REGISTRATION BEFORE COUNTY COMMITTEE **Committee Name:** Name: Municipality: Petition/CUP #/Resolution/Ordinance Amendment/Subject: Wish to Speak in Opposition ☐ Wish to Speak in Support ☐ Registering in Opposition ☐ Registering in Support ☐ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? YES [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: **Comments:** 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over 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?..... [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on 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 (A reporting period is January to June or from July to December.) 5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?..... 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 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?..... NO \square YES [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Committee Name:	Name:	BILL	White	
DATE: 3 28 16	Municiį	pality:	ladisar	
Petition/CUP #/Resolution/Ordina	nce Amendment/Subj	ject: <u>347</u>	Frem	D-1
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in C☐ Registering in Opp		☐ Available for Info	ormation Only
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Date: 3/28/16		Signature	DAN F. (:	ute Vite
	i i	rint Name	- WI I W	1011

Committee Name:	Name:	Erv	Carpent	er	
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Petition/CUP #/Resolution/Ordinance Ame	endment/Subje	ect: 3	47		
	n to Speak in Oppostering in Oppo		□ Available	e for Informat	ion Only
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Wisconsin Institution					a Inc.
Comments:					
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6. If "YES," do you understand that if the spends more than \$500 during the current in financial disclosure statement with the count [If you checked "NO" please call the County Clerk Building, Madison, for more information.]	reporting perion ty clerk? at 266-4121 or	od, you mus	st file a	YES m 106A of the	□ NO City-County
Date: 3/28/16		Signature	Erv Car	penter	

Committee Name: Fersance 1 France Name: Jasan Saari DATE: 3/28/16 Municipality:
DATE: 3/28)/6 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 347
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 D NO [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: Adams October Advectising 608-271-7900 1026. Badger Rel Madism, WI 53713
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over 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?
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: Signature
Print Name

Committee Name: Posal & A	Name: 2	ika Monnoe-	Kaye	
DATE: 3/28/16	Municipality:			
Petition/CUP #/Resolution/Ordina	ance Amendment/Subject:	D.	Resken	347
₩ish to Speak in Support Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition		able for Informa	tion Only
1. On this occasion, are you officially ou checked "NO," STOP; you need Name, address and telephone number Madison Museum	YES If not complete the rest of this form The complete the rest	□ NO m. If you checked "You got are represer	YES," go on to the	
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6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Combuilding, Madison, for more information	current reporting period, you the county clerk?	u must file a	□ YES	□ NO e City-County
Date:	Signa	ture		
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Committee Name: Persigne & FINANCe Name: LOREN CANTER
DATE: 3/26/14 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: ADM CASE Keven al
 ✓ Wish to Speak in Support ✓ Wish to Speak in Opposition ✓ Registering in Support ✓ Registering in Opposition ✓ Available for Information Only
Tregistering in support
1. On this occasion, are you officially representing an organization or a person other than yourself? YES D NO [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: Loren Canter 3030 Davbo Dv, MADISM
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?
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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: 3.28//6 Signature SECCT Print Name Lover Campun
Print Name Lover Canten

Committee Name:	Name: _\oc	W MEWE	llams
DATE: 3 38 16	Municipality:		
Petition/CUP #/Resolution/Ordinance Amer		Resolution	347
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	to Speak in Opposition tering in Opposition		r Information Only
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Comments:			
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[If you checked "NO" please call the County Clerk Building, Madison, for more information.]			
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Committee Name: Personal finance Name: (ESER) OLOBES DATE: 3-5-8-16 Municipality: Petition/CUP #/Resolution/Ordinance Amendment/Subject: RES 3 47
DATE: 3-28-16 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: RES 3 47
☐ 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: Sherman Veighborhood Association City of Madizin W/ 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?
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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: 3-28-16 Signature Des 1885 1886 Print Name Occ 1888 1886