Com	mittee Name:_	ELR	Na	me: i	MOURN	Joh	~625		
	e: 4-25		Mu	me: <u> </u>	Dun	of o	Regu		
Petiti	ion/CUP #/Res	olution/Ordin	ance Amendment						
	ish to Speak in Segistering in Sup		☐ Wish to Spea☐ Registering in		□ Av	vailable fo	or Informatio	n Onl	y
[If you	u checked "NO,"	STOP; you nee	ally representing  d not complete the reer of each person of	YES 🔼 est of this form. If	<b>NO</b> f you checked	! "YES," g			stion.]
Com	ments:			586					
othe [If you	r paid duties fo	or this person to the question,	presentation or a or organization? STOP; you need not next question.]			□ Y	ES	( <b>)</b> X(	NO
or for [If you	r your municip u checked "YES,	ality or other ' to the question	o is appearing solo governmental boo , <u>STOP</u> ; you need no on to the next quest	dy? ot complete the re.	·	□	<b>YES</b> at you must si	gn this	
on co	unty lobbying	activities duri	nization you repr ng the current rep or from July to Dece	porting period?			YES	叉	NO
supei	rvisors other th	an at public h	re than 2 contacts learings or meeting Board supervisor w	ıgs?			ES eside.)	M	NO
more	than 2 contacts a	t a later date, yo	and 5 above, <u>STOP;</u> ; ou must then contact d "YES" to either qu	the County Clerk	's office to fil	le a form i	ndicating sucl		
spend finan [If you	ds more than \$ cial disclosure	500 during the statement wit please call the C	that if the person e current reportin h the county clerk county Clerk at 266-4 on.]	g period, you n	nust file a	. 🗆 Y	220000000000000000000000000000000000000	⊠′N City-Co	
Date:	4-25	17		Signature	100	. fl	h		
				Print Name	Don	10	hrson		a de la companya de

Committee Name:	Name: Brett Olson	
DATE: 4-25-17	Municipality: Dunks. Vk	
Petition/CUP #/Resolution/Ordi	inance Amendment/Subject: 1110 6	
₩ Wish to Speak in Support  Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Onl	ly
[If you checked "NO," STOP; you no	icially representing an organization or a person other than yourself?  NO  eed not complete the rest of this form. If you checked "YES," go on to the next que there of each person or organization you are representing:	estion.]
NO N		
Comments:		
other paid duties for this person	representation or appearing incidental to your nor organization?	NO
or for your municipality or othe	on, STOP; you need not complete the rest of this form except that you must sign thi	NO s form. Į
	200M - 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	NO
supervisors other than at public	ore than 2 contacts with County Board the hearings or meetings?	NO
more than 2 contacts at a later date,	A and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you you must then contact the County Clerk's office to file a form indicating such activ ked "YES" to either question at this time, go on to the next question.]	
spends more than \$500 during the financial disclosure statement w	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-C	NO ounty
Date: 4-25-17	Signature Brett Olson	
	Print Name Brett Olson	100

Committee Name: 2 + 1 Name: George Hauge
DATE: 4-25-17 Municipality: TOWN OF COTTAGE GLOVE
Petition/CUP #/Resolution/Ordinance Amendment/Subject: ///07
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 DO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]  Name, address and telephone number of each person or organization you are representing:  Father: George Hage
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP;</u> you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: Signature
Print Name

Committee Name:_	ZONING	Name:	ANOREW	UNDEN 304	)
DATE: 25	JAPR 17	Municipality	<b>:</b>		
Petition/CUP #/Res	solution/Ordinance Am	endment/Subject:_	REZOWE	11108	
Wish to Speak in ☐ Registering in Su		h to Speak in Oppos istering in Opposition		lable for Informati	on Only
[If you checked "NO,	n, are you officially reprosect of each of eac	□ YES  plete the rest of this fo	NO rm. If you checked "	YES," go on to the n	
ë"					
Comments:					
other paid duties f [If you checked "NO"	aid for your representa or this person or organ to the question, <u>STOP</u> ; yo turn over to the next que.	ization?		□ YES	□ NO
or for your municip [If you checked "YES,	ted official who is apperality or other government of the question, STOP; you the question, go on to the	nental body? ou need not complete			□ NO sign this form.
on county lobbying	person or organization ; activities during the cu January to June or from Ju	irrent reporting pe		□ YES	□ NO
supervisors other t	ite making more than 2 han at public hearings of swith the County Board su	or meetings?		☐ YES h you reside.)	□ NO
more than 2 contacts of	" to questions 4 and 5 abov at a later date, you must th m. If you checked "YES" i	en contact the County	Clerk's office to file of	a form indicating suc	
spends more than s financial disclosure	ou understand that if the 5500 during the current estatement with the couplease call the County Cler more information.]	reporting period, inty clerk?	you must file a	□ YES	□ NO City-County
Date:		Sig	nature		
		Print	Name		

Committee Name: ZLR Name:	<del></del> u
DATE: 4-25-17 Municipality:	10
Petition/CUP #/Resolution/Ordinance Amendment/Subject: (1109>	
<ul> <li>□ Wish to Speak in Support</li> <li>□ Registering in Support</li> <li>□ Registering in Opposition</li> <li>□ Registering in Opposition</li> </ul>	Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  ———————————————————————————————————	
Name, address and telephone number of each person or organization you are representing:  Elizabeth A. Dinge  509 Roke St. John Hoyb, WI 53577	
Comments:	
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?	⊠ NO
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?	<b>NO</b> this form. Ij
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?	NO NO
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?	NO Æ
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such a must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]	
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?	<b>NO</b> y-County
Date:	<u>e</u>

Committee Name:	: Struck Schult	
DATE: 4/25/17 Munici	ipality: MedinA	
Petition/CUP #/Resolution/Ordinance Amendment/Sub	bject: 11109	<u>-</u>
₩ish to Speak in Support ☐ Wish to Speak in ☐ Registering in Op		nation Only
1. On this occasion, are you officially representing an orange of YES [If you checked "NO," STOP; you need not complete the rest of Name, address and telephone number of each person or or	NO fthis form. If you checked "YES," go on to the	
Comments:		
2. Are you being paid for your representation or appear other paid duties for this person or organization? [If you checked "NO" to the question, <u>STOP</u> ; you need not com If you checked "YES," turn over to the next question.]	□ YES	∕У №
3. Are you an elected official who is appearing solely or for your municipality or other governmental body?. [If you checked "YES," to the question, STOP; you need not con you checked "NO," to the question, go on to the next question.]	mplete the rest of this form except that you mu	NO NO ust sign this form. I
4. Has or will the person or organization you represent on county lobbying activities during the current report (A reporting period is January to June or from July to December	ing period? 🗆 YES	D NO
5. Do you anticipate making more than 2 contacts with supervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who remains the county Board supervisor w	□ YES	D NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need than 2 contacts at a later date, you must then contact the contact the contact also sign this form. If you checked "YES" to either questions	County Clerk's office to file a form indicating	
6. If "YES," do you understand that if the person or o spends more than \$500 during the current reporting perfinancial disclosure statement with the county clerk? [If you checked "NO" please call the County Clerk at 266-4121 Building, Madison, for more information.]	eriod, you must file a	□ NO the City-County
Date: 4/25/17	Signature Steven Schn	17

Committee Name: 218 Name: Vim Lowery	
DATE: April 25 Municipality: Medina	
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?	on.]
Name, address and telephone number of each person or organization you are representing:  Kuhl VT Wev hiving TA. RoberT M. Kuhl	
Comments:	
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?	O
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?	0.00
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?   YES  (A reporting period is January to June or from July to December.)	)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?	O
[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 more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]	
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?	
Date: 4-25-17 Signature in Many  Print Name Vim Lowery	<b></b> ₹
Print Name Vim Lowery	

Committee Name:_	ZLK	, Y	_ Name: 👤	Tom	MATI	2 W Kirk		
DATE:			_ Municipali	ty:	DUN	Kirk		
Petition/CUP #/Rese	olution/Ordina	nce Amendr	nent/Subject	: 111				
☐ Wish to Speak in S☐ Registering in Sup			Speak in Opp ing in Opposi		☐ Availab	ole for Inform	nation On	ıly
1. On this occasion, [If you checked "NO," Name, address and te	STOP; you need	l not complete	☐ YES the rest of this	form. If you	O checked "YE	S," go on to t		estion.]
Comments:							-	
2. Are you being pa other paid duties fo [If you checked "NO" If you checked "YES,"	or this person of the the question, §	or organizatio STOP; you nee	on?d not complete	_	□	YES	0	NO
3. Are you an elect or for your municip [If you checked "YES," you checked "NO," to	ality or other parts to the question,	governmenta <u>STOP</u> ; you ne	I body?				□ ust sign th	NO is form. If
4. Has or will the pon county lobbying (A reporting period is J	activities durii	ng the currer	t reporting			YES		NO
5. Do you anticipat supervisors other th (Do not count contacts	an at public h	earings or m	eetings?		🗆			NO
[If you checked "NO," more than 2 contacts a must also sign this form	t a later date, yo	u must then co	ntact the Coun	ty Clerk's off	ice to file a fo	orm indicating		
6. If "YES," do you spends more than \$1 financial disclosure [If you checked "NO" ] Building, Madison, for	500 during the statement with please call the Co	current report the county county Clerk at	orting period clerk?	l, you must	file a	The state of the s		NO County
Date:			S	ignature	9		フ	a .
			Pri	nt Name	Jam	mai	A	7

Committee Name: ZLR	Name: KONALD I, COTTER
DATE: 4/25/2017	Municipality: Dunkink
Petition/CUP #/Resolution/Ordin	nance Amendment/Subject: PET, Tion REZONE   1111
☐ Wish to Speak in Support ☐ Registering in Support	<ul> <li>☐ Wish to Speak in Opposition</li> <li>☐ Registering in Opposition</li> <li>☐ Available for Information Only</li> </ul>
[If you checked "NO," <u>STOP</u> ; you ne	cially representing an organization or a person other than yourself?
Comments:	
other paid duties for this person	epresentation or appearing incidental to your or organization?
or for your municipality or other	no is appearing solely on behalf of your office regovernmental body?
	ing the current reporting period?   YES  NO or from July to December.)
supervisors other than at public	re than 2 contacts with County Board hearings or meetings?
more than 2 contacts at a later date, y	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make ou must then contact the County Clerk's office to file a form indicating such activity. You ed "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement wi	that if the person or organization you represent the current reporting period, you must file a th the county clerk?
Date:	Signature
	Print Name

Committee Name:_	ZLR	N	ame: _ E	No N	Selscan		
DATE: M/2	5/2017	M	unicipality: _	tour	, of e	reson	
Petition/CUP #/Reso	lution/Ordina	nce Amendmen	t/Subject:	11)1:	2	æ	
Wish to Speak in S     Registering in Sup		☐ Wish to Spea☐ Registering i			] Available	e for Informati	on Only
1. On this occasion,  [If you checked "NO,"  Name, address and te	<u>STOP;</u> you need	not complete the 1	YES rest of this form.	□ NO If you che	ecked "YES,	" go on to the 1	
Comments:					X		
2. Are you being pa other paid duties fo [If you checked "NO" if If you checked "YES,"	r this person or to the question, <u>S</u>	organization? <u>TOP</u> ; you need no			□	YES	Ď NO
3. Are you an elected or for your municipal [If you checked "YES," you checked "NO," to be	ality or other g	overnmental bo STOP; you need n	dy? ot complete the		□		NO sign this form.
4. Has or will the p on county lobbying a (A reporting period is J	activities durin	g the current re	porting perio			YES	内 NO
5. Do you anticipat supervisors other th (Do not count contacts	an at public he	arings or meeti	ngs?			YES u reside.)	⊠K NO
[If you checked "NO," more than 2 contacts at must also sign this form	a later date, you	must then contac	t the County Cle	erk's office	to file a fori	n indicating su	
6. If "YES," do you spends more than \$5 financial disclosure [If you checked "NO" I Building, Madison, for	500 during the statement with olease call the Co	current reportion the county cler county Clerk at 266-	ng period, you k?	ı must file	ea □	YES om 106A of the	□ NO City-County
Date: 4/2	5/n		Signat	ure Æ	ins	sh	
			Print Na	me_ E	ric K	Jelson	

**Committee Name:** Municipality: 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? ..... TYES [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 □ 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 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?...... [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.] 4-25-17 Breung

Committee Name:	Name:	STUART	WOL	F-WCF	Rw t	RUST
DATE: 4-25-2017	Municip	ality: <u>†ow</u>	ISHIP	DANE		
Petition/CUP #/Resolution/Ordinar	nce Amendment/Subj	ect: <u>REZ</u>	ONE	11114		
<ul><li>☑ Wish to Speak in Support</li><li>☐ Registering in Support</li></ul>	☐ Wish to Speak in O☐ Registering in Oppo		☐ Availa	ble for Inforn	nation On	ly
1. On this occasion, are you official [If you checked "NO," STOP; you need Name, address and telephone number	not complete the rest of t	his form. If you	) checked "YE	ES," go on to ti		estion.]
-	59 Y			5	Di Companya di	
Comments:						
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, So If you checked "YES," turn over to the interpretation of the part of the p	r organization? TOP; you need not compl		□	YES		NO
3. Are you an elected official who or for your municipality or other g [If you checked "YES," to the question, you checked "NO," to the question, go of the checked "NO," to the question, go of the question is the question of the question.	overnmental body? STOP; you need not comp					NO is form. Ij
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reportin	ıg period?		□ YES		NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County li	earings or meetings?		Г			NO
[If you checked "NO," to questions 4 an more than 2 contacts at a later date, you must also sign this form. If you checked	must then contact the Co	ounty Clerk's offi	ce to file a f	form indicating		
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co Building, Madison, for more information	current reporting per the county clerk? ounty Clerk at 266-4121 o	iod, you must	file a [	□ YES		NO County
Date:		Signature		-		0
		Print Name				

Committee Name: ZLR	Name:		JESSE		
DATE: 4/25/17	Municipalit	y:	lue Mound	-5	*
Petition/CUP #/Resolution/Ordinar	ce Amendment/Subject:	1111	b	8	
<ul><li>✓ Wish to Speak in Support</li><li>☐ Registering in Support</li></ul>	☐ Wish to Speak in Oppo		☐ Available for	r Information Onl	у
1. On this occasion, are you official [If you checked "NO," STOP; you need to Name, address and telephone number KCJLL	not complete the rest of this j	☐ NO form. If you ch	hecked "YES," go	o on to the next que	stion.]
Comments:					
2. Are you being paid for your reprother paid duties for this person of [If you checked "NO" to the question, SI If you checked "YES," turn over to the many terms of the second	organization?		YE	cs 🗀	NO
3. Are you an elected official who is or for your municipality or other go [If you checked "YES," to the question, go of you checked "NO," to the question, go of	overnmental body? STOP; you need not complete		Y		
4. Has or will the person or organi on county lobbying activities during (A reporting period is January to June or	g the current reporting p			es 🕱	NO
5. Do you anticipate making more supervisors other than at public her (Do not count contacts with the County F	arings or meetings?				NO
[If you checked "NO," to questions 4 and more than 2 contacts at a later date, you must also sign this form. If you checked	must then contact the Count	y Clerk's offic	e to file a form in	dicating such activ	
6. If "YES," do you understand the spends more than \$500 during the of financial disclosure statement with [If you checked "NO" please call the Course Building, Madison, for more information	current reporting period the county clerk? unty Clerk at 266-4121 or go	, you must fi	le a □ Y		NO ounty
Date: 4/25/17	Si	gnature	Vern JE	7	
	Prin	nt Name	VERN JE	SSE	

Committee Name: ZLR Name: Name: Nort RIEUC
DATE: 4/25/17 Municipality: VERONA
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 1117
Wish to Speak in Support
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES DNO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:  Im Swelly 2778 PRAIRIE CIRCLE, VERONH WI
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4/25/17  Signature  Print Name  Print Name

Committee Name:	Kim Bigles	Nam	e: <u>Kim</u>	Digles	8	
DATE: 4.75	17	Muni	cipality: <u>Blue</u>	Mounds	Towns	hip
Petition/CUP #/Reso	lution/Ordina	nce Amendment/Si	ubject: ReZ	ne 11118	7	·
Wish to Combine		UW:-1- t- C1-		<u> </u>		
Wish to Speak in S Registering in Supp		☐ Wish to Speak i☐ Registering in C	the same of the sa	☐ Available	for Informat	ion Only
[If you checked "NO,"	STOP; you need	not complete the rest	ES 🔯 N of this form. If you	O checked "YES,	" go on to the	
Name, address and tel	ephone number	of each person or o	organization you a	are representing	;;	
Comments:			N			
2. Are you being paid other paid duties for [If you checked "NO" to If you checked "YES,"	this person of the question, S	r organization? TOP; you need not co		□	YES	KBY.25.17 NO
3. Are you an elected or for your municipa [If you checked "YES," you checked "NO," to t	llity or other g	overnmental body STOP; you need not d	? complete the rest of			□ NO sign this form.
4. Has or will the poon county lobbying a (A reporting period is Ja	ctivities durin	g the current repo	rting period?		YES	□ NO
5. Do you anticipate supervisors other that (Do not count contacts of the supervisors)	an at public he	arings or meetings	?	🗆	YES 1 reside.)	□ NO
[If you checked "NO," a more than 2 contacts at must also sign this form	a later date, you	must then contact the	e County Clerk's of	fice to file a form	n indicating su	
6. If "YES," do you spends more than \$5 financial disclosure s [If you checked "NO" p Building, Madison, for the state of	00 during the statement with lease call the Co	current reporting the county clerk?. unty Clerk at 266-412	period, you must	file a	YES om 106A of the	□ NO e City-County
Date:	.25.17		Signature Print Name	Kim Be	ylu.	
			Print Name	Kim B	igles	

Committee Name: 22R	Name: Gary, Clipp Barbiar
DATE: 4-25-17	Name: Cary, Clipp Barbiar  Municipality: Raybury tup
	nance Amendment/Subject: /// 9
☐ Wish to Speak in Support ☑ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," STOP; you ne	cially representing an organization or a person other than yourself?
Comments:	
2. Are you being paid for your other paid duties for this person	representation or appearing incidental to your or organization?
or for your municipality or othe	ho is appearing solely on behalf of your office r governmental body?
	anization you represent spend more than \$500 ring the current reporting period?
supervisors other than at public	hearings or meetings?
more than 2 contacts at a later date,	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make you must then contact the County Clerk's office to file a form indicating such activity. You seed "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement w	I that if the person or organization you represent he current reporting period, you must file a ith the county clerk?   County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County tion.]
Date:	Signature
	Print Name

Committee Name: Dom Count toni	Name: Steple	D. Fleel Flac	h
DATE: 4-25-17	Municipality: Pryw	~ NO E	
Petition/CUP #/Resolution/Ordinance Amend	ment/Subject: Rediany	, lot live in we tool	latione
	Speak in Opposition ing in Opposition	☐ Available for Informati	ion Only
1. On this occasion, are you officially represe  [If you checked "NO," STOP; you need not complete  Name, address and telephone number of each pe	The rest of this form. If you can	hecked "YES," go on to the n	
Comments:			
2. Are you being paid for your representation other paid duties for this person or organizate [If you checked "NO" to the question, STOP; you need If you checked "YES," turn over to the next question	on?ed not complete the rest of this	□ YES	⊠ NO
3. Are you an elected official who is appearing or for your municipality or other government [If you checked "YES," to the question, <u>STOP</u> ; you not you checked "NO," to the question, go on to the next	nl body?eed not complete the rest of the		NO sign this form.
4. Has or will the person or organization you on county lobbying activities during the curre (A reporting period is January to June or from July to	nt reporting period?		Ŋ NO
5. Do you anticipate making more than 2 consupervisors other than at public hearings or no (Do not count contacts with the County Board supervisors)	eetings?		Ŋ NO
[If you checked "NO," to questions 4 and 5 above, S more than 2 contacts at a later date, you must then comust also sign this form. If you checked "YES" to eight	intact the County Clerk's offic	e to file a form indicating suc	
6. If "YES," do you understand that if the perspends more than \$500 during the current reprinancial disclosure statement with the county [If you checked "NO" please call the County Clerk a Building, Madison, for more information.]	orting period, you must fi clerk?	ile a 	NO City-County
Date: 25 APR2010	Signature	Chosel Stephen D. Flaw	
	Print Name	Stephen D. Flaw)	

Committee Name: Name:	Cindy Hise
DATE: 4-25-2017 Munici	pality: Town of Primose
Petition/CUP #/Resolution/Ordinance Amendment/Sub	ject: (1120
☐ Wish to Speak in Support ☐ Wish to Speak in ☐ Registering in Support ☐ Registering in Op	33. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1. On this occasion, are you officially representing an officially representing and YES [If you checked "NO," STOP; you need not complete the rest of	NO NO
Name, address and telephone number of each person or organized and telephone number of	
Comments:	
2. Are you being paid for your representation or appearation paid duties for this person or organization? [If you checked "NO" to the question, <u>STOP</u> ; you need not comply you checked "YES," turn over to the next question.]	YES № NO
3. Are you an elected official who is appearing solely or for your municipality or other governmental body?. [If you checked "YES," to the question, <u>STOP</u> ; you need not con you checked "NO," to the question, go on to the next question.]	
4. Has or will the person or organization you represent on county lobbying activities during the current reports (A reporting period is January to June or from July to December	ing period? □ YES □ NO
5. Do you anticipate making more than 2 contacts with supervisors other than at public hearings or meetings?. (Do not count contacts with the County Board supervisor who re	□ YES □ NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you n more than 2 contacts at a later date, you must then contact the 0 must also sign this form. If you checked "YES" to either question	and the state of t
6. If "YES," do you understand that if the person or o spends more than \$500 during the current reporting per financial disclosure statement with the county clerk? [If you checked "NO" please call the County Clerk at 266-4121 Building, Madison, for more information.]	eriod, you must file a
Date: 4.25-2011	Signature Croby Llevil
	Print Name Cincly HiseL

Committee Name:	Name:	Bruce	Kaden	acher	<u> </u>	
DATE: 4/25/19	Municipa	lity: Tow	- 01 8	inc Pra	) rre	x
Petition/CUP #/Resolution/Ordina	nce Amendment/Subje	ct: <u>///</u> Z	/			
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in Oppo☐ Registering in Oppo		☐ Available	for Informat	tion Onl	ly
1. On this occasion, are you officiangle.  [If you checked "NO," STOP; you need when the state is a subject to the state of the state o	□ YES I not complete the rest of th	is form. If you	) checked "YES,	" go on to the		estion.]
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2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? STOP; you need not comple	-	□	YES		NO
3. Are you an elected official who or for your municipality or other a [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? <u>STOP</u> ; you need not comp					NO s form. If
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June o	ng the current reporting			YES		NO
5. Do you anticipate making mor supervisors other than at public he (Do not count contacts with the County	earings or meetings?			YES a reside.)		NO
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6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Company Building, Madison, for more information.  Date:	current reporting perion the county clerk? county Clerk at 266-4121 or	od, you must	file a	YES  op 106A of th		NO Jounty
	,	rint Name	Bruce F	20do mo	rehe	

Committee Name: ZZ	Name: Breff Lindsy Kar	no
DATE: 4/25/17	Municipality:/// 220	=======================================
Petition/CUP #/Resolution/Ordin	nance Amendment/Subject: Rezone single	family house
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Avail	lable for Information Only
[If you checked "NO," STOP; you ne	cially representing an organization or a person of YES NO NO seed not complete the rest of this form. If you checked "I ber of each person or organization you are represented the rest of the person or organization you are represented the rest of each person or organization you are represented the person of the person	YES," go on to the next question.]
Comments:	Э 2	
other paid duties for this person	representation or appearing incidental to your or organization?	□ YES 🙇 NO
or for your municipality or othe	ho is appearing solely on behalf of your office r governmental body?	
	anization you represent spend more than \$500 ring the current reporting period?	□ YES NO
supervisors other than at public	hearings or meetings?ty Board supervisor who represents the district in which	☐ YES h you reside.)
more than 2 contacts at a later date,	and 5 above, <u>STOP</u> ; you need not complete the rest of you must then contact the County Clerk's office to file a ked "YES" to either question at this time, go on to the n	form indicating such activity. You
spends more than \$500 during the financial disclosure statement w	I that if the person or organization you represent he current reporting period, you must file a ith the county clerk?	□ YES □ NO
Date: 4/25/17	Signature Brett K.	<u></u>
	Print Name Breff K.	ramer

Committee Name:	Name:	Kyle	Khawitten	
Committee Name: 4-26-17	Municipa	ality:		
Petition/CUP #/Resolution/Ordinar		1 1	123	
☑ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppo		☐ Available for Info	rmation Only
1. On this occasion, are you officia  [If you checked "NO," <u>STOP</u> ; you need	YES	⊠ NC	)	
Name, address and telephone number  Kyle Kha witter  1939 Hubaed hw				
Comments:	Weentreld,	, w, , 5	30 5 /	<u> </u>
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, So If you checked "YES," turn over to the results.	r organization? TOP; you need not comple			Z NO
3. Are you an elected official who or for your municipality or other g [If you checked "YES," to the question, you checked "NO," to the question, go of the checked "NO," to the question, go of the question is the question of the question.	overnmental body? STOP; you need not comp		YES	NO NO must sign this form. I
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reporting			⊠ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County l	arings or meetings?		<b>D</b> YES	Z NO
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6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co Building, Madison, for more information	current reporting peri the county clerk? unty Clerk at 266-4121 or	od, you must f	file a YES	□ NO of the City-County
Date: 4-26-17		Signature	Kyle Kleunt Kyle Klawi	D
	I	Print Name	Kyle Klawi	tten

Committee Name:	Name:	Mike	Mary		
DATE: 4-25-17	Municip	ality:	nollé		
Petition/CUP #/Resolution/Ordina	ance Amendment/Subj	ect: <u>CUP</u>	2375		
☑-Wish to Speak in Support  Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available for	Information Onl	y
1. On this occasion, are you offici [If you checked "NO," <u>STOP</u> ; you need Name, address and telephone number	M YES and not complete the rest of t	□ NO this form. If you o	) checked "YES," go	***************************************	estion.]
Comments:					
2. Are you being paid for your reother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? STOP; you need not compl		YES	S Ø	NO
3. Are you an elected official who or for your municipality or other [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? STOP; you need not comp		Y		NO s form.
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reportin	ng period?		es <b>da</b>	NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?		<b>D</b> YE		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 checked	u must then contact the Co	ounty Clerk's offi	ce to file a form ind	licating such activ	
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the C Building, Madison, for more information	e current reporting per h the county clerk? ounty Clerk at 266-4121 o	iod, you must f	ile a □ YF	manus. • • • • • • • • • • • • • • • • • • •	
Date: 4-25-17		Signature /	Well !	Mahy	<del></del>
	100 Page	Print Name	Wichae !	T. May	

Committee Name: Ell Name: Stephanie Fagnia
DATE: April 25, 2017 Municipality: Burke
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2375
☐ 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?
Name, address and telephone number of each person or organization you are representing:  Two Tall Distributes 5353 Maly Rd Swite B, Sun Prairie, wt  63590 (763) 607-6075
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4 [25] 2017  Signature Stephanie Fafrica
Print Name Stephanie Farma

Committee Name: 212 Name: Wicholas Hanson
DATE: 4/25/2017 Municipality: Town of Burke
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CUR#2375
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 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:  Two Tall Distilling, 5353 May R.D. Sun Prairie, w/  \$3590  Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
If you checked "NO," to questions 4 and 5 above, <u>STOP;</u> you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4/25/2017 Signature
Print Name Wicholas R Hauson

Committee Name:	2LR	Name:	- "IL 1e	K DOHM		
DATE: 4/29	5/17	Municipa	ality:	10NTROSE		
Petition/CUP #/Resolu						
Wish to Speak in Su  ☐ Registering in Supp		☐ Wish to Speak in O☐ Registering in Oppo		☐ Available for	: Information Onl	y
1. On this occasion, a [If you checked "NO," S Name, address and tele	TOP; you need n	not complete the rest of th	his form. If you	NO u checked "YES," go		estion.]
						<del>-</del>
Comments:					2	9
2. Are you being paid other paid duties for [If you checked "NO" to If you checked "YES," to	this person or the question, <u>ST</u>	organization? OP; you need not compl		□ YE	es 🗆	NO
3. Are you an elected or for your municipal [If you checked "YES," to the you checked "NO," to the	ity or other go o the question, <u>S</u>	vernmental body? TOP; you need not comp		Y	1900C3435C	NO s form. Ij
4. Has or will the per on county lobbying ac (A reporting period is Jan	ctivities during	the current reportin	g period?		ES 🗆	NO
5. Do you anticipate supervisors other that (Do not count contacts w	n at public hea	arings or meetings?		🗆 YI		NO
[If you checked "NO," to more than 2 contacts at a must also sign this form.	later date, you	must then contact the Co	unty Clerk's o	ffice to file a form in	dicating such activ	
6. If "YES," do you spends more than \$50 financial disclosure st [If you checked "NO" plot Building, Madison, for m	0 during the catement with the case call the Cou	current reporting perithe county clerk? unty Clerk at 266-4121 o	iod, you mus	t file a 🗖 Y		NO County
Date: 4/25/	17		Signature	Jude		
. ,	<i>5</i> **	j	Print Name	DICHARD E.	Doyley	

Committee Name: Zoning & La	ud Regulato Name: Steven 1	Mart Marnison	
DATE: 4/25/2017	Municipality: 160	in & Mantrage	
Petition/CUP #/Resolution/Ordi	1 me ner	33	
☐ Wish to Speak in Support  Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition	☐ Available for Inform	ation Only
[If you checked "NO," <u>STOP;</u> you no	cially representing an organization or YES A N ed not complete the rest of this form. If you ber of each person or organization you	NO u checked "YES," go on to th	
Comments:			¥
other paid duties for this person	epresentation or appearing incidenta or organization?	□ YES	M NO
or for your municipality or othe	no is appearing solely on behalf of your governmental body?	□ YES	NO ust sign this form.
The state of the s	anization you represent spend more tring the current reporting period?		Z NO
supervisors other than at public	ore than 2 contacts with County Boar hearings or meetings?		M NO
more than 2 contacts at a later date,	and 5 above, <u>STOP</u> ; you need not complete you must then contact the County Clerk's o <u>j</u> red "YES" to either question at this time, go	ffice to file a form indicating	
spends more than \$500 during t financial disclosure statement w	that if the person or organization you current reporting period, you must the county clerk?	t file a	□ NO the City-County
Date: 4/25/2017	Signature 🔏	Heven Mart Mat	<u> </u>
<b>3</b> " "	Print Name $ {\cal S} $	teven Mouto Nlat	hisan

Committee Name: ZL	.R Name:	Anthon	Varda	
DATE: 4 25 17	Name:	: Berr	19	
₩.	Ordinance Amendment/Subject:_		14-085	
Wish to Speak in Support  Registering in Support	☐ Wish to Speak in Opposition		Available for Inform	nation Only
in Support	□ Registering in Opposition	)II	Available for finioring	lation Omy
1. On this occasion, are you  [If you checked "NO," STOP; you	officially representing an organi YES ou need not complete the rest of this fo	zation or a pe  NO orm. If you chec	rson other than you ked "YES," go on to the	irself?  the next question.]
Name, address and telephone	number of each person or organiza	tion you are re	presenting:	
Town of Ber	٠٧٩			
- Hwy 19, Ma	zonanie WI 535	60		
Comments:				
2. Are you being paid for you other paid duties for this pool [If you checked "NO" to the que If you checked "YES," turn over	our representation or appearing in erson or organization?	ncidental to y	our YES	□ NO
3. Are you an elected offici or for your municipality or [If you checked "YES," to the question you checked "NO," to the question.	al who is appearing solely on behother governmental body? uestion, STOP; you need not complete ion, go on to the next question.]	alf of your off	ice YES form except that you m	□ NO ust sign this form. ↓
on county lobbying activitie	r organization you represent spens during the current reporting per June or from July to December.)			□ NO
supervisors other than at pu	g more than 2 contacts with Coultill hearings or meetings? County Board supervisor who represer			□ NO
more than 2 contacts at a later a	ons 4 and 5 above, <u>STOP;</u> you need no late, you must then contact the County checked "YES" to either question at th	Clerk's office to	o file a form indicating	
spends more than \$500 duri financial disclosure statemen	stand that if the person or organizing the current reporting period, not with the county clerk?	you must file	a □ YES	□ NO the City-County
Date: 4(25/17	Sig	nature	Shan M	
. 1		NameA_	thoug Varde	

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: Dene Colonia Name: 1000, Dene
DATE: 4-25-17 Municipality: Stocky 1407
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
<ul> <li>□ Wish to Speak in Support</li> <li>□ Registering in Support</li> <li>□ Registering in Opposition</li> <li>□ Registering in Opposition</li> </ul>
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES DO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:  See Westing 7 608-912-9020 4,0, 294278  Outic Victoria 608-247-1629 Stoughton W.
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? □ YES □ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4-25-2017 Signature Mun Jame Print Name 1000 layvecil

Committee Name:	Name: Wendy Pacette
DATE: 4/25/2617	Municipality: Town of Verona
Petition/CUP #/Resolution/Ordina	11100
₩ Wish to Speak in Support  Registering in Support	<ul> <li>☐ Wish to Speak in Opposition</li> <li>☐ Registering in Opposition</li> <li>☐ Available for Information Only</li> </ul>
[If you checked "NO," <u>STOP</u> ; you nee	ally representing an organization or a person other than yourself?  NO  I not complete the rest of this form. If you checked "YES," go on to the next question.]  er of each person or organization you are representing:
	2 of each person of eigenheur you are representing
Comments:	
other paid duties for this person	presentation or appearing incidental to your or organization?
or for your municipality or other	o is appearing solely on behalf of your office governmental body?
	nization you represent spend more than \$500 ng the current reporting period?   YES NO or from July to December.)
supervisors other than at public l	re than 2 contacts with County Board earings or meetings?
more than 2 contacts at a later date, ye	nd 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make ou must then contact the County Clerk's office to file a form indicating such activity. You d "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement with	that if the person or organization you represent e current reporting period, you must file a h the county clerk?
Date: 4/25/17	Signature Wendy A Pacetti
	Print Name Wendy A Pace (4)

Committee 1	Name: Zownsk Lo	I Reg.	Name: _	Ted !	sal/w	eg	ii.
DATE:	Name: Zonnyk Lon 4/25/17		Municipal	ity: Tou	un of	Vesor	rh
Petition/CU	P #/Resolution/Ordina	nce Amendm	ent/Subjec	t: ///	25		
	W NEW ORK CHO						
The second secon	peak in Support ng in Support	✓ Wish to Single Registering			□ Available	for Informati	ion Only
	occasion, are you officia and "NO," <u>STOP</u> ; you need		YES	P NO	)		
Name, addre	ss and telephone numbe	r of each perso	on or organi	zation you a	e representing	<u>;</u> ;	
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other paid of [If you checke	being paid for your rep duties for this person o ed "NO" to the question, <u>S</u> d "YES," turn over to the	r organizatio <u>TOP</u> ; you need	n?		□	YES	⊠ NO
or for your i	an elected official who municipality or other ged "YES," to the question, 'NO," to the question, go o	overnmental STOP; you need	body?d not comple				NO sign this form.
on county lo	vill the person or organ obbying activities durin period is January to June on	g the current	reporting			YES	☑ NO
supervisors	anticipate making more other than at public he contacts with the County	earings or med	etings?			YES u reside.)	NO
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spends more financial dis [If you checke	"do you understand the than \$500 during the sclosure statement with ed "NO" please call the Codison, for more information	current report the county clumty Clerk at 20	rting period lerk?	l, you must	file a □	YES om 106A of the	□ NO City-County
Date:	1/25/17		· .	Signature	I Bat	May	
			Pr	int Name	ed 19	allut	3

Committee Name: Zoning /	and Name: JOAN BALLWER			
DATE: 4/25/17 Municipality: TOWN OF VERONA				
Petition/CUP #/Resolution/Ordin	ance Amendment/Subject: # 11105			
☐ Wish to Speak in Support ☐ Registering in Support	Wish to Speak in Opposition  Registering in Opposition  □ Available for Inform	nation Only		
	ially representing an organization or a person other than you  NO Id not complete the rest of this form. If you checked "YES," go on to to			
Name, address and telephone numb	per of each person or organization you are representing:			
Comments:				
other paid duties for this person	epresentation or appearing incidental to your or organization?	NO NO		
or for your municipality or other	o is appearing solely on behalf of your office governmental body?	🏿 (NO nust sign this form. [		
	ing the current reporting period?   YES or from July to December.)	у́⊠ ио		
supervisors other than at public l	re than 2 contacts with County Board nearings or meetings?	ĭØ NO		
more than 2 contacts at a later date, ye	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. Howe ou must then contact the County Clerk's office to file a form indicating ed "YES" to either question at this time, go on to the next question.]	S. 1777 B		
spends more than \$500 during th financial disclosure statement wit	that if the person or organization you represent e current reporting period, you must file a th the county clerk?	□ NO the City-County		
Date: 4/25/17	Signature Class Sand	elj-		
<u>′</u>	Print Name SOAU 13ALLUI	t G-		

Committee Name:_	Zoningt	comm,	Name: _	Cindy	Micha	da	
Committee Name:_ DATE: 4 - 2 5	-17		Municipali	ity:	n of '	Verona	
Petition/CUP #/Rese	olution/Ordin	ance Amendm	ent/Subjec	t: 1//C	5		
☑ Wish to Speak in ☑ Registering in Sup		☐ Wish to S☐ Registering	_		☐ Available	for Information	on Only
1. On this occasion [If you checked "NO," Name, address and to	STOP; you nee	d not complete to	☐ YES  the rest of this	form. If you	O checked "YES,	" go on to the n	
Comments:							
2. Are you being pa other paid duties fo [If you checked "NO" If you checked "YES,"	or this person to the question,	or organizatio <u>STOP</u> ; you need	n? I not complete		П	YES	py NO
3. Are you an elect or for your municip [If you checked "YES, you checked "NO," to	ality or other " to the question	governmental , <u>STOP</u> ; you nee	l body? ed not comple				NO Nign this form. I
4. Has or will the pon county lobbying (A reporting period is .	activities duri	ng the current	t reporting			YES	NO K
5. Do you anticipal supervisors other the (Do not count contacts	an at public l	nearings or me	etings?		□	YES u reside.)	M NO
[If you checked "NO," more than 2 contacts a must also sign this for	t a later date, yo	ou must then con	tact the Cour	ıty Clerk's off	ice to file a fori	n indicating suc	
6. If "YES," do you spends more than \$ financial disclosure [If you checked "NO" Building, Madison, for	500 during the statement wit please call the C	e current repo In the county c County Clerk at 2	rting periodlerk?	d, you must	file a	YES om 106A of the	□ NO City-County
Date: 4-25-	.17			Signature(	indis	Michad	ida
			Pr	int Name	Cindy '	Michud	9

Committee Name: Zoning of home	d Algebray Name:	DAVE !	Michiela	
DATE: 4-25-17	Munici	pality:	own of Ver	CONT
Petition/CUP #/Resolution/Ordin	nance Amendment/Sub	ject:	11105	
Wish to Speak in Support Registering in Support	☐ Wish to Speak in ☐ Registering in Op	^ ^	☐ Available for Infor	mation Only
1. On this occasion, are you office [If you checked "NO," STOP; you need when we have address and telephone number of the control of the cont	ed not complete the rest of	f this form. If you	IO u checked "YES," go on to	
Comments:				
2. Are you being paid for your r other paid duties for this person [If you checked "NO" to the question. If you checked "YES," turn over to the	or organization? STOP; you need not com		□ YES	□ NO
3. Are you an elected official whor for your municipality or other [If you checked "YES," to the question, you checked "NO," to the question, g	r governmental body?. n, <u>STOP</u> ; you need not con	nplete the rest of	YES	NO No nust sign this form. I
4. Has or will the person or orga on county lobbying activities dur (A reporting period is January to June	ing the current report	ing period?		to NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Count	hearings or meetings?.			d No
[If you checked "NO," to questions 4 more than 2 contacts at a later date, y must also sign this form. If you check	ou must then contact the (	County Clerk's of	ffice to file a form indicatin	
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement wield [If you checked "NO" please call the Building, Madison, for more information of the statement wield in the statement wield wield in the statement wield wield in the statement wield w	ne current reporting pe th the county clerk? County Clerk at 266-4121	eriod, you mus	t file a   YES	□ NO f the City-County
Date: 4/25/17		Signature	Juelle	W
, -		Print Name	JAUC	Michupk

	ac rigas
Committee Name: Name: $\frac{R}{\sqrt{25}/\sqrt{7}}$ Municipality:	Springdale
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	Rezone 11115/ CNP 2376
Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition	
1. On this occasion, are you officially representing an organization of the complete the rest of this formula of the complete the rest of t	m. If you checked "YES," go on to the next question.]
Traine, address and telephone number of each person of organizati	on you are representing.
Comments:	
2. Are you being paid for your representation or appearing in other paid duties for this person or organization?	□ YES 🕱 NO
3. Are you an elected official who is appearing solely on beha or for your municipality or other governmental body?	☐ YES 💆 NO
4. Has or will the person or organization you represent spend on county lobbying activities during the current reporting per (A reporting period is January to June or from July to December.)	
5. Do you anticipate making more than 2 contacts with Counsupervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who represents	
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not more than 2 contacts at a later date, you must then contact the County C must also sign this form. If you checked "YES" to either question at this	Clerk's office to file a form indicating such activity. You
6. If "YES," do you understand that if the person or organiza spends more than \$500 during the current reporting period, you financial disclosure statement with the county clerk?	ou must file a
Date: $\sqrt{25/17}$ Signate: Print N	Name Sulf Brett Myes

Committee Name: ZLR	Name: DAVID BING
Committee Name: ZLR  DATE: 4 25 17	Municipality: BWE MOUNDS
Petition/CUP #/Resolution/Ordinance Amendme	ent/Subject: CUP 2371
	1110
	beak in Opposition  g in Opposition  Available for Information Only
= registering in support	
	ng an organization or a person other than yourself?  YES
Name, address and telephone number of each perso	n or organization you are representing:  232 STATE NWY 7F  NOUNT HOMER, WI 437-5779
<i>&gt;</i>	10UNT HONER, WI 437-5779
Comments:	
<ol> <li>Are you being paid for your representation or other paid duties for this person or organization [If you checked "NO" to the question, STOP; you need If you checked "YES," turn over to the next question.]</li> <li>Are you an elected official who is appearing statement.</li> </ol>	not complete the rest of this form.  Solely on behalf of your office
or for your municipality or other governmental [If you checked "YES," to the question, <u>STOP</u> ; you need you checked "NO," to the question, go on to the next qu	l not complete the rest of this form except that you must sign this form.
4. Has or will the person or organization you re on county lobbying activities during the current (A reporting period is January to June or from July to De	reporting period? 🗆 YES 💆 NO
5. Do you anticipate making more than 2 contacts supervisors other than at public hearings or mee (Do not count contacts with the County Board supervisors)	etings? 🗆 YES 💆 NO
	<u>P;</u> you need not complete the rest of this form. However, if you do make act the County Clerk's office to file a form indicating such activity. You r question at this time, go on to the next question.]
6. If "YES," do you understand that if the person spends more than \$500 during the current report financial disclosure statement with the county classification of the county Clark at 26 Building, Madison, for more information.]	ting period, you must file a
Date: 4.25.17	Signature Owe Signature
	Print Name DAULO BING

Committee Name: ZLR Name: DAN O'CALLACHAN
DATE: 4/25/17 Municipality: TOWN OF ALBION
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CUP 2373
Wish to Smale in Support
Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES DNO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:
HOFFMAN CONSTRUCTION COMPANY, PETITIONER
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES If you checked "NO" to the question, STOP; you need not complete the rest of this form.  If you checked "YES," turn over to the next question.]
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4/25/17 Signature Dan O'Cayacitan

Committee Name: Eur 2373 TIR Name: Shawn Hostmen
DATE: 4/25/17 Municipality: Town of Albin
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CWP 2373
✓ 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?
Name, address and telephone number of each person or organization you are representing:  Hoffmen Construction Company  123 ctis A, Black Rian Calls at 5465-715.284-2512
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☑ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Print Name Shawn Holdman

Committee Name:	Name:	ROBERT	-h. U	ENSKE	3
Committee Name:	Municip	ality: 70 W	N OF	ALBIGI	ti r
Petition/CUP #/Resolution/Ordin	ance Amendment/Subj	ect: Cup	2373		
☐ Wish to Speak in Support  ☐ Registering in Support	☐ Wish to Speak in C☐ Registering in Opp	)pposition		for Informat	ion Only
1. On this occasion, are you office.  [If you checked "NO," STOP; you need.  Name, address and telephone number of the property of the propert	ed not complete the rest of to the rest of each person or organization.	his form. If you o	) checked "YES,	" go on to the	
Comments:				E .	
2. Are you being paid for your reother paid duties for this person [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? STOP; you need not comp		□	YES	Ď NO
3. Are you an elected official whor for your municipality or other [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? n, <u>STOP</u> ; you need not comp		Þ(	YES that you must	□ NO sign this form. I
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June	ing the current reportin	g period?		YES	Ď∕ NO
5. Do you anticipate making mosupervisors other than at public I (Do not count contacts with the Count	nearings or meetings?			YES 1 reside.)	NO NO
[If you checked "NO," to questions 4 a more than 2 contacts at a later date, yo must also sign this form. If you checke	ou must then contact the Co	ounty Clerk's offic	ce to file a form	n indicating su	
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 of the control of the c	e current reporting per th the county clerk? County Clerk at 266-4121 o	iod, you must f	ïle a □	YES om 106A of the	□ NO e City-County
Date:		Signature			
		Print Name			

Committee Name:	Name:	Thad	David	Andrews				
DATE: 9001/252017	Municipa	lity: A/b	100					
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Cuf 2373								
☐ Wish to Speak in Support 民 Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppo		☐ Available	for Informatio	n Only			
1. On this occasion, are you official  [If you checked "NO," STOP; you need to  Name, address and telephone number	not complete the rest of th	NO is form. If you on are	) checked "YES,	" go on to the ne.				
Comments:								
2. Are you being paid for your reprother paid duties for this person or [If you checked "NO" to the question, SI If you checked "YES," turn over to the new teacher than the second seco	organization? TOP; you need not comple		□	YES	□ NO			
3. Are you an elected official who is or for your municipality or other go [If you checked "YES," to the question, so on the checked "NO," to the question, go on the checked "NO," to the question the checked "NO," to the checked "NO	overnmental body? STOP; you need not comp				□ NO gn this form. ↓			
4. Has or will the person or organi on county lobbying activities during (A reporting period is January to June or	g the current reporting	-		YES	□ NO			
5. Do you anticipate making more supervisors other than at public hea (Do not count contacts with the County E	arings or meetings?		🗆	YES 1 reside.)	□ NO			
[If you checked "NO," to questions 4 and more than 2 contacts at a later date, you must also sign this form. If you checked	must then contact the Cou	unty Clerk's offic	ce to file a form	n indicating such				
6. If "YES," do you understand the spends more than \$500 during the confinancial disclosure statement with [If you checked "NO" please call the Country Building, Madison, for more information	current reporting period the county clerk? onty Clerk at 266-4121 or	od, you must f	ïle a □		□ NO Eity-County			
Date: APF1/ 25 20/7	p	Signature	J Ldh c	via Aro	Irems			