

Dane County Board Supervisor Meeting/Mileage Claim

NAME <i>Michael Engelberger</i>				Meetings During the Month of <i>June 2022</i>						
STANDING COMMITTEE/STANDING SUB-COMMITTEE SALARIED					NON-STANDING COMMITTEE PER DIEM					
Day of Month	CHECK ONE			Mileage	Name of Committee Other Than County Board	Day of Month	Meeting Start Time*	Other Comm.	Mileage	Name of Non-Standing Committee
	Co. Board	Comm.	Sub-Comm.							
<i>1</i>						<i>1</i>	<i>5:37pm</i>	<input checked="" type="checkbox"/>	<i>22</i>	<i>Land Conservation @ Babcock Boat Ramp</i>
<i>2</i>	<input checked="" type="checkbox"/>			<i>33.8</i>	<i>County Board @ Alliant Energy</i>					
<i>7</i>		<input checked="" type="checkbox"/>		<i>33.8</i>	<i>PWT @ Alliant Energy Center</i>					
<i>16</i>	<input checked="" type="checkbox"/>			<i>18.7</i>	<i>County Board CCB</i>					

*Compensation shall not be paid for a second or subsequent meetings unless the first meeting of the day has a starting time which is at least two (2) hours before the starting time of the second meeting or subsequent meeting for which compensation is sought.

EMAIL FORM TO BOARD.OFFICE.STAFF@COUNTYOFDANE.COM ON A MONTHLY BASIS

I hereby certify that the information on this form is true, correct and to the best of my knowledge complies with current Dane County Ordinance. To certify, please check the box to the right.	<input checked="" type="checkbox"/>	DATE <i>9/28/2022</i>
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Dane County Board Supervisor Meeting/Mileage Claim

NAME <i>Michael Engelberger</i>				Meetings During the Month of <i>July 2022</i>						
STANDING COMMITTEE/STANDING SUB-COMMITTEE SALARIED					NON-STANDING COMMITTEE PER DIEM					
Day of Month	CHECK ONE			Mileage	Name of Committee Other Than County Board	Day of Month	Meeting Start Time*	Other Comm.	Mileage	Name of Non-Standing Committee
	Co. Board	Comm.	Sub-Comm.							
<i>21</i>	<input checked="" type="checkbox"/>			<i>37.4</i>	<i>County Board CCB</i>					
<i>26</i>		<input checked="" type="checkbox"/>		<i>40.6</i>	<i>PW+T @ Airport</i>					

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EMAIL FORM TO BOARD.OFFICE.STAFF@COUNTYWD.WISCONSIN ON A MONTHLY BASIS

I hereby certify that the information on this form is true, correct and to the best of my knowledge complies with current Dane County Ordinance. To certify, please check the box to the right.	<input type="checkbox"/>	DATE <i>9/28/2022</i>
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