

First Name	Last Name	City	How do you plan on attending the meeting?	Do you wish to provide public comment or register in support/opposition of an agenda item? a. Yes, Continue to the Next Question	Agenda Item Number(s) (Note: If you wish to register/speak on multiple items, enter ALL here)	Do you support or oppose the agenda item?	Do you want to speak?	If you register to speak on an item, staff will look for your name and phone number in the attendee list on Zoom, if you are not listed, would you like to be called?	On this occasion, are you officially representing an organization or a person other than yourself?
Esther	Olson	Belleville	a. Zoom	a. Yes, Continue to the Next Question	2020Act135	a. Support	a. Yes, I want to speak	a. Yes	b. No a. Yes – you will need to fill out an additional form. Staff will email you the form.
Julie	Schwab	Middleton	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	a. Yes, I want to speak	a. Yes	
Garret	Zastoupil	Madison, WI	b. Phone	a. Yes, Continue to the Next Question	Restoring Roots, BHRC, BH Triage & Restoration Center	a. Support	b. No, I do not wish to speak	b. No	b. No

Alysha	Clark	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots, BHRC, BH Triage & Restoration Center Proposal for \$500,000 in the budget for Restoring Roots.	c. Neither Support or Oppose	a. Yes, I want to speak	a. Yes	a. Yes – you will need to fill out an additional form. Staff will email you the form.
Molly	Clark-Barol	Madison	a. Zoom	a. Yes, Continue to the Next Question		a. Support	b. No, I do not wish to speak	b. No	b. No
Carrie	Sanders	Middleton	a. Zoom	a. Yes, Continue to the Next Question		a. Support	a. Yes, I want to speak	a. Yes	b. No a. Yes – you will need to fill out an additional form. Staff will email you the form.
Evelyn	Mikul	Madison	a. Zoom, b. Phone	a. Yes, Continue to the Next Question		c. Neither Support or Oppose	c. I do not want to speak, but I am available to answer questions	a. Yes	b. No, I do not wish to speak
Katherine	Kamp	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	a. Yes, I want to speak	a. Yes	b. No
Ritu	Bhatnagar	Madison	b. Phone	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	a. Yes, I want to speak	a. Yes	b. No

Adam	Briska	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots, BHRC, BH Triage & Restoration Center	a. Support	b. No, I do not wish to speak	b. No	b. No
Peggy	Spiewak	Middleton	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	a. Yes, I want to speak	a. Yes	b. No
Michael	Spiewak	Middleton	a. Zoom	a. Yes, Continue to the Next Question b. No, STOP and SUBMIT Registrati	Zoom	a. Support	a. Yes, I want to speak	a. Yes	b. No
Abe	Saloma	Monona	a. Zoom	a. Yes, Continue to the Next Question	on form	b. Oppose			
Mary	Flynn	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots Budget Inclusion J. Public Comment	a. Support	b. No, I do not wish to speak	b. No	b. No
Tara	Wilhelmi	Madison	a. Zoom	a. Yes, Continue to the Next Question b. No, STOP and SUBMIT Registrati	on Items not on the Agenda	c. Neither Support or Oppose	a. Yes, I want to speak	a. Yes	b. No
Nicole	Degner	Windsor	a. Zoom	a. Yes, Continue to the Next Question	on form				
Kathleen	Culver	Fitchburg	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	b. No, I do not wish to speak	b. No	b. No

Cindy	Tubbs	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	a. Yes, I want to speak	a. Yes	b. No
Susan	Herbst	DeForest	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	a. Yes, I want to speak	a. Yes	b. No
SUNNY	KURHAJET Z	MADISON	a. Zoom	a. Yes, Continue to the Next Question	J	c. Neither Support or Oppose	a. Yes, I want to speak	a. Yes	b. No
Marie	Crim	Deforest	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	b. No, I do not wish to speak	b. No	b. No
Karen	Virnoche	Madison	a. Zoom	a. Yes, Continue to the Next Question		a. Support	b. No, I do not wish to speak	b. No	b. No
Greg	Smith	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots, Restoring Roots, \$500,000 budget	a. Support	b. No, I do not wish to speak	b. No	b. No
Tami	Bahr	Verona	b. Phone	a. Yes, Continue to the Next Question	item J-Public comment on item not on agenda	a. Support	b. No, I do not wish to speak	b. No	b. No
Ryan	Wherley	Madison	a. Zoom	a. Yes, Continue to the Next Question	agenda	c. Neither Support or Oppose	a. Yes, I want to speak	a. Yes	b. No

Ed	Sheskey	Madison	a. Zoom	b. No, STOP and SUBMIT Registrati on form a. Yes, Continue to the Next Question J			a. Yes, I want to speak	a. Yes	b. No
Matthew	Moberg	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots		b. No, I do not wish to speak	b. No	b. No
Pamela	Noyd	Madison	a. Zoom	a. Yes, Continue to the Next Question	J. Public Comment on Items not on the Agenda	a. Support or Oppose	a. Yes, I want to speak	b. No	b. No
Derek	Wallace	Madison	a. Zoom	a. Yes, Continue to the Next Question	Restoring Roots		b. No, I do not wish to speak	a. Yes	b. No
Karen	Radcliffe	Monona	b. Phone	a. Yes, Continue to the Next Question	Restoring Roots	a. Support	a. Yes, I want to speak	b. No	b. No
Evelyn	Storto	Middleto n	b. Phone	b. No, STOP and SUBMIT Registrati on form			b. No, I do not wish to speak	b. No	b. No
Cathy	Bownik	Madison	a. Zoom	b. No, STOP and SUBMIT Registrati on form					
Stephanie	Kuo	Madison	a. Zoom	b. No, STOP and SUBMIT Registrati on form			b. No, I do not wish to speak		b. No
Joan	Byrne	Madison	a. Zoom	b. No, STOP and SUBMIT Registrati on form					b. No

Kristine	Hruby	Waunakee	b. Phone	b. No, STOP and SUBMIT Registrati on form		a. Support to speak	b. No, I do not wish to speak	b. No	b. No
Rachel	EG 720	Oregon	a. Zoom	b. No, STOP and SUBMIT Registrati on form					
EGA		McFarland	b. Phone	b. No, STOP and SUBMIT Registrati on form					
Sharron	Hubbard-Moyer	Madison	a. Zoom	b. No, STOP and SUBMIT Registrati on form					
Jamie	O'Dea	Madison	b. Phone	b. No, STOP and SUBMIT Registrati on form					
Analiiese	Eicher	sp	a. Zoom	a. Yes, Continue to the Next Question					
Chelsey	Tubbs	Madison	a. Zoom	b. No, STOP and SUBMIT Registrati on form	Restoring Roots	a. Support to speak	a. Yes, I want to speak	a. Yes	b. No
K	F	M	a. Zoom	b. No, STOP and SUBMIT Registrati on form					
Dani	Rischall	Madison	a. Zoom	b. No, STOP and SUBMIT Registrati on form					

				b. No, STOP and SUBMIT Registrati	c. Neither Support	b. No, I do or not wish		
Heidi	Van Landingha m	Madison	a. Zoom	on form	Oppose	to speak	b. No	b. No
				b. No, STOP and SUBMIT Registrati	c. Neither Support	b. No, I do or not wish		
Jeff	Einerson	Erie	a. Zoom	on form	Oppose	to speak	b. No	b. No

# REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Health & Human Needs Your Name: Alysha Clark

DATE of Meeting: 10/8/20 Municipality You Reside in: Madison

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

- Wish to Speak in Support
- Wish to Register in Support
- Wish to Speak in Opposition
- 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:

Chrysalis, 1342 Dewey Court Madison WI 53103

**COMMENTS:** Salary worker, part of my role

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 "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.)

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: 10/8/20 Signature: Alysha Clark

Printed Name: Alysha Clark



# REGISTRATION BEFORE COUNTY COMMITTEE

**Committee Name:** Health and Human Services **Your Name:** Julie Schwab

**DATE of Meeting:** 10/8/2020\_\_\_\_\_ **Municipality You Reside in:** Middleton, WI 5356

**Petition/CUP #/Resolution/Ordinance Amendment/Subject:** Allocation in Budget for Restoring Roots

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:

Restoring Roots

PO Box 620233, Middleton, WI 53562 (608)-630-6750

## **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 "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.)*

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*(A reporting period is January to June, or July to December.)*

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*(Do not count contacts with the County Board supervisor who represents the district in which you reside.)*

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*(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:** \_\_\_\_\_