Committee Name: 747	Name:	CHARLES.	Sought	
DATE: 7-23-19	Municipality:	TOWN OF	- MADIOS	
Petition/CUP #/Resolution/Ordina	ance Amendment/Subject:_	11432		· · · · · · · · · · · · · · · · · · ·
Wish to Speak in Support Registering in Support	☐ Wish to Speak in Oppos ☐ Registering in Oppositio		ilable for Informa	ation Only
1. On this occasion, are you officially ou checked "NO," STOP; you need Name, address and telephone numb	d not complete the rest of this for	NO rm. If you checked '	'YES," go on to the	
Comments:	8			
2. Are you being paid for your re other paid duties for this person [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization?		.□ 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	<b>governmental body?</b> , <u>STOP</u> ; you need not complete i			□ NO st 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 reporting per		□ YES	□ NO
5. Do you anticipate making more supervisors other than at public h	nearings or meetings?		☐ YES ch you 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 checke	ou must then contact the County	Clerk's office to file	a form indicating	
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 period, yeh the county clerk? County Clerk at 266-4121 or go to on.]	o the Clerk's office a	□ YES	NO he City-County
Date: 7-23-19		nature Name	US SIA	Kalen

	<b>REGISTRATION </b>			
Committee Name:	ZLR	Your Name	Dum	se Steinhouer
DATE of Meeting:	7-23-19 Mur	icipality You Res	ide in:	MADISON
Petition/CUP #/Resolut	tion/Ordinance Amendm		1143.	
Wish to Spea	k in Support		☐ Wish to	Speak in Opposition
Wish to Regis	ster in Support		☐ Wish to	Register in Opposition
	☐ Ava	ilable for Informati	on Only	
☐ YES	ł no			erson other than yourself?  you checked "YES" go to the next
Name, address and tele	phone number of each pe	rson or organizatio	n you are re	presenting:
		u u		
COMMENTS:				
person or organization	? ☐ YES	О		our other paid duties for this st of this form. If you checked "YES",
other governmental bo	dy?  YES Not the question, STOP; you	Ю		ice or for your municipality or est of this form. If you checked "YES",
4. Has or will the pers	on or organization you r	epresent spend r	nore than \$	500 on county lobbying activities
	orting period?	NO No ecember.)		
5. Do you anticipate m	naking more than two co	ntacts with the C	ounty Boar	d supervisors other than at public
hearings or meetings? (Do not count contacts w	YES NO with the County Board supe	ervisor who repres	ents the dist	rict in which you reside.)
if you do make more that	n 2 contacts at a later date	e, you must then co	ontact the Co	nplete the rest of this form. <u>However,</u> ounty Clerk's office to file a form to the question below. You must also
6. If you answered "YEspends more than \$500	S" to question 5, do you during the current repo	understand that orting period, you	if the perso must file a	n or organization you represent financial disclosure statement
with the County Clerk? (If you checked "NO" ple Blvd., Room 106A for mo	ase call the County Clerk		to the Clerk	's office at 210 Martin Luther King Jr.,
Date:	Signature:	- MM		
	Drintad Names			

Committee Name: ZLR Name: anglitelland
DATE: 7-23-19 Municipality: Town on Burke
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 11433
Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
L. 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?
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 nore than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You nust also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
5. 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: 7-23-19  Signature Ingel It felland  Print Name Avore I M Helland

Committee	Name:_	ZLR	N	Name:	ete	Sect	5			
DATE:			N	Iunicipality:	Tow	in Ship	of	Burke		
Petition/Cl	UP #/Rese		ance Amendmer			-73.				
Wish to Register			☐ Wish to Spe			□ Av	/ailable	e for Info	rmation On	ly
[If you check	ked "NO,"	STOP; you nee	ially representing a not complete the person	YES rest of this form	n. If you	N <b>O</b> u checked	l "YES,	" go on to		estion.]
Comments	:									
other paid [If you check	duties for ked "NO"	or this person to the question,	epresentation or or organization? STOP; you need no entry of enext question.]	?			□	YES	D	NO
<b>or for your</b> [If you check	municip ked "YES,	ality or other " to the question	o is appearing so governmental b , <u>STOP</u> ; you need to on to the next que	ody? not complete th			□		must sign th	NO is form.
on county l	lobbying	activities dur	nization you rep ing the current r or from July to Dec	eporting peri				YES		NO
supervisors	s other th	an at public l	re than 2 contact nearings or meet y Board supervisor	ings?				YES u reside.)	Q	NO
more than 2	contacts a	t a later date, ye	and 5 above, <u>STOP</u> ou must then contac ed "YES" to either	ct the County C	lerk's o	ffice to fil	le a for	m indicatii		
spends mor financial d [If you check	re than \$ isclosure ked "NO"	500 during th statement wit	that if the person e current reports th the county clear County Clerk at 266 on.]	ing period, york?	u mus	t file a	. 🗆	<b>YES</b> om 106A o		<b>NO</b> County
Date:	-23-19			Signa	ture	Pet	1 8	achs		
				Print N	ame	ICK	29	01-		

REGISTRATION BEFORE COUNTY COMMITTEE
DATE of Meeting: 7-23-19 Municipality You Reside in: Swke
DATE of Meeting: 7-23-19 Municipality You Reside in: Burke
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
☐ Wish to Speak in Support
☐ 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?  \[ \subseteq \text{YES}  \text{NO} \text{NO} \]  (If you checked "NO" \( \frac{\text{STOP}}{\text{COMP}} \); 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  (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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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: 7-23-19 Signature:
Printed Name: Paul Biersach

	REGISTRATI	ION BEFORE COUNTY COMMITTEE
Committee Name:	THE	Your Name: Jim Biers Ach
DATE of Meeting:	7/23/19	Municipality You Reside in: Burke
Petition/CUP #/Reso	lution/Ordinance Am	nendment/Subject: 1433
☐ Wish to Sp	eak in Support	☐ Wish to Speak in Opposition
☐ Wish to Re	gister in Support	☐ Wish to Register in Opposition
		Available for Information Only
☐ YES	⊠ NO	epresenting an organization or a person other than yourself?  ed to complete the rest of the form. If you checked "YES" go to the next
Name, address and te	elephone number of ea	ach person or organization you are representing:
G STA STAR TO	150 SE	ntation or appearing incidental to your other paid duties for this
person or organizati (If you checked "NO" go to the next question	to the question, <b>STOF</b>	NO 2; you do not need to complete the rest of this form. If you checked "YES",
3. Are you an electe	ed official who is app	pearing solely on behalf of your office or for your municipality or
other governmental (If you checked "YES" go to the next questio	to the question, STO	NO  P; you do not need to complete the rest of this form. If you checked "YES",
4. Has or will the pe	erson or organizatior	n you represent spend more than \$500 on county lobbying activities
during the current re (A reporting period is		
5. Do you anticipate	e making more than	two contacts with the County Board supervisors other than at public
hearings or meeting (Do not count contact		NO rd supervisor who represents the district in which you reside.)
if you do make more t	han 2 contacts at a la	above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However,</u> ter date, you must then contact the County Clerk's office to file a form S" to either question, please continue to the question below. You must also
		do you understand that if the person or organization you represent nt reporting period, you must file a financial disclosure statement
with the County Cler (If you checked "NO", Blvd., Room 106A for Date: 7/23/15	please call the County more information.	NO Vicient Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,  ature:
	Printed N	Name: Tomas Bransach

STRATION BEFORE COUNTY COMMITTEE Burke 11433 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: Comments: 2. Are you being paid for your representation or appearing incidental to your 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 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?...... [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.] Signature

	REGISTRA	TION BEFORE COUN	TY COMMITTEE )
Committee Name:	ZIR	Your Name:	Margin Burroach
DATE of Meeting:	1/23/19	Municipality You Resid	e/n: Town of Burke
Petition/CUP #/Res	olution/Ordinance	Amendment/Subject:	<b>3</b>
☐ Wish to S	Speak in Support	12	Wish to Speak in Opposition
☐ Wish to F	Register in Support	т -	Wish to Register in Opposition
		Available for Information	Only
☐ YES (If you checked "NO question.)	NO "STOP; you do not n	need to complete the rest of th	on or a person other than yourself?  The form. If you checked "YES" go to the next
Name, address and	telephone number of	feach person or organization	you are representing:
			W 100 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
COMMENTS.			
COMMENTS:			ental to your other paid duties for this
person or organiza	ation? ☐ YES " to the question, <u>ST</u>	NO	ete the rest of this form. If you checked "YES",
3. Are you an elec	ted official who is a	appearing solely on behalf o	f your office or for your municipality or
other governmenta (If you checked "YE go to the next quest	S" to the question, S	NO TOP; you do not need to comp	plete the rest of this form. If you checked "YES",
4. Has or will the	person or organizat	ion you represent spend mo	ore than \$500 on county lobbying activities
10-50	reporting period?[ s January to June, or		
5. Do you anticipa	ate making more tha	in two contacts with the Cou	unty Board supervisors other than at public
hearings or meetin (Do not count contact	···	NO loard supervisor who represer	nts the district in which you reside.)
if you do make more	e than 2 contacts at a	later date, you must then con	eed to complete the rest of this form. <u>However,</u> stact the County Clerk's office to file a form se continue to the question below. You must also
			the person or organization you represent nust file a financial disclosure statement
with the County Cle (If you checked "NO Blvd., Room 106A for Date: 7 23	" please call the Cou pr more information.	no nty Clerk at 266-4121 or go to gnature:	the Clerk's office at 210 Martin Luther King Jr.,
1 /	' Printe	d Name: /	UR COME DE VELLEN

REGISTRATION BEFORE COUNTY COMMITTEE **Committee Name:** DATE: Municipality: Petition/CUP #/Resolution/Ordinance Amendment/Subject: Wish to Speak in Opposition ☐ Wish to Speak in Support Registering in Opposition ☐ Registering in Support ☐ 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 [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 (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.]

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Municipality: Town Petition/CUP #/Resolution/Ordinance Amendment/Subject: Wish to Speak in Opposition ☐ 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? DK 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 KI [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 (A reporting period is January to June or from July to December.) 5. Do you anticipate making more than 2 contacts with County Board M NO 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.] Signature

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: ROW UND ZUR Your Name: CHRE MILLIA
DATE of Meeting: 7-21-19 Municipality You Reside in: CHRISTIMAN
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?  \[ \textstyle \text{YES} \text{NO} \text{NO} \text{NO} \]  (If you checked "NO" \( \text{STOP} \); 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, <u>STOP</u> ; 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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: 7-21,-C15 Signature:
Printed Name: CHOUS MUCA

REGISTRATION BEFORE COUNTY COMMIT Zoning + Land leg Committee Name: V Municipality You Reside in: DATE of Meeting: 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 (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 □ NO person or organization? 

YES (If you checked "NO" to the guestion, 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 □ NO other governmental body? 

YES (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 П ио (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.,

Printed Name:

Blvd.. Room 106A for more information.

Date:

Committee Name: Zoning + Land Your Name: Epic Gu	Leven
DATE of Meeting: 7/23/19 Municipality You Reside in: OREG	ion
Petition/CUP #/Resolution/Ordinance Amendment/Subject:/1436	
	ak in Opposition
☐ Wish to Register in Support ☐ Wish to Reg	ister in Opposition
Available for Information Only	
1. On this occasion, are you officially representing an organization or a person    YES  NO  (If you checked "NO" STOP; you do not need to complete the rest of the form. If you of question.)  Name, address and telephone number of each person or organization you are represented.	checked "YES" go to the next
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, <u>STOP</u> ; you do not need to complete the rest of go to the next question.)	this form. If you checked "YES",
3. Are you an elected official who is appearing solely on behalf of your office of other governmental body?   YES NO  (If you checked "YES" to the question, STOP; you do not need to complete the rest of 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 su	pervisors other than at public
hearings or meetings?   YES   NO  (Do not count contacts with the County Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the district in the county Board supervisor who represents the county Board supervisor who rep	in which you reside.)
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do not need to complet if you do make more than 2 contacts at a later date, you must then contact the Count indicating such activity. If you checked "YES" to either question, please continue to the sign this form.)	y Clerk's office to file a form
6. If you answered "YES" to question 5, do you understand that if the person or spends more than \$500 during the current reporting period, you must file a final	
with the County Clerk??   YES  NO  (If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's of Blvd., Room 106A for more information.	fice at 210 Martin Luther King Jr.,
Date: 7/23/19 Signature: Enc Groven	
Printed Name: ERIC GROVEN	

Committee Name: Zengt Land Per Your Name: Ellic Graver
DATE of Meeting: 7/23/19 Municipality You Reside in: OREGON
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
Wish to Speak in Support
☐ 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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: 7/23/19 Signature: 2 0 5
Printed Name: ERIC GROVER

Committee Name:	2LR	Your Name: _	- lonn	0/500	
DATE of Meeting:	7-23-19 Munic	ipality You Resid	e in: Tawn	JOF,	9/3:-
Petition/CUP #/Resolu	ution/Ordinance Amendmen	nt/Subject:	11438		
☐ Wish to Spe	ak in Support		Wish to Speak	in Oppositi	on
☐ Wish to Reg	ister in Support		Wish to Regist	ter in Oppos	sition
	☐ Availa	ble for Information	Only		
☐ YES ☐ (If you checked "NO" <u>S</u> question.)	are you officially representi NO TOP; you do not need to com	plete the rest of th	e form. If you ch	ecked "YES	<del>-</del>
Name, address and tele	ephone number of each perso	on or organization y	you are represer	nting:	
COMMENTS:	ži				
2. Are you being paid	d for your representation o	r appearing incide	ental to your ot	her paid du	ıties for this
person or organizatio (If you checked "NO" to go to the next question.	the question, <b>STOP</b> ; you do l	not need to comple	ete the rest of th	is form. If yo	ou checked "YES",
3. Are you an elected	d official who is appearing s	olely on behalf of	f your office or	for your m	unicipality or
other governmental b (If you checked "YES" t go to the next question.	to the question, STOP; you do		lete the rest of t	his form. If y	ou checked "YES",
4. Has or will the per	son or organization you rep	resent spend mo	re than \$500 or	າ county lo	bbying activities
	oorting period? ☐ YES anuary to June, or July to Dec				
5. Do you anticipate	making more than two conta	acts with the Cou	nty Board supe	ervisors otl	her than at public
hearings or meetings' (Do not count contacts	<b>?</b> ☐ <b>YES</b> ☐ <b>NO</b> with the County Board superv	risor who represen	ts the district in v	which you re	eside.)
if you do make more tha	o questions 4 and 5 above, <u>ST</u> an 2 contacts at a later date, y If you checked "YES" to eithe	ou must then cont	act the County (	Clerk's office	e to file a form
	ES" to question 5, do you ur 00 during the current reporti				
Blvd., Room 106A for m	lease call the County Clerk at nore information.			e at 210 Ma	rtin Luther King Jr.,
Date: フ-ユフ~ / )	Signature:	1000	A Cle		
	Printed Name:	1000	A. Olson	/	

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: 212 Your Name: Gary Awipper Lith
DATE of Meeting: 7-23-2019 Municipality You Reside in: Roxbory
Petition/CUP #/Resolution/Ordinance Amendment/Subject:// 4/39
Wish to Speak in Support
☐ 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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: Signature:
Printed Name:

Committee Name: 202 Your Name: Sria 1900				
DATE of Meeting: 7-23-/9 Municipality You Reside in: Varence				
Petition/CUP #/Resolution/Ordinance Amendment/Subject://990				
☐ 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However,</u> 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: 7-23-19 Signature:				
Printed Name:				

Committee Name: Zaning or LAND Your Name: Elic Groven			
DATE of Meeting: 7/23/19 Municipality You Reside in: OKEGON			
Petition/CUP #/Resolution/Ordinance Amendment/Subject: //44/			
☐ 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?  \[ \sum \text{YES} \] \[ \sum \text{NO} \]  (If you checked "NO" \( \frac{\text{STOP}}{\text{COP}} \); 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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??			
Date: 7/23/19 Signature: 6 99			
Printed Name: ERIC GROVEST			

Committee Name: Zoning & Land Your Name: Shannan Shade			
DATE of Meeting: 723 9 Municipality You Reside in: Marshall			
Petition/CUP #/Resolution/Ordinance Amendment/Subject:			
Wish to Speak in Support			
☐ 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, <u>STOP</u> ; 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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: 7/23/17 Signature: Shannan Shade			
Printed Name: Shannan Shade			

Committee Na	ame: ZLR	Name:	Ed	Short		
DATE:	7/23/19	Munici	pality: <u>Sp</u>	rigdale		
Petition/CUP	#/Resolution/Ordi	inance Amendment/Sub	ject: // 445	3 "		
Wish to Spe		☐ Wish to Speak in On	* *	□ Aveilable	for Informati	on Only
☐ Registering	iii Support	☐ Registering in Opp	DOSILIOII	Li Avanable	for Information	311 Only
[If you checked	"NO," <u>STOP</u> ; you n	icially representing an o	this form. If you	O checked "YES,'	go on to the n	
					*	
<b>Comments:</b>						
other paid du [If you checked	ities for this perso	representation or appean or organization?n, STOP; you need not compathe next question.]		□	YES	□ NO
or for your m [If you checked	unicipality or othe "YES," to the questi	who is appearing solely over governmental body? on, <u>STOP</u> ; you need not congo on to the next question.]				□ NO sign this form. If
on county lob	bying activities du	ganization you represent Fring the current reporting or from July to December	ng period?		YES	□ NO
supervisors of	ther than at public	nore than 2 contacts with the hearings or meetings? Inty Board supervisor who re	••••	🗆	YES reside.)	□ NO
more than 2 cor	ıtacts at a later date,	4 and 5 above, <u>STOP;</u> you n you must then contact the C ked "YES" to either questic	County Clerk's off	fice to file a form	n indicating suc	
spends more to financial discl [If you checked	than \$500 during t losure statement w	d that if the person or or the current reporting per with the county clerk? ac County Clerk at 266-4121 action.]	riod, you must	file a □	YES m 106A of the	□ NO City-County
Date:	7/23/19		Signature	El Xi		
			Print Name	tel su	M	

Committee Name:	ZLR	Your Name: _	Nicole Sch	Worm
DATE of Meeting:	7/24/19 M	unicipality You Reside	in: Dane	Town of Verman
	tion/Ordinance Amend	ment/Subject:2	473	×
Wish to Spea	ak in Support		Wish to Speak in (	Opposition
☐ Wish to Regi	ster in Support		Wish to Register in	n Opposition
	A	vailable for Information	Only	
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES DO HOTOLOGY (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:				
1 1110	Properties.			
COMMENTS:				
	I for your representation	27(05E)	ntal to your other	paid duties for this
person or organization? YES NO  (If you checked "NO" to the question, <u>STOP</u> ; 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 appeari	ng 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 pers	son or organization you	ı represent spend moı	re than \$500 on co	ounty lobbying activities
during the current reporting period?   YES  NO  (A reporting period is January to June, or July to December.)				
5. Do you anticipate	naking more than two	contacts with the Cou	nty Board supervi	sors other than at public
hearings or meetings? (Do not count contacts)	YES X NO with the County Board so		s the district in whic	ch you reside.)
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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.)				
	ES" to question 5, do you			nization you represent disclosure statement
with the County Clerk' (If you checked "NO" pla Blvd., Room 106A for m	pase call the County Cle	NO rk at 266-4121 or go to	the Clerk's office at	t 210 Martin Luther King Jr.,
Date: 7 24 2010	Printed Name	e: Mio 6 St	(lun)	
	Printed Nam	e: Nicole	S. Schram	1

Committee Name: _	ZLR	Your Name: NOERKE			
DATE of Meeting: _	7-23-19	Municipality You Reside in: DEERFIELD			
Petition/CUP #/Reso	olution/Ordinance	Amendment/Subject://42.7			
Wish to S	peak in Support	☐ Wish to Speak in Opposition			
☐ Wish to R	egister in Support	☐ Wish to Register in Opposition			
		Available for Information Only			
1. On this occasio	n, are you officially	representing an organization or a person other than yourself?			
☐ <b>YES</b> (If you checked "NO' question.)	NO STOP; you do not r	need to complete the rest of the form. If you checked "YES" go to the next			
Name, address and t	telephone number of	f each person or organization you are representing:			
		8			
COMMENTS:					
2. Are you being p	aid for your repres	sentation or appearing incidental to your other paid duties for this			
person or organizate (If you checked "NO" go to the next question	to the question, <u>ST</u>	□ NO OP; you do not need to complete the rest of this form. If you checked "YES",			
3. Are you an elec	ted official who is a	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 p	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 anticipa	te making more tha	an two contacts with the County Board supervisors other than at public			
hearings or meeting (Do not count contact		NO Board supervisor who represents the district in which you reside.)			
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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.)					
		5, do you understand that if the person or organization you represent rrent 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: 7-23-/	'9 Si	ignature: Moreke			
	Printe	ed Name: DEFF MOEKKE			

Committee Name:	ZLR	Your Name: Todd Monteyidus	
DATE of Meeting:	7/23/19 M	lunicipality You Reside in:	
Petition/CUP #/Resolu	ution/Ordinance Amend	dment/Subject: 1143	
Wish to Spe	ak in Support	☐ Wish to Speak in Opposition	
Wish to Reg	gister in Support	☐ Wish to Register in Opposition	
		vailable for Information Only	
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES			
		person or organization you are representing:	
Todd Mont	wide, Don P	etuson	
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 per	rson or organization yo	u represent spend more than \$500 on county lobbying activities	
	porting period? DYE lanuary to June, or July to		
5. Do you anticipate		contacts with the County Board supervisors other than at public	
hearings or meetings (Do not count contacts		O upervisor who represents the district in which you reside.)	
(If you checked "NO" to questions 4 and 5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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.)			
		ou understand that if the person or organization you represent eporting period, you must file a financial disclosure statement	
with the County Clerk??  \( \sum \text{YES} \) 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: \( \frac{1}{23} \frac{1}{9} \) Signature: \( \frac{1}{23} \text{Nonfeatible} \) Monfeatible \( \frac{1}{23} \text{Nonfeatible} \)			
Date: 2/23/19	Signatur	e: Jaw 12	
	Printed Nam	e: Tod & Montevides	