COMON À COUNTY COMMITTEE
Committee Name: Chery / Tinton
DATE: 12-15 Municipality: Colorty
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 05KINS 10 1 10 10 10 10 10 10 10 10 10 10 10 1
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ 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 of organization you are representing
205. De vorale Drive
Comments: Madi 50 n W 53714 6082197
2. Are you being paid for your representation or appearing incidental to your
other paid duties for this person or organization?
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 NO
[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. If you checked "NO," to the question, go on to the next question.]
you checked 140, 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?
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 dealed "NO" to acception 4 and 5 above STOD, you need not complete the next of this form. However, if you do make
[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.]
$\alpha$
Date: 12-72-15  Signature Muy Oliva  Print Name Mory EKIND
Date: Signature Signature
Print Name Only 1 KINO
1100
matt Twelver convers emails

Committee Name: ZLR	Name:	Robin	Mittentl	re	
DATE: 12/22/15	Municip	ality:			
Petition/CUP #/Resolution/Ordina	ance Amendment/Subj	ect: Rezo	re 10°	119	
☑ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available fo	or Information O	nly
1. On this occasion, are you offici [If you checked "NO," <u>STOP</u> ; you need Name, address and telephone number	YES d not complete the rest of the	his form. If you	<b>)</b> checked "YES," g		uestion.]
Comments:					
2. Are you being paid for your re other 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 compl		□ Y	ES 🗆	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?, STOP; you need not comp		□	YES   nat you must sign t	NO his form.
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June of	ng the current reportin	g period?		YES 🗆	NO
5. Do you anticipate making more supervisors other than at public has (Do not count contacts with the County)	earings or meetings?		🗆 Y	YES  eside.)	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 checke	ou must then contact the Co	ounty Clerk's off	ice to file a form i	indicating such ac	
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement wit [If you checked "NO" please call the C Building, Madison, for more information	e current reporting per h the county clerk? County Clerk at 266-4121 o	iod, you must	file a 🏻 🐧	YES   106A of the City-	<b>NO</b> County
Date: 12/22/15		Signature //	L. pas	Hentha	
	n e	Print Name	Robin Mi	Hentha	

REGISTRATIO	N BEFORE	E COUNTY	COMMITT	EE	11 ):10	
Committee Name: ZLR	Name:	Mark	Freden	bera/	Hoe	ksfr
Committee Name: ZLR  DATE: 12/22/2015	Municip	ality: 700	un of	offene	Gro	ve
Petition/CUP #/Resolution/Ordinance Amo				, 190		
		195	***			
,	h to Speak in C istering in Opp	170-276	☐ Available	for Informa	tion On	ly
1. On this occasion, are you officially repr [If you checked "NO," STOP; you need not comp Name, address and telephone number of each	VES plete the rest of t	this form. If you	O checked "YES,	" go on to the		estion.]
Tvanie, address and telephone number of each	r person or org	amzacion you a	ire representing	··		
Comments:						
2. Are you being paid for your representa other paid duties for this person or organia [If you checked "NO" to the question, <u>STOP</u> ; you If you checked "YES," turn over to the next question.	ization? u need not comp			YES		NO
3. Are you an elected official who is appear or for your municipality or other governm [If you checked "YES," to the question, STOP; you checked "NO," to the question, go on to the	ental body?		□			NO is form.
4. Has or will the person or organization on county lobbying activities during the cu (A reporting period is January to June or from Ju	irrent reportii	ng period?		YES		NO
5. Do you anticipate making more than 2 supervisors other than at public hearings (Do not count contacts with the County Board su	or meetings?		🗆	YES a reside.)		NO
[If you checked "NO," to questions 4 and 5 above more than 2 contacts at a later date, you must the must also sign this form. If you checked "YES" to	en contact the C	ounty Clerk's of	fice to file a fort	n indicating s		
6. If "YES," do you understand that if the spends more than \$500 during the current financial disclosure statement with the coul [If you checked "NO" please call the County Cle Building, Madison, for more information.]	reporting per inty clerk?	riod, you must	file a □	YES om 106A of th		NO County
Date: 27 Dec 2015		Signature /	Mary Pr	Julio	ny	
		Print Name _/	iank pro	rovende	19	

Committee Name: ZUR	Name: Linda Link	
DATE: 12/22/15	Municipality: Peasont S	prings
Petition/CUP #/Resolution/Ordi	nance Amendment/Subject: 10923	, 0
₩ Wish to Speak in Support  Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available	e for Information Only
[If you checked "NO," <u>STOP</u> ; you no	icially representing an organization or a person otherwise NO seed not complete the rest of this form. If you checked "YES, aber of each person or organization you are representing	" go on to the next question.]
Comments:		
other paid duties for this person	representation or appearing incidental to your n or organization?	YES NO
or for your municipality or othe	Tho is appearing solely on behalf of your office or governmental body?	
	ganization you represent spend more than \$500 tring the current reporting period?	YES NO
supervisors other than at public	tore than 2 contacts with County Board the hearings or meetings?	YES NO NO
more than 2 contacts at a later date,	4 and 5 above, <u>STOP</u> ; you need not complete the rest of this you must then contact the County Clerk's office to file a fort ked "YES" to either question at this time, go on to the next of	m indicating such activity. You
spends more than \$500 during t financial disclosure statement w	d that if the person or organization you represent the current reporting period, you must file a with the county clerk?	YES □ NO om 106A of the City-County
Date: (2)12/15	Signature MM /9	inh
**************************************	Print Name Linda Li	nk

REGISTRATION BEFORE COUNTY COMPANITIES
Committee Name: July Richards
DATE: 12/22/15 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 10/00/5-02333
✓ 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 DNO  [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:  (608) 755-9273  2561 Collepton Rd, Collage 61000, WI
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 Mus Fichards 87

Committee Name: ZLR Name: DALE HYSTON
DATE: 12 - 22 - 15 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 02333
<ul> <li>□ Wish to Speak in Support</li> <li>□ Wish to Speak in Opposition</li> <li>□ Registering in Support</li> <li>□ Registering in Opposition</li> <li>□ Available for Information Only</li> </ul>
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:
R. H. HUSTON CO
2561 COFFEXTOWN Rd COTTAGE GROVE
2561 Coffeytown Rd COTTAGE Onova Comments: 608-255-9223
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: 12-22-15 Signature DALE HUSTON

Committee Name:	ZUR	Name:	_ Day	e Volerbe	7	
DATE: (2 22	L5-	Municip	oality: <u>Ch</u> a	netione	<i>(</i> /	
Petition/CUP #/Reso	lution/Ordinan	ce Amendment/Subj	ect: <u>Co</u>	P 12333	3	
☐ Wish to Speak in S☐ Registering in Supp	* *	☐ Wish to Speak in O☐ Registering in Opp			for Information	n Only
1. On this occasion,  [If you checked "NO," S  Name, address and tel	STOP; you need i		≱ Nothis form. If you	O checked "YES,	" go on to the ne.	
Comments:						
2. Are you being pai other paid duties for [If you checked "NO" to If you checked "YES,"	this person or othe question, <u>ST</u>	organization? TOP; you need not comp		□	YES	□ NO
3. Are you an electe or for your municipa [If you checked "YES," you checked "NO," to the	lity or other go to the question, §	overnmental body? STOP; you need not con		□	YES t that you must si	□ NO gn this form. I
4. Has or will the peon county lobbying a (A reporting period is Ja	ctivities during	g the current reporti	ng period?		YES	□ NO
5. Do you anticipate supervisors other that (Do not count contacts w	an at public hea	arings or meetings?		🗆	YES u reside.)	□ NO
[If you checked "NO," i more than 2 contacts at must also sign this form	a later date, you	must then contact the C	ounty Clerk's of	fice to file a fort	n indicating such	
6. If "YES," do you spends more than \$5 financial disclosure s [If you checked "NO" p Building, Madison, for the state of	00 during the catatement with lease call the Cou	current reporting per the county clerk? unty Clerk at 266-4121	or go to the Clerk	file a		
Date: 12/2	22/15		Signature	JAUR L	100/58L	

Committee Name: ZLZ Name: Joan Volenberg
DATE: 12 22/15 Municipality: Chastlese
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CJP # 2333
<ul> <li>□ Wish to Speak in Support</li> <li>□ Registering in Support</li> <li>□ Registering in Opposition</li> <li>□ Available for Information Only</li> </ul>
1. On this occasion, are you officially representing an organization or a person other than yourself?  WES 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: 12/22/15 Signature Down Volenberg

Committee Name:Name:	
DATE: 17 22075 Municipality: Dane Cty	
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 0995	
<ul> <li>□ Wish to Speak in Support</li> <li>□ Registering in Support</li> <li>□ Registering in Opposition</li> <li>□ Available for Information Or</li> </ul>	nly
1. On this occasion, are you officially representing an organization or a person other than yourself?	estion.]
Name, address and telephone number of each person or organization you are representing:  WOUND W	
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?	NO
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?	NO nis form. I
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.)	NO
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?	NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if yo more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such acts 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?	<b>NO</b> County
Date: 12 m 2015  Signature AND Roll Soux	Mun

Committee Name: ZLR	Name: Jadyn Tracy
DATE: 12 22 2015	Name: Jadyn Tracy Municipality: Dave County
Petition/CUP #/Resolution/Ordinance Am	
• • •	sh to Speak in Opposition  gistering in Opposition  □ Available for Information Only
[If you checked "NO," <u>STOP</u> ; you need not com	resenting an organization or a person other than yourself?
Comments:	
2. Are you being paid for your representa other paid duties for this person or organ [If you checked "NO" to the question, <u>STOP</u> ; you fyou checked "YES," turn over to the next question.	nization?
3. Are you an elected official who is appe or for your municipality or other governm [If you checked "YES," to the question, STOP; you checked "NO," to the question, go on to the	nental body?
4. Has or will the person or organization on county lobbying activities during the cu (A reporting period is January to June or from Ju	urrent reporting period? 🗆 YES 🗆 NO
5. Do you anticipate making more than 2 supervisors other than at public hearings (Do not count contacts with the County Board su	The state of the s
more than 2 contacts at a later date, you must the	ve, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make nen contact the County Clerk's office to file a form indicating such activity. You to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the spends more than \$500 during the current financial disclosure statement with the could [If you checked "NO" please call the County Cle Building, Madison, for more information.]	t reporting period, you must file a
Date: 12   22   2016	Signature Jaclyn Jacy Print Name Jaclyn Tracy

Committee Name: ZUR	Name:	Ker	i Campb	e U	
DATE: 12/22/2015	Municip	ality: _Qa	ne Countag		
Petition/CUP #/Resolution/Ordinar	nce Amendment/Subj	ect: \OC	125		
■Wish to Speak in Support □ Registering in Support	☐ Wish to Speak in O☐ Registering in Opp		☐ Available	for Information	ı Only
1. On this occasion, are you officia [If you checked "NO," STOP; you need Name, address and telephone number	not complete the rest of t	this form. If yo	NO u checked "YES,"	go on to the nex	
Comments:					
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, So If you checked "YES," turn over to the part of the	r organization? TOP; you need not comp			YES	□ NO
3. Are you an elected official who or for your municipality or other g [If you checked "YES," to the question, you checked "NO," to the question, go o	overnmental body? STOP; you need not com			YES that you must sig	□ NO gn this form. Į
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reportin	ıg period?		YES	□ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County l	earings or meetings?		🗆	YES 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	must then contact the C	ounty Clerk's o	office to file a form	indicating such	
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co Building, Madison, for more information	current reporting per the county clerk? unty Clerk at 266-4121 c	riod, you mus	st file a	YES En 106A of the C	<b>□ NO</b> ity-County
Date: 12-22-2015		Signature  Print Name	Levi Car Kerri Car	impbell npbe Y	

Committee Name: Z	<u>IR</u> N	Name: KR15	HAMPTON	,
DATE: 12/22/15		Iunicipality: <u>Tok</u>		
Petition/CUP #/Resolution	/Ordinance Amendmen	nt/Subject: 201	5 OA-029	,
☐ Wish to Speak in Suppor☐ Registering in Support	t □ Wish to Spe □ Registering	eak in Opposition in Opposition	Available for	Information Only
1. On this occasion, are you checked "NO," STOP;  Name, address and telephone  TOWN OF Con-	you need not complete the	YES  rest of this form. If yo	NO ou checked "YES," go	
Comments:		20		
2. Are you being paid for other paid duties for this [If you checked "NO" to the q If you checked "YES," turn or	person or organization? uestion, <u>STOP</u> ; you need no	?	YES	S 🗆 NO
3. Are you an elected offi or for your municipality o [If you checked "YES," to the you checked "NO," to the que	r other governmental bequestion, <u>STOP;</u> you need t	ody? not complete the rest o	☑ Y	
4. Has or will the person on county lobbying activit (A reporting period is January	ies during the current r	reporting period?		ES 🗆 NO
5. Do you anticipate mak supervisors other than at p	oublic hearings or meet	ings?	<b>🗆</b> YE	
[If you checked "NO," to ques more than 2 contacts at a later must also sign this form. If yo	date, you must then contac	ct the County Clerk's o	office to file a form ind	dicating such activity. You
6. If "YES," do you unde spends more than \$500 du financial disclosure statem [If you checked "NO" please of Building, Madison, for more in	ring the current reporti ent with the county clear all the County Clerk at 266	ing period, you mus	st file a □ YI	
Date: /2/32/15		Signature	KRIS HAMPTO	Te S
		Print Name	KRIS HAMPTO	<i>N</i>

Committee Name:	Name:	April	Mickels	δη		
DATE: 12-22-15	Municipa	lity: HA	nón			
Petition/CUP #/Resolution/Ordina	nce Amendment/Subject	ct: <i>[C</i>	1889			
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppor	•	Available	for Informat	ion On	ly
1. On this occasion, are you official.  [If you checked "NO," STOP; you need.	□ YES I not complete the rest of the	is form. If you	) checked "YES,	" go on to the 1		estion.]
Name, address and telephone number pril Mickelson, 59	3 Cty, Rd, A, (	Compari	dge, W	5352	3	
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 comple		□	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 compl					NO is form. Ij
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June o	ng the current reporting			YES		NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	earings or meetings?		🗆	YES 1 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 Cou	ınty Clerk's offi	ice to file a form	n indicating su		
6. If "YES," do you understand t spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co Building, Madison, for more information	current reporting perion the county clerk?ounty Clerk at 266-4121 or	od, you must	file a □	YES m 106A of the		NO Jounty
Date: 19/22/15		Signature	Drill April 1	f Meels Lickels	(16 00)	m

Committee Name:	Name:	19al	4/14	1500	7
DATE: 12.22-15	Municipa	ality: To	wn of	L 01616	<u> </u>
Petition/CUP #/Resolution/Ordinanc	e Amendment/Subj	ect: 23	29	20050000 1140 0440	
	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available	for Informat	ion Only
1. On this occasion, are you officially  [If you checked "NO," STOP; you need no  Name, address and telephone number of	or complete the rest of the	√⊠ Ne his form. If you	O checked "YES,	" go on to the	
Comments:					z.
2. Are you being paid for your representation of the paid duties for this person or a [If you checked "NO" to the question, STO If you checked "YES," turn over to the new	organization? OP; you need not compl		□	YES	Ø NO
3. Are you an elected official who is or for your municipality or other gov [If you checked "YES," to the question, ST you checked "NO," to the question, go on	vernmental body? <u>COP</u> ; you need not comp		□		NO sign this form. I
4. Has or will the person or organize on county lobbying activities during (A reporting period is January to June or from the county to June or from the cou	the current reportin	g period?		YES	OF NO
5. Do you anticipate making more that supervisors other than at public hear (Do not count contacts with the County Bo	rings or meetings?		🗆	YES u reside.)	ON NO
[If you checked "NO," to questions 4 and more than 2 contacts at a later date, you must also sign this form. If you checked "."	ust then contact the Co	ounty Clerk's off	fice to file a fori	n indicating su	
6. If "YES," do you understand that spends more than \$500 during the cut financial disclosure statement with the [If you checked "NO" please call the Coun Building, Madison, for more information.]	urrent reporting perine county clerk?  hty Clerk at 266-4121 or	iod, you must	file a	YES om 106A of the	□ NO e City-County
Date: 12.22.15		Signature	Lary	Trall	FON

Committee Name: 2LR Name: COLETTE SPRANGER
DATE: 22 DEC 2015 Municipality: TOWN OF COTTAGE GROVE
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2015 0A - 029
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
<ul> <li>□ Wish to Speak in Support</li> <li>□ Wish to Speak in Opposition</li> <li>□ Registering in Support</li> <li>□ Registering in Opposition</li> <li>□ Available for Information Only</li> </ul>
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:
MDROFFERS Consulting LLC (COS) 395-4708  4324 Upland Drive Madison, W1 53705
4324 Upland Drive Madison W1 53705
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? □ 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: 22 Dec 2015  Signature Colle Spranger  Print Name Colle Spranger