## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: £ANR	Name:	SON STR	INGER
DATE:	Municipality:		. ,
Petition/CUP #/Resolution/Ordinance	Amendment/Subject:	RAS OR OS	4 Res 074
☐ Wish to Speak in Support ☐ '	Wish to Speak in Opposition	n	
	Registering in Opposition		or Information Only
1. On this occasion, are you officially r	YES C	NO	
Name, address and telephone number of e	each person or organization  A CB Camms	Corpresh	M
Comments:			
2. Are you being paid for your represe other paid duties for this person or org [If you checked "NO" to the question, STOP If you checked "YES," turn over to the next of the next of the state of the s	ganization?; you need not complete the re	Y	ES D NO
3. Are you an elected official who is ap or for your municipality or other gover [If you checked "YES," to the question, STOD you checked "NO," to the question, go on to	nmental body? P; you need not complete the r		
4. Has or will the person or organization county lobbying activities during the (A reporting period is January to June or from	e current reporting period		ES 📜 NO
5. Do you anticipate making more that supervisors other than at public hearin (Do not count contacts with the County Board)	gs or meetings?	D Y	ES NO seside.)
[If you checked "NO," to questions 4 and 5 a more than 2 contacts at a later date, you mus must also sign this form. If you checked "YE	t then contact the County Cler	k's office to file a form in	ndicating such activity. You
6. If "YES," do you understand that it spends more than \$500 during the curr financial disclosure statement with the [If you checked "NO" please call the County Building, Madison, for more information.]	ent reporting period, you county clerk?	must file a	
Date: 5120	Signatur	1 Jeal	STY IN 11-120
	Print Nam	e OV-DD	PUTITION

## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: EANR Name: Lynn Parins
DATE: Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: DA5-+Re5 674
☐ 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:  Visconsin Energy Conservation Corporation Madison, WI  431 Chomany Price 800-969-9322
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: 6/1/17 Signature 75/10/10/10/10/10/10/10/10/10/10/10/10/10/
Print Name Lyan larins