REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Name:	JOSHVA	KOKHLER	,
DATE: 3 //2//9	Municipality	j •		į.
Petition/CUP #/Resolution/Ordinance	Amendment/Subject:	PHASE	11: 12 6	THER
	Wish to Speak in Oppo Registering in Oppositi	sition on DA	vailable for Info	rmation Only
1. On this occasion, are you officially [If you checked "NO," <u>STOP</u> ; you need not	YES	□ NO		
Name, address and telephone number of	each person or organiza	tion you are repr	esenting:	
INTEGRATY CRAPTING AM	D EXCAMPANT			
· GOS CORUSMAN DR	JUK SCHOFFEC	D, WE	54476	
Comments:				
2. Are you being paid for your repres other paid duties for this person or or [If you checked "NO" to the question, STO! If you checked "YES," turn over to the next	ganization? 3: you need not complete th		I YES	≥ NO
3. Are you an elected official who is a or for your municipality or other gove [If you checked "YES," to the question, STO you checked "NO," to The question, go on to 4. Has or will the person or organizat	rnmental body? P: you need not complete in the next question.]	he rest of this form	YES n except that your	⊠ NO must sign this form. I
on county lobbying activities during the (A reporting period is January to June or from	e current reporting per			Ø 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?	****************	□ YES nich you reside.)	⊠ NO
[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 (Clerk's office to file	e a form indicatin	ever, if you do make g such activity. You
6. If "YES," do you understand that if spends more than \$500 during the currefinancial disclosure statement with the [If you checked "NO" please call the County Building, Madison, for more information.]	ent reporting period, ye	ou must file a	□ YES	□ NO the City-County
Date:	Signa	iture M		
	Print N	ame Josh	Va 14 RAS	P