u> ; you need not compl the next question.]	lete the rest of th	□ is form.	YES		NO
or for your municipality or othe [If you checked "YES," to the question, you checked "NO," to the question, g	r governmental body? on, <u>STOP</u> ; you need not comp		□			NO is form.
4. Has or will the person or org on county lobbying activities dur (A reporting period is January to June	ring the current reportin	ng period?		YES		NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Coun	hearings or meetings?		🗆	YES u reside.)		NO
[If you checked "NO," to questions 4 more than 2 contacts at a later date, must also sign this form. If you check	you must then contact the Co	ounty Clerk's offi	ice to file a for	m indicating su		
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement will give the characteristic of the property of	he current reporting per ith the county clerk? County Clerk at 266-4121 o	iod, you must	file a	YES om 106A of the		NO Sounty
Date: 8-25-15		Signature //	WIN	M	inc.	
	9	Print Name \(\frac{\frac}\frac{\fir}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac}\f{\frac{\frac}\f{\frac{\frac{\frac{\frac{\frac}\firac{\f{\f{\frac}\fir\f{\f	Ott :	7940		

Committee Name: 2LR	
DATE: 8-25-15	Municipality: City of Madison
Petition/CUP #/Resolution/Ordin	nance Amendment/Subject: CUP 2323
Wish to Speak in Support	☐ Wish to Speak in Opposition
Registering in Support	☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," <u>STOP</u> ; you ne	ed not complete the rest of this form. If you checked "YES," go on to the next question.] ber of each person or organization you are representing:
Comments:	
other paid duties for this person	epresentation or appearing incidental to your or organization?
or for your municipality or other	no is appearing solely on behalf of your office r governmental body?
	anization you represent spend more than \$500 ring the current reporting period?
supervisors other than at public	hearings or meetings?
more than 2 contacts at a later date, y	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make you must then contact the County Clerk's office to file a form indicating such activity. You ed "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement wi	that if the person or organization you represent ne current reporting period, you must file a ith the county clerk?
Date: 8/25/15	Signature
	Print Name chad Baket

Committee Name: Zoning + Land Regulation Name: Mobert Copy
DATE: 8/25/15 Municipality: City of Madison / Blooming France Petition/CUP #/Resolution/Ordinance Amendment/Subject: CVP 2323
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CUP 2323
 □ 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?
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: Signature
Print Name

Committee Name: Name:
DATE: 8-25-15 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 252.5
 □ Wish to Speak in Support □ Registering in Support □ Wish to Speak 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 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.)
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: Signature Ling Schwecken Hurby

Committee N	Name: Z	LLR	Name:	Kuthk	en Max	lup		
DATE:	9/25/15		Municipal	lity: <u><i>B/001/</i></u>	ning Grou	H		
Petition/CUI	P #/Resolution/C	Ordinance Amen	dment/Subjec	et:	J	2.25	-3	
XI Wigh to Cr	pools in Cunnort	□ Wich t	to Speak in On	nosition				
Registering	beak in Support g in Support		to Speak in Op tering in Oppos		□ Available	e for Informa	tion Onl	y
[If you checked	d "NO," <u>STOP</u> ; yo	officially repres	…□ YES ete the rest of thi	is form. If you) checked "YES,	" go on to the		stion.]
Comments:								
other paid d	luties for this ped "NO" to the que	our representation or organization, STOP; you not to the next question	ation?	• • • • • • • • • • • • • • • • • • • •	□	YES	A	NO
or for your n [If you checked	nunicipality or of the quality of th	al who is appear other government estion, <u>STOP;</u> you on, go on to the ne	ntal body? need not compl		□		t sign this	NO form.
on county lo	bbying activities	organization yo s during the curi June or from July	rent reporting			YES	X	NO
supervisors o	other than at pu	g more than 2 co blic hearings or County Board supe	meetings?			YES u reside.)		NO
more than 2 co	ontacts at a later d	ons 4 and 5 above, ate, you must then checked "YES" to d	contact the Cou	nty Clerk's offi	ice to file a for	m indicating s		
spends more financial disc [If you checked	than \$500 duri	tand that if the part of the current real that the count of the County Clerk ormation.]	eporting perio	od, you must	file a □	YES om 106A of th	e City-Co	
Date:(8/25/11			Signature J	When The	Myl Myl	roh	
			Pr	rint Name 7	WITHEEV	11/1/1	1 30	

Committee Name:Name	: DMITRIUS SUHIHS
DATE: 8/25/15 Munic	cipality:
Petition/CUP #/Resolution/Ordinance Amendment/Su	bject: 2323
☐ Wish to Speak in Support ☐ Wish to Speak in ☐ Registering in Support ☐ Registering in O	Opposition
1. On this occasion, are you officially representing an	S NO of this form. If you checked "YES," go on to the next question.]
Comments:	
2. Are you being paid for your representation or apper other paid duties for this person or organization? [If you checked "NO" to the question, <u>STOP</u> ; you need not con If you checked "YES," turn over to the next question.]	
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 convolve you checked "NO," to the question, go on to the next question.	
4. Has or will the person or organization you represe on county lobbying activities during the current repor (A reporting period is January to June or from July to December	ting period? 🗆 YES 🗆 NO
5. Do you anticipate making more than 2 contacts with supervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who	? □ YES □ NO
HIND MANAGEMENT OF BRIDGE AND CONTRACTOR OF THE	need not complete the rest of this form. However, if you do make County Clerk's office to file a form indicating such activity. You ion at this time, go on to the next question.]
6. If "YES," do you understand that if the person or spends more than \$500 during the current reporting p financial disclosure statement with the county clerk? [If you checked "NO" please call the County Clerk at 266-412 Building, Madison, for more information.]	eriod, you must file a
Date: 8/27/15	Signature Culiff
	Print Name DMII 32135 JUHIHS

Committee Name: Zoning and land Name: DATE: 8. 26. 15 Municipality Detition/CUB#/Resolution/Ordinance Amandment/Subjects	Susar	n Mo	Bryde		
DATE: 8. 36. 15 Municipality	: City	of Ma	dison/12	3100	nin
Petition/CUP #/Resolution/Ordinance Amendment/Subject:_	CUP'	2323		67	ove
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition		☐ Available	for Informatio	n Onl	у
	16	22		2915	-
1. On this occasion, are you officially representing an organi □ YES		person othe	r than yourse	lf?	
If you checked "NO," <u>STOP</u> ; you need not complete the rest of this fo	orm. If you cl	necked "YES,	go on to the ne	ext que	stion.]
Name, address and telephone number of each person or organization	tion you are	representing	; :		
Comments:					
2. Are you being paid for your representation or appearing i other paid duties for this person or organization?		□	YES	Z Z	NO
3. Are you an elected official who is appearing solely on behor 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.]		□			NO s form. 1
4. Has or will the person or organization you represent spen on county lobbying activities during the current reporting period is January to June or from July to December.)			YES		NO
5. Do you anticipate making more than 2 contacts with Coursupervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who represen			YES reside.)		NO
If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need no nore than 2 contacts at a later date, you must then contact the County nust also sign this form. If you checked "YES" to either question at th	Clerk's office	e to file a forn	n indicating such	257.0 50	
6. If "YES," do you understand that if the person or organize spends more than \$500 during the current reporting period, a similar disclosure statement with the county clerk?	you must fi	le a □	YES m 106A of the 0		NO ounty
Date: 8-25./5 Sig	nature SZ	sar 1	Nc <i>lon</i> McBu	<u> </u>	
Print	Name (S	lisan	McBu	1 de	-

Committee Name:	Name:	Daniel	alusk	Ge		
DATE: 8/25/15	Municipality:	3176		W. C. F. Sec.		
Petition/CUP #/Resolution/Ordina			237	23_		
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposition Registering in Opposition	tion n □	Available	for Informa	tion On	ly
1. On this occasion, are you officia		ation or a pe	erson other	r than your	self?	
[If you checked "NO," <u>STOP</u> ; you need		no. If you ched	cked "YES,"	go on to the	next que	estion.]
Name, address and telephone number	er of each person or organizat	ion you are re	epresenting	į	1980	
Comments:						
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, Solution of the checked "YES," turn over to the	or organization? STOP; you need not complete the		□	YES	Þ	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 to		□	YES that you mus		NO is form.
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June o	ng the current reporting per			YES /	Α□	NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	earings or meetings?		which you	YES 7. 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	u must then contact the County (Clerk's office t	o file a form	indicating s		
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Communication of the property of t	current reporting period, yn the county clerk?ounty Clerk at 266-4121 or go to	ou must file	a □	YES m 106A of th		NO Sounty
Date: 8/25/15	Sign	nature	<u>il (l</u>	yli Gluski	······	

Committee Name:	Name:	Jehla	Schrocck	cnthala	١٢
DATE: 8/25/15	Municip	ality:	-00	3	
Petition/CUP #/Resolution/Ordina	ance Amendment/Subj	ect:	250	_5	
☐ Wish to Speak in Support☐ Registering in Support☐	☐ Wish to Speak in C ☐ Registering in Opp		□ Available	e for Information	on Only
1. On this occasion, are you officing	YES If not complete the rest of the second	this form. If j	NO you checked "YES,	" go on to the n	
Name, address and telephone number	er of each person or org	anization yo	u are representing	<u>. </u>	
Comments:					
2. Are you being paid for your rejother 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 comp		□	YES	⊌ NO
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? , <u>STOP</u> ; you need not com				NO No sign this form. If
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reportin	ng period?.		YES	⊠ NO J/A
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?		П	YES u reside.)	₫ 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	u must then contact the C	ounty Clerk's	office to file a for	m indicating suc	
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 per h the county clerk? ounty Clerk at 266-4121 c	riod, you m	ust file a	YES om 106A of the	□ NO City-County
Date: 8125/15		Signature	fehla sch	rockert	hall
		Print Name	8/25/15	<u>Jehla</u> schroe	hally Chenthaler

Committee Nam	e:	Name:			
DATE: X	25.15	Municipa	ality:		
Petition/CUP #/I	Resolution/Ordina	nce Amendment/Subje	ect:	53.73	
☐ Wish to Speak☐ Registering in	1557757	☐ Wish to Speak in O Registering in Oppo	pposition osition	☐ Available for Informat	tion Only
		□ YES	Ď NO	person other than yours	
Name, address an	id telephone number SULC 395-4424	er of each person or orga Decker Heli	nization you are S∖	representing:	7
Comments:					
other paid dutie [If you checked "N	es for this person o	presentation or appears or organization? STOP; you need not comple next question.]			√6 NO
or for your mun [If you checked "Y	icipality or other g ES," to the question,	o is appearing solely on governmental body? STOP; you need not compon to the next question.]			NO t sign this form. If
on county lobby	ing activities duri	nization you represent and the current reporting from July to December.)	g period?		□ NO
supervisors othe	r than at public h	e than 2 contacts with earings or meetings? Board supervisor who rep			NO NO
more than 2 contact	cts at a later date, yo		ounty Clerk's offic	ne rest of this form. Howeve e to file a form indicating so n to the next question.]	
spends more that financial disclose [If you checked "N	n \$500 during the ure statement with		iod, you must fi	le a	NO e City-County
			Print Name	Jana Sol	ranche Hole

Committee Name: 7LR Name: Mike Knight
Committee Name: 7LZ Name: White Knight DATE: Municipality: Town of Mantrose
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CVP 2324
 □ 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? ———————————————————————————————————
Name, address and telephone number of each person or organization you are representing:
Mire Knight 420 Sunget Drive Verona W1 53593
6082393936
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? YES DO 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: Av. 25, 2015 Signature M. Knicht Print Name M. Knicht
Print Name

Commit	tee Nam 9 :	2LR			Ed o		Λ		//www
DATE:_	8/25			Municipality		wn of	Mont	trose	
Petition	/CUP #/Resol	ution/Ordina	nce Amendm	ent/Subject:_	CUP	232	4 K	night	
	to Speak in Stering in Supp	15 00 (15 00)	The second secon	peak in Oppos g in Opposition		MAva	ilable for Ir	nformation O	ılv
1. On th	nis occasion, a	a re you officia STOP; you need ephone number	Ily representi	ng an organi YES e rest of this fo	zation or N rm. If you	a person O checked '	other than	n yourself?	- 1914
Comme	nts:								
other p	aid duties for necked "NO" to	d for your rep this person of the question, <u>S</u> turn over to the	r <mark>organizatio</mark> i <u>TOP</u> ; you need	1?			.□ YES	×	NO
or for yo	our municipa necked "YES,"	d official who lity or other g to the question, he question, go o	overnmental STOP; you need	body?d not complete					NO nis form.
on coun	ty lobbying a	erson or organ ctivities durin nuary to June or	g the current	reporting pe					NO
supervis	ors other tha	making more m at public he with the County	arings or med	etings?			☐ YES		NO
more that	n 2 contacts at	o questions 4 an a later date, you If you checked	must then cont	act the County	Clerk's of	fice to file	a form indic	cating such act	
spends r financia [If you ch	nore than \$50 I disclosure s necked "NO" pl	understand the 00 during the tatement with lease call the Conore information	current report the county clunty Clerk at 20	rting period, ; erk?	you must	file a	□ YES		NO County
Date:	0/25/13	5		Sig	nature	al.			
				Print	Name	Ed	Show		

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Name: Municipality: DATE: Petition/CUP #/Resolution/Ordinance Amendment/Subject: ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition Available for Information Only ☐ Registering in Support ☐ Registering in Opposition 1. On this occasion, are you officially representing an organization or a person other than yourself? YES [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: Tour of Comments: 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over 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?...... \(\square\) 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?...... 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, STOP; 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.]

Committee Name: Dark County Zoren Name: Jeff Endres
DATE: 8-25-15 Municipality: Spring Fre 1
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Or Lingue Abrenly out
2015 OH - 014
 ☐ 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: Taun Of Spring Field 849-7887
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: 8-25-15 Signature Illy & Gives Print Name Print Name

Committee Name: Tim Welsh
DATE: 8 25 25 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2015 0 A - 014
Wish to Speak in Support
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: NG two Heritage Land Trust 258-9797 303 S Paterson St., #6, Madisn 53703
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over 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?
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: 8 25 2014 Signature Jin Welsh Print Name Jim Welsh

Committee Name:	ZLR	Na	me:	MARK	Koffe	犯了	
DATE: 8	25 15	Μι	nme:	SPRING	160		
Petition/CUP #/Reso	lution/Ordina	nce Amendment	/Subject:	OA	2015	- 014	
Wish to Speak in S		☐ Wish to Spea		,			
Registering in Sup		☐ Registering in			Available	for Informatio	on Only
1. On this occasion, [If you checked "NO," Name, address and te	STOP; you need	not complete the re	YES est of this form or organization	□ NO n. If you ched	cked "YES,"	go on to the n	
Comments:							
2. Are you being pa other paid duties fo [If you checked "NO" i If you checked "YES,"	to the question, <u>S</u>	<u>TOP</u> ; you need not	ppearing in	cidental to y	our orm.	YES	□ NO
3. Are you an electe or for your municipa [If you checked "YES," you checked "NO," to t	ality or other g	overnmental boo STOP; you need no	dy? ot complete th		□		NO sign this form.
4. Has or will the p on county lobbying a (A reporting period is J	activities durin	g the current re	porting peri			YES	NO
5. Do you anticipat supervisors other th (Do not count contacts	an at public he	arings or meetir	ıgs?			YES reside.)	NO
[If you checked "NO," more than 2 contacts at must also sign this forn	t a later date, you	must then contact	the County C	lerk's office t	o file a form	indicating suc	
6. If "YES," do you spends more than \$5 financial disclosure so [If you checked "NO" properties and the second sec	500 during the statement with olease call the Co	current reporting the county clerk unty Clerk at 266-4	ng period, yo k?	ou must file	a □	YES n 106A of the	□ NO City-County
Date:	25/15		Signa	nture U			
			Print N	ame MA	PY PO	FERS	

Committee Name: Zoning Com	mittee Name: Bob Neerle	and
DATE: 8-25-18	Municipality: Springdal	
Petition/CUP #/Resolution/Ordi	nance Amendment/Subject: CUP	2310
□ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition☐ A	available for Information Only
[If you checked "NO," <u>STOP</u> ; you n	cially representing an organization or a persection of a persection of the complete the rest of this form. If you checked the person or organization you are reputation.	ed "YES," go on to the next question.]
Comments:		
other paid duties for this person	representation or appearing incidental to you or organization?	\square YES \square NO
or for your municipality or othe	ho is appearing solely on behalf of your officer governmental body?	\square YES \square NO
7	canization you represent spend more than \$5 ring the current reporting period?e or from July to December.)	
supervisors other than at public	ore than 2 contacts with County Board hearings or meetings?ty Board supervisor who represents the district in w	
more than 2 contacts at a later date,	and 5 above, <u>STOP</u> ; you need not complete the reseason must then contact the County Clerk's office to fixed "YES" to either question at this time, go on to t	file a form indicating such activity. You
spends more than \$500 during t financial disclosure statement w	I that if the person or organization you reprehe current reporting period, you must file a ith the county clerk?	□ YES □ NO
Date: 8-25-15	Signature Signature	Neerland
	Print Name Ros	Neerland