

# REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: County Zoning Your Name: Pete Sachs

DATE of Meeting: 2-11-20 Municipality You Reside in: Town of Burke

Petition/CUP #/Resolution/Ordinance Amendment/Subject: \_\_\_\_\_

Wish to Speak in Support

Wish to Speak in Opposition

Wish to Register in Support

Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)

5. Do you anticipate making more than two contacts with the 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 do not need to 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)

6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.)

Date: 2-11-20 Signature: Pete Sachs

Printed Name: Pete Sachs

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: ZLR Your Name: KRIS HAMPTON

DATE of Meeting: 2/11/2020 Municipality You Reside in: TOWN OF COTTAGE GROVE

Petition/CUP #/Resolution/Ordinance Amendment/Subject: 11512

- Wish to Speak in Support
- Wish to Speak in Opposition
- Wish to Register in Support
- Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go to the next question.)

Name, address and telephone number of each person or organization you are representing:

TOWN OF COTTAGE GROVE

**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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)

5. Do you anticipate making more than two contacts with the 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 do not need to 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)

6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.)

Date: 2/11/2020 Signature: Kris Hampton

Printed Name: KRIS HAMPTON

# REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: ZLR Your Name: RON KLAAS

DATE of Meeting: 2-11-20 Municipality You Reside in: TOWN OF OREGON

Petition/CUP #/Resolution/Ordinance Amendment/Subject: LD-048, LD-047

- Wish to Speak in Support
- Wish to Register in Support
- Available for Information Only
- Wish to Speak in Opposition
- Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go to the next question.)

Name, address and telephone number of each person or organization you are representing:

HARVEY TEMKIN  
TOWN OF VERONA

### 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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)

5. Do you anticipate making more than two contacts with the 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 you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.)

Date: 2-11-20 Signature: [Signature]

Printed Name: RONALD R KLAAS

**REGISTRATION BEFORE COUNTY COMMITTEE**

Committee Name: ZLR Your Name: Tom Mathies

DATE of Meeting: Feb 11, 2020 Municipality You Reside in: Town of Verona

Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2019 LD-048

- Wish to Speak in Support
- Wish to Register in Support
- Available for Information Only
- Wish to Speak in Opposition
- Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go to the next question.)

Name, address and telephone number of each person or organization you are representing:

Town of Verona Supervisor + Plan Commissioner

**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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go to the next question.)

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6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_