

MAR 1 thru  
 Meetings During the Month of  
 MARCH 2020

# Dane County Board Supervisor Meeting/Mileage Claim

NAME  
 CHUCK ERICKSON

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.							
3/15/20	✓			2		3/27/20	5:30	✓		LWC
						3/11/20	7:30	✓		700 Commission
						3/28/20	5:30	✓		LWC w/ EAAR
						3/15/20	7:00	✓		LWC, Exec.
						3/12/20	5:30	✓		LWC
						3/9/20	5:30	✓		LWC, Exec.
						3/3/20	7:30	✓	2	700 Commission

RECEIVED  
 3/11/2020

\* Compensation shall not be paid for a second or subsequence 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.

**RETURN TO COUNTY BOARD OFFICE (Room 106b) ON A MONTHLY BASIS**

I hereby certify that the information on the form is true, correct and to the best of my knowledge complies with current Dane county Ordinance.

SIGNATURE: *Chuck Erickson* DATE: 6-30-20

# Dane County Citizen Members Meeting/Mileage Claim

NAME <i>Cynda Solberg</i>				MEETINGS DURING THE MONTH OF <i>March - June 2020</i>	
Day of Month	Meeting Start Time *	CHECK ONE		Mileage	Name of Committee
		Comm.	Sub-Comm.		
<i>3/27</i>	<i>5:30</i>	<input checked="" type="checkbox"/>		<i>-</i>	<i>CDBG</i>
<i>3/31</i>	<i>5:00</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<i>-</i>	<i>CDBG Loan Review + CDBG</i>
<i>5/5</i>	<i>4:30</i>	<input checked="" type="checkbox"/>		<i>-</i>	<i>CDBG</i>
<i>6/15</i>	<i>5:30</i>	<input checked="" type="checkbox"/>		<i>-</i>	<i>CDBG</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.

**RETURN TO COUNTY BOARD OFFICE (Room 106B) 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.	SIGNATURE 	DATE <i>6/24/20</i>
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# Dane County Citizen Members Meeting/Mileage Claim

NAME <i>Stefanie Brouwer</i>				MEETINGS DURING THE MONTH OF <i>March 2020</i>	
Day of Month	Meeting Start Time *	CHECK ONE		Mileage	Name of Committee
		Comm.	Sub-Comm.		
<i>11</i>	<i>5:30</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<i>Park Commission</i>

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**RETURN TO COUNTY BOARD OFFICE (Room 106B) 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.	SIGNATURE <i>Stefanie Brouwer</i>	DATE <i>6/11/20</i>
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# Dane County Citizen Members Meeting/Mileage Claim

NAME <i>Godwin Amegashie</i>			MEETINGS DURING THE MONTH OF <i>2020</i> <i>March, May, June</i>		
Day of Month	Meeting Start Time *	CHECK ONE		Mileage	Name of Committee
		Comm.	Sub-Comm.		
<i>3/31/20</i>	<i>4:30</i>		<input checked="" type="checkbox"/>		<i>Loan Review/CDBG</i>
<i>3/31/20</i>	<i>5:30</i>	<input checked="" type="checkbox"/>			<i>CDBG</i>
<i>5/5/20</i>	<i>5:30</i>	<input checked="" type="checkbox"/>			<i>CDBG</i>
<i>6/15/20</i>	<i>5:30</i>	<input checked="" type="checkbox"/>			<i>CDBG</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.

**RETURN TO COUNTY BOARD OFFICE (Room 106B) 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.	SIGNATURE 	DATE <i>6/15/20</i>
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# Dane County Board Supervisor Meeting/Mileage Claim

NAME **Paul Rusk** Meetings During the Month of **March, April, May**

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.							
5	X			8		11	5:30		6	Airport Comm
1						13	5:30		-	Airport Comm

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**RETURN TO COUNTY BOARD OFFICE (Room 106b) ON A MONTHLY BASIS**

I hereby certify that the information on the form is true, correct and to the best of my knowledge complies with current Dane county Ordinance.	SIGNATURE <div style="font-size: 1.5em; font-family: cursive;">Paul Rusk</div>	DATE <div style="font-size: 1.5em; font-family: cursive;">6-23-20</div>
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