

248

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Health & Human Needs Name: Harry Richardson

DATE: 10/20/15 Municipality: Madison

Petition/CUP #/Resolution/Ordinance Amendment/Subject: Homeless Day Shelter

<input checked="" type="checkbox"/> Wish to Speak in Support	<input type="checkbox"/> Wish to Speak in Opposition	<input type="checkbox"/> Available for Information Only
<input type="checkbox"/> Registering in Support	<input type="checkbox"/> 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:

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 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? 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? 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: _____ Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY COMMITTEE

248

Committee Name: Health & Human ~~Services~~ Needs Name: BARBARA SMITH

DATE: 10/20/2015 Municipality: MADISON

Petition/CUP #/Resolution/Ordinance Amendment/Subject: Homeless Day Shelter

<input checked="" type="checkbox"/> Wish to Speak in Support	<input type="checkbox"/> Wish to Speak in Opposition	<input type="checkbox"/> Available for Information Only
<input type="checkbox"/> Registering in Support	<input type="checkbox"/> 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:

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 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? 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? 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: _____ Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: HAA Name: Carl Landsness
DATE: 10/20 Municipality: Madison
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Res 248

Wish to Speak in Support (checked)
Wish to Speak in Opposition (checked)
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 (checked)
[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 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?
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?
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: Signature:
Print Name:

REGISTRATION BEFORE COUNTY COMMITTEE

248

Committee Name: _____ Name: Timothy Olsen
DATE: 10/20/15 Municipality: Madison
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Homeless Day Shelter

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:
Timothy Olsen, 1331 E. Johnson St., Madison, WI 53703
608-255-9358

Comments: By clustering shelters and related social services in one very small part of Dane County on Madison's near East Side, we would be creating even greater disparities and unequal burdens.
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 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?..... 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?..... 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: 10/20/2015 Signature: 
Print Name: Timothy Olsen

REGISTRATION BEFORE COUNTY COMMITTEE

248

Committee Name: _____ Name: Rigina MacNaughton
DATE: 10/20/2015 Municipality: _____
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Day Shelter on East Wash Messner Building

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:
Pasqual's Cantina 1344 East Washington Ave
Madison WI 53703 608 819 8263

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 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?..... 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?..... 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: 10/20/2015 Signature: 
Print Name: Rigina MacNaughton

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: MHN Name: MICHAEL RYAN JOY
DATE: 10/20/15 Municipality: MADISON
Petition/CUP #/Resolution/Ordinance Amendment/Subject: RES. 248

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:
TENNEY NURSERY AND PARENT CENTER
1321 E. MIFFLIN

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 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?..... 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?..... 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: _____ Signature: [Signature]
Print Name: _____

REGISTRATION BEFORE COUNTY COMMITTEE

23/ Budget operating

Committee Name: HHW Name: Esther Olson
DATE: 10/20/15 Municipality: Montrose Township
Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHW 2 + 3

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? 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 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?..... 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?..... 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: 10/20/15

Signature [Handwritten Signature]

Print Name Esther Olson

REGISTRATION BEFORE COUNTY COMMITTEE

25th Budget Operating

Committee Name: HHN Name: Scott Strong
DATE: 10/20/15 Municipality: Madison
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 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:
Purchased Service Coalitions & Community Partnerships

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 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?..... 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.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?..... 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: 10/20/15 Signature: [Signature]
Print Name: Scott S. Strong

REGISTRATION BEFORE COUNTY COMMITTEE

Budget

Committee Name: Heathd Human Needs Name: Melissa Jensen

DATE: 10/20/15 Municipality: _____

Petition/CUP #/Resolution/Ordinance Amendment/Subject: _____

Res 254 Additional Funding
County Exec only gave flexibility

<input checked="" type="checkbox"/> Wish to Speak in Support	<input type="checkbox"/> Wish to Speak in Opposition	<u>\$168,405</u> ← <u>April-Oct - staffing</u>	<u>Women's shelter staffing</u>
<input type="checkbox"/> Registering in Support	<input type="checkbox"/> Registering in Opposition	<input type="checkbox"/> Available for Information Only	<u>\$50,633</u> ←

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:
The Salvation Army ~~110~~ 630 E Washington Ave Madison 83703

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 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?..... 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.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?..... 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: 10/20/15

Signature Melissa S

Print Name Melissa Soransen

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Health + Human Needs Name: VERN LEIBBRANDT

DATE: October 20, 2015 Municipality: Madison

Petition/CUP #/Resolution/Ordinance (Amendment) Subject: HHN04

Wish to Speak in Support, Registering 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 NO

Name, address and telephone number of each person or organization you are representing: Bethel Lutheran Church 312 Wisconsin Ave (608) 257-3577

Comments: \$20K/mo -> want another \$100K total

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES NO

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

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

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? YES NO

[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.]

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

Date: October 20, 2015

Signature: Vernon D. Leibbrandt

Print Name: VERNON D. LEIBBRANDT

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: HHN Name: Carl Landsness

DATE: 10/20 Municipality: Madison

Petition/CUP #/Resolution/Ordinance Amendment/Subject: 244 amendments

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? 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 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? 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? 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: 10/20/15

Signature: [Handwritten Signature]

Print Name: Carl Landsness

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: HW HW Name: CONNOR WILCO

DATE: 10/20/15 Municipality: _____

Petition/CUP #/Resolution/Ordinance Amendment/Subject: BUDGET / DAY RESOURCE CENTER

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:
BETHEL HOMELESS SUPPORT SERVICES

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 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? 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.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? 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: 10/20/15

Signature: [Signature]
Print Name: CONNOR R. WILCO

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: HHN Name: BRIAN STANDING
DATE: 10/20/2015 Municipality: CITY OF MADISON
Petition/CUP #/Resolution/Ordinance Amendment/Subject: RES 254 HHN OF

Wish to Speak in Support (checked), 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 (checked) 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: DANE CO. PROFESSIONAL EMPLOYEES EGR 1871

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES NO (checked)
[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 NO (checked)
[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 (checked)
(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 (checked)
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? 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: 10/20/2015 Signature: [Signature] Print Name: BRIAN STANDING

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: HHN Name: BRIAN STANDING
DATE: 10/20/2015 Municipality: CITY OF MADISON
Petition/CUP #/Resolution/Ordinance Amendment/Subject: RES 254 - HHN 05

Wish to Speak in Support (checked)
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?
[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:
DANE COUNTY PROFESSIONALS ASS'N EGR 1871
116 - CITY COUNTY BLDG 267-4115

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
[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?
(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?
[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: 10/20/2015

Signature: [Handwritten Signature]
Print Name: BRIAN STANDING

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: HHN Name: Leland Pan

DATE: 10/20/15 Municipality: Madison

Petition/CUP #/Resolution/Ordinance Amendment/Subject: Budget Amendment HHN005

<input checked="" type="checkbox"/> Wish to Speak in Support	<input type="checkbox"/> Wish to Speak in Opposition	
<input checked="" type="checkbox"/> Registering in Support	<input type="checkbox"/> Registering in Opposition	<input type="checkbox"/> 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? 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 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?..... 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?..... 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: _____ Signature _____
Print Name _____

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Health & Human Needs Name: Arlen Christensen

DATE: 10/20/15 Municipality: Tn of Madison

Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHN04

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? 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 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?..... 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?..... 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: 10/20/15

Signature: 

Print Name: Arlen Christensen

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Health & Human Needs Name: Skyler Van De Weerd
DATE: 10/20/2015 Municipality: DI
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Budget - Bethel HHN04

Wish to Speak in Support, Registering 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 NO

Name, address and telephone number of each person or organization you are representing: Bethel Homeless Support Services, 312 Wisconsin Ave Madison, WI 53703 (608)421-3127

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES NO

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

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

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? YES NO

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.

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

Date: 10/20/2015 Signature: Skyler Van De Weerd Print Name: Skyler Van De Weerd