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REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: PAF Name: BRIAN STANDING
DATE: 8/29/2016 Municipality: CITY OF MADISON
Petition/CUP #/Resolution/Ordinance Amendment/Subject: ACTION TEM 267
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?
[If you checked "NO," <u>STOP</u> ; 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:
PRIENDS OF SID DOYUM, (NC. (608) 358-6567
FRIENDS DE SID BOYUM, (NC. (608) 358-6567 C/O THE HOPS MUSEUM, E. WASHINGTON AVE. MADISON, W/ 53704
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? ☐ YES ☐ NO (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?
[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 times go on to the next question.]
6. If "YES," do you understand that if the person or organization of the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: Signature
Print Name

## REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Municipality: Petition/CUP #/Resolution/Ordinance Amendment/Subject: 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? $\square$ 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: Developmental Disabilities (valition of Dane Cour 22 N. 2nd St. Madison 53704 608.212.7188 **Comments:** 2. Are you being paid for your representation or appearing incidental to your [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?...... YES [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?...... \( \square\) 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?..... (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; 6 of theed 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" pression 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 [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.]

## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: FERSONNE & FINANCE Name: ETER Municipality: Petition/CUP #/Resolution/Ordinance Amendment/Subject: 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?  $\square$  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: 15 consin Working Families Party 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 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?...... YES [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?...... \( \square\) 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?..... W YES  $\square$  NO [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.]

REGISTRATION BEFORE COUNTY COMMITTEE Name: Committee Name: DATE: Municipality: \_ Petition/CUP #/Resolution/Ordinance Amendment/Subject: 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 □ 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: Comments: 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ...... NO [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?...... YES NO [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?..... NO 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?..... (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 need not complete the est 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 reported 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?...... 

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.] Signature\_

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## REGISTRATION BEFORE COUNTY COMMITTEE Name: BRIAN STANDING Municipality: CITY OF MADISON Committee Name: Petition/CUP #/Resolution/Ordinance Amendment/Subject: OA 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 [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 NO. 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?...... YES [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 □ NO (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, <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 Community of levels 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.] DANE COUNTY CONTROLLER 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?...... [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.]

Print Name

REGISTRATION BEFORE COUNTY CO	OMMITZEE	
Committee Name: Pers France Name: Vent	all Yold	
DATE: 8/29/2014 Municipality:	loca -	
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 0931		
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐	l Available for Information Only	
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Date: 8-29- 2016 Signature Print Name	Veil Rain For	