Registration Report

Report Generated: 5/24/2023 15:01

Dane County Zoning 930 9486 5254

			-		
First Name	Last Name	How do you plan on attending the meeting?	What Petition Number or agenda item are you registering for?	Do you support or oppose the agenda item?	Do you want to speak?
Korey	Kahl	Zoom	11940	Support	I do not want to speak, but I am available to answer questions.
Danny	Lochner	Zoom	11941	Support	I do not want to speak, but I am available to answer questions.
david	riesop	Phone	11942	Support	I do not want to speak, but I am available to answer questions.
Keith	Ripp	Phone	11943	Support	I do not want to speak, but I am available to answer questions.
Taylor	Behnke Ripp	Zoom	11943	Support	I do not want to speak, but I am available to answer questions.
Janice & Jesse	Faust	Phone	11944	Support	Yes, I would like to speak.
Sharon	Faust	Zoom	11944	Support	I do not want to speak, but I am available to answer questions.
Howard	Hanson	In-person	11945	Support	I do not want to speak, but I am available to answer questions.
Nick	Petit	In-person	CUP 2594	Support	Yes, I would like to speak.
Meredith	Hughey	Zoom	CUP 2594	Oppose	Yes, I would like to speak.
Sarah	Baumgartner	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Scott and Sue	Turner	Zoom	CUP 2594	Oppose	Yes, I would like to speak.
Joy	Ableman	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Sabrina	Tolley	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Julia	Hunter	Zoom	CUP 2594	Oppose	Yes, I would like to speak.
Kara	Ripley	Zoom	CUP 2594	Oppose	Yes, I would like to speak.
Marci-Rae	Kukula	Zoom	CUP 2594	Oppose	I do not want to speak, but I am available to answer questions.
Michael	Glowacki	Zoom	CUP 2594	Oppose	Yes, I would like to speak.
Lisa	Crane	Zoom	CUP 2594	Oppose	Yes, I would like to speak.
Chawalee	Pochanayon	Zoom	CUP 2594	Oppose	I do not want to speak, but I am available to answer questions.
Amy	Ward	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Michael	Kukula	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Tracy	Thompson	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Mitchell	Shellenberger	Zoom	CUP 2594	Oppose	Yes, I would like to speak.
Jessica	Shellenberger	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Craig	Clauson	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Mitchell	Shellenberger	Zoom	CUP 2594	Oppose	I do not want to speak, but I am available to answer questions.
Michelle	Voeck	Zoom	CUP 2594	Oppose	No, I do not want to speak.
Renee	Lauber	Zoom	Н	Neither Support nor Oppose	No, I do not want to speak.

Committee Name: Dan County Zonin (2LR)our Name: Alan Lund
DATE of Meeting: May 23 2023 Municipality You Reside in: Town of Christiana
Petition/CUP #/Resolution/Ordinance Amendment/Subject: ** 119 42
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
☐ Wish to Register in Support ☐ Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organization you are representing:
Henry Lund 1898 Pleasant DR Cambridge (608) 423-4117
(608) 423-4117
COMMENTS:
 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES NO (If you checked "NO" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go 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? YES NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES"
go to the next question.)
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 July to December.)
5. Do you anticipate making more than two contacts with the 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 do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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?? YES NO (If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr. Blvd., Room 106A for more information.
Date: 5/23/23 Signature: Clan hund
015-151 7/18 Printed Name: A\a_o \ [75]

Committee Name: ZLR Your Name: NICK PLT
DATE of Meeting: 5/23/23 Municipality You Reside in: Blooming Grave
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Z594
Wish to Speak in Support
☐ Wish to Register in Support ☐ Wish to Register in Opposition
Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
TYES NO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organization you are representing:
NICK Petit 715-240-0315
ч
COMMENTS:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this
person or organization? YES NO (If you checked "NO" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go 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? ☐ YES ☐ NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go to the next question.)
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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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?? YES NO (If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: 5/23/23 Signature:
015-151 7/18 Printed Name: NICK Patt

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: Your Name: Buck Sweeney
DATE of Meeting: 5/23/23 Municipality You Reside in: Down when Com-
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2954
Wish to Speak in Support Wish to Speak in Opposition
☐ Wish to Register in Support ☐ Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go 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 other paid duties for this
person or organization? X YES NO (If you checked "NO" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES" go 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? YES NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES go to the next question.)
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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> 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. If you checked "YES" to either question, please continue to the question below. You must als sign this form.)
6. If you answered "YES" to question 5, 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?? YES NO (If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Ji Blvd., Room 106A for more information.
Date: 5/23/27 Signature: Rest M
015-151 7/18 Printed Name: Bul Sucul

Committee Name: ZLR	Name:	KEVIN	McWhite	J
DATE: 5/23/23	Municip	ality: Oce	om wo brown	
Petition/CUP #/Resolution/Ordinar			4	-
■ Wish to Speak in Support□ Registering in Support	☐ Wish to Speak in C☐ Registering in Opp	~ ~	☐ Available for Inform	nation Only
1. On this occasion, are you officia		ganization or		urself?
[If you checked "NO," <u>STOP</u> ; you need	not complete the rest of t			he next question.]
Name, address and telephone number	r of each person or orga	anization you a	re representing: n, Wice Pet	77
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 so	r organization? TOP; you need not comp		□ 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 control of the property of the pro	overnmental body? STOP; you need not com		□ YES	□ NO ust sign this form. If
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reportir	ng period?		□ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County)	earings or meetings?		\square YES	□ 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	u must then contact the Co	ounty Clerk's off	fice to file a 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 c	iod, you must	file a □ YES	□ NO the City-County
Date: 5/23/23	8	Signature 4	Dellon IZEVIN MCM	Sel
		Print Name	KEVIN MCW	head

Committee 1	Name: ZLR	Name	BRIAN	Offma.	~		
DATE:	5/23/23	Name	cipality: Bla	oming ten	Grove	F.	
Petition/CU	P #/Resolution/Ordin	nance Amendment/Su	bject: <u>25</u>	94			
	peak in Support	☐ Wish to Speak in		₩ Availa	hlo for Inform	ention Only	
□ Registerin	ig in Support	☐ Registering in O	pposition	Availa	ble for Inform	ation Only	
		cially representing an YE ed not complete the rest of	S \square	NO			on.]
		per of each person or or		ou are represent	ting:		
BAM	orman	715/316/3	904	8		100	
Comments:			***				
other paid ([If you checke	duties for this person	epresentation or appe or organization? STOP; you need not con the next question.]		E] YES	□ N(0
or for your	municipality or other ed "YES," to the question	no is appearing solely governmental body? n, STOP; you need not come on to the next question.	omplete the res		.□ YES cept that you mi	□ NC ust sign this fo	
on county lo	bbying activities dur	anization you represe ring the current report or from July to December	ting period?.		□ YES		0
supervisors	other than at public	ore than 2 contacts with hearings or meetings; by Board supervisor who	?		☐ YES you reside.)		0
more than 2 c	contacts at a later date, y	and 5 above, <u>STOP</u> ; you you must then contact the ted "YES" to either quest	County Clerk'	s office to file a	form indicating	ver, if you do such activity.	make You
spends more financial dis	e than \$500 during the sclosure statement wi	that if the person or ne current reporting point the county clerk? County Clerk at 266-412 ition.]	period, you m	ust file a	□ YES	□ NO the City-Cour	
Date:	23/23		Signatur	BU			
	1		Print Name	//			

REGISTRATION BEFORE COUNTY COMMITTEE PODRNO					
Committee Name: ZLR Your Name: Isacc Rilans					
DATE of Meeting: 5/23/25 Municipality You Reside in: Mc2150~					
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2599					
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition					
☐ Wish to Register in Support ☐ Wish to Register in Opposition					
Available for Information Only					
1. On this occasion, are you officially representing an organization or a person other than yourself? \[\sum \text{YES} \text{NO} \text{NO} \] (If you checked "NO" \(\text{STOP} \); you do not need to complete the rest of the form. If you checked "YES" go 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 other paid duties for this					
person or organization? YES NO (If you checked "NO" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES go 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? YES NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go to the next question.)					
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 July to December.)					
5. Do you anticipate making more than two contacts with the County Board supervisors other than at publi					
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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)					
6. If you answered "YES" to question 5, 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? ? YES NO					
(If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr., Blvd., Room 106A for more information.					
Date: 1/23/23 Signature:					
015-151 7/18 Printed Name: Tsace Petros					

Committee Name:	Your Name: Judy tatter
DATE of Meeting: 5/23/2023 Municipal	lity You Reside in: Blooming Grove
Petition/CUP #/Resolution/Ordinance Amendment/S	ubject: 2594
☐ Wish to Speak in Support	Wish to Speak in Opposition
☐ Wish to Register in Support	Wish to Register in Opposition
☐ Available	for Information Only
1. On this occasion, are you officially representing VES NO (If you checked "NO" STOP; you do not need to complete question.)	an organization or a person other than yourself? te the rest of the form. If you checked "YES" go to the next
Name, address and telephone number of each person of	r organization you are representing:
*	
COMMENTS:	
2. Are you being paid for your representation or ap	pearing incidental to your other paid duties for this
person or organization? YES NO (If you checked "NO" to the question, STOP; you do not go to the next question.)	need to complete the rest of this form. If you checked "YES",
3. Are you an elected official who is appearing sole	ly on behalf of your office or for your municipality or
other governmental body? ☐ YES ☑ NO (If you checked "YES" to the question, STOP; you do no go to the next question.)	nt need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you repres	sent spend more than \$500 on county lobbying activities
during the current reporting period? YES (A reporting period is January to June, or July to Decem	ber.)
5. Do you anticipate making more than two contact	s with the County Board supervisors other than at public
hearings or meetings? YES NO (Do not count contacts with the County Board supervisor)	r who represents the district in which you reside.)
if you do make more than 2 contacts at a later date, you	?; you do not need to complete the rest of this form. <u>However,</u> must then contact the County Clerk's office to file a form uestion, please continue to the question below. You must also
	erstand that if the person or organization you represent period, you must file a financial disclosure statement
with the County Clerk?? YES NO (If you checked "NO" please call the County Clerk at 266 Blvd., Room 106A for more information.	6-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date: 5/23/2023 Signature:	Gud a Patter
015-151 7/18	Judy A Patter

Committee Name:	Your N	ame:MA#	HEW	Varva	
DATE of Meeting:	Municipality You	Reside in:	McFar	AVO	
Petition/CUP #/Resolution/Ordinance Amendment/Subject:					
☐ Wish to Speak in Suppo	rt	Wish t	o Speak	in Opposition	
☐ Wish to Register in Sup	port	☐ Wish t	o Registe	er in Opposition	
	Available for Inform	mation Only			
1. On this occasion, are you off	icially representing an orga	nization or a p	oerson o	ther than yourself?	
☐ YES NO (If you checked "NO" STOP; you de question.)	o not need to complete the re	st of the form. I	lf you che	ecked "YES" go to the next	
Name, address and telephone num	ber of each person or organiz	zation you are	represen	ting:	
		-			
COMMENTS:	6	-			
2. Are you being paid for your	epresentation or appearing	incidental to	your oth	er paid duties for this	
person or organization? YES (If you checked "NO" to the question go to the next question.)		complete the r	est of this	s form. If you checked "YES",	
3. Are you an elected official wh	o is appearing solely on be	half of your o	ffice or f	or your municipality or	
other governmental body? Y (If you checked "YES" to the question to the next question.)		o complete the	rest of th	is form. If you checked "YES",	
4. Has or will the person or orga	inization you represent spe	nd more than	\$500 on	county lobbying activities	
during the current reporting peri (A reporting period is January to Ju					
5. Do you anticipate making mo	re than two contacts with tl	he County Boa	ard supe	rvisors other than at public	
hearings or meetings? YES (Do not count contacts with the Contacts)	□ NO unty Board supervisor who re	presents the di	istrict in w	hich you reside.)	
(If you checked "NO" to questions of if you do make more than 2 contact indicating such activity. If you check sign this form.)	ts at a later date, you must the	en contact the	County C	Clerk's office to file a form	
6. If you answered "YES" to ques					
with the County Clerk?? YE (If you checked "NO" please call the Blvd., Room 106A for more information	e County Clerk at 266-4121 o	or go to the Clei	rk's office	at 210 Martin Luther King Jr.,	
Date:	Signature:				
015-151 7/18	Printed Name:				

Printed Name:

Committee Name: CUP 2594 Your Name: Barbara C. White
DATE of Meeting: 5/23 2023 Municipality You Reside in: Madison
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
☐ Wish to Register in Support ☑ Wish to Register in Opposition
Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
☐ YES ☐ NO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "YES" go 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 other paid duties for this
person or organization? YES NO (If you checked "NO" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go 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? YES NO (If you checked "YES" to the question, STOP; you do not need to complete the rest of this form. If you checked "YES", go to the next question.)
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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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? ? YES NO
(If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: 5/23/2023 Signature: Bailas little
015-151 7/18 Printed Name: Rachara C labite

	STRATION BEFO	DRE COUNTY CO	MMITTEE
Committee Name: 2011/9)	land lay.	Your Name: We	redith Hughery
DATE of Meeting: 5/23/23		ity You Reside in:	refarland 0
Petition/CUP #/Resolution/Ordi		0 0 0	594
☐ Wish to Speak in Supp	port	☑ Wish t	o Speak in Opposition
☐ Wish to Register in Su	pport	☐ Wish t	o Register in Opposition
	☐ Available	for Information Only	
1. On this occasion, are you on the YES NO (If you checked "NO" STOP; you question.)			person other than yourself? If you checked "YES" go to the next
Name, address and telephone nu	mber of each person o	r organization you are	representing:
	1	ं दर्क	
COMMENTS:		(d)	
2. Are you being paid for you	r representation or ap	pearing incidental to	your other paid duties for this
person or organization? Yell (If you checked "NO" to the quest go to the next question.)		need to complete the r	rest of this form. If you checked "YES",
3. Are you an elected official v	vho is appearing sole	ly on behalf of your o	ffice or for your municipality or
other governmental body? (If you checked "YES" to the question.)		t need to complete the	rest of this form. If you checked "YES"
4. Has or will the person or or	ganization you repres	ent spend more than	\$500 on county lobbying activities
during the current reporting per (A reporting period is January to		□ NO ber.)	
5. Do you anticipate making n	ore than two contact	s with the County Bo	ard supervisors other than at public
hearings or meetings? YES (Do not count contacts with the C		r who represents the d	istrict in which you reside.)
if you do make more than 2 conta	acts at a later date, you	must then contact the	omplete the rest of this form. <u>However,</u> County Clerk's office to file a form he to the question below. You must also
			son or organization you represent a financial disclosure statement
with the County Clerk?? (If you checked "NO" please call Blvd., Room 106A for more inform	the County Clerk at 260 mation.	6-4121 or go to the Cle	rk's office at 210 Martin Luther King Jr., \mathcal{M}
015-151 7/18	Signature: Printed Name:	Merath &	turbout
	i illited Hallie.	0 1700 17	