,	EGISTRATION BEFORE COUNTY BOARD
DATE: 9/15/16	Name: Valentine OLuchi Municipality:
Item #/Petition/CUP # or Subject:	Municipality:
☐ Wish to Speak in Support☐ Registering in Support☐	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
1. On this occasion, are you officially [If you checked "NO," <u>STOP</u> ; you need r	representing an organization or a person other than yourself? VYES NO ot complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of REM Wisco	f each person or organization you are representing:
1el: 608-276	nsin line Highway Ste. 100 Madison WI 537.
Comments:	
person or organization?	resentation or appearing incidental to your other paid duties for this
other governmental body?	is appearing solely on behalf of your office or for your municipality or ☐YES☐NO n, <u>STOP;</u> you need not complete the rest of this form except that you must sign a question, go on to the next question.]
- 발 - 전 - 기가입	zation you represent spend more than \$500 on county lobbying activities I?
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YESty Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if t a later date, you must then contact the County Clerk's office to file a form so sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	at if the person or organization you represent spends more than \$500 l, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more i	□YES□NO County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- nformation.]
Date:	Signature

Print Name __

DATE: Name: A TAL DAGRET
Item #/Petition/CUP # or Subject: Municipality:
Ihm Sin Budyt
 □ Wish to Speak in Support □ 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? ———————————————————————————————————
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?
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?
☐ YES□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.]
Date:

DATE: 1-15-16	Name: Love weber
Item #/Petition/CUP # or Subject:	Municipality: Modum
Jana Sun Graget	÷
□ Wish to Speak in Support Registering in Support १८५ (८७६६६६८)	 ☐ Wish to Speak in Opposition ☐ 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 i	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	of each person or organization you are representing:
Comments:	
person or organization?	presentation or appearing incidental to your other paid duties for this YES
this form. If you checked "NO," to the thing of the thing	ne question, go on to the next question.] ilization you represent spend more than \$500 on county lobbying activities d?□YES□NO
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form lso sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting perio	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date:	Print Name Cole plbu
	Print Name Cole palon

DATE: 9-14-16	Name: Kathleen Schoepp	
Item #/Petition/CUP # or Subject:	Municipality: Warrakee	
□ Wish to Speak in Support ▼Registering in Support	 ☐ Wish to Speak in Opposition ☐ 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 I	oot complete the rest of this form. If you checked "YES," go on to the next question	ı.]
Name, address and telephone number of	f each person or organization you are representing:	
Comments: New Forces	outside of living wage increase.	
person or organization?	resentation or appearing incidental to your other paid duties for this	ĺ
other governmental body?	is appearing solely on behalf of your office or for your municipality or□YES□NO n, <u>STOP</u> ; you need not complete the rest of this form except that you must e question, go on to the next question.])
	ization you represent spend more than \$500 on county lobbying activit d?□YES□NO e or from July to December.)	
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES NO sty Board supervisor who represents the district in which you reside.)	ĺ
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, t a later date, you must then contact the County Clerk's office to file a form so sign this form. If you checked "YES" to either question at this time, go or	
during the current reporting perio	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?	
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Conformation.]	ity-
Date:	Signature	
	Print Name	

DATE: 9/15/16	Name: Dale Younger Municipality: ///aduSO//
Item #/Petition/CUP # or Subject:	Municipality: ///(aduSOn
□ Wish to Speak in Support ☑ Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
	ly 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:
Comments: Please Support	t an increase in funding for DD & nunlty Services. COLA
2. Are you being paid for your re person or organization?	presentation or appearing incidental to your other paid duties for this
other governmental body? [If you checked "YES," to the question	o is appearing solely on behalf of your office or for your municipality or
during the current reporting period	nization you represent spend more than \$500 on county lobbying activities od?
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public
you do make more than 2 contacts	4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form also sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting perio	hat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	□ YES□ NO © County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- information.]
Date: 9-15-16	Signature Paulform
	Division of Mallandia

DATE: 9-15-16	Name: David Stowell
Item #/Petition/CUP # or Subject:	Municipality: Madeson
□ Wish to Speak in Support Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
1. On this occasion, are you officially	y 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:
Comments: Please Suppor	f a :DD funding Increase & COLA
11	presentation or appearing incidental to your other paid duties for this
person or organization?	□YES□NO
[If you checked "NO" to the question If you checked "YES," continue to the If you checked "YES," continue to the If you checked "NO" to the question in the If you checked "YES," continue to the If you checked "YES," continue to If you checked "YES," continue to	n, <u>STOP;</u> you need not complete the rest of this form. he 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
this form. If you checked "NO," to the	on, <u>STOP;</u> you need not complete the rest of this form except that you must sign ne question, go on to the next question.]
	nization you represent spend more than \$500 on county lobbying activities
during the current reporting perio (A reporting period is January to Jur	od?
	e than 2 contacts with County Board supervisors other than at public
hearings or meetings?	□YES□NO
	nty Board supervisor who represents the district in which you reside.)
	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form
indicating such activity. You must a	lso sign this form. If you checked "YES" to either question at this time, go on to
the next question.]	
	nat if the person or organization you represent spends more than \$500 pd, you must file a financial disclosure statement with the county clerk?
	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
County Building, Madison, for more	### #### 10 ##########################
Date: 9-15-16	Signature David Stavell
Date:	Signature 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Print Name David Stowell

DATE: 9-15-16	Name: James Ruhle
Item #/Petition/CUP # or Subject:	Name: <u>James Ruhle</u> Municipality: <u>Madeson</u>
□ Wish to Speak in Support Registering in Support	 ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," STOP; you need	y representing an organization or a person other than yourself? ———————————————————————————————————
Comments: I support o	a COLA for DD + addl. Funding.
person or organization?	presentation or appearing incidental to your other paid duties for this
other governmental body?	o is appearing solely on behalf of your office or for your municipality or
	nization you represent spend more than \$500 on county lobbying activities od?
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public
you do make more than 2 contacts a	A and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form also sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	nat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk? ———————————————————————————————————
Date: 9-13-14	Signature X Print Name

DATE:	Name: LORI Mettel	
Item #/Petition/CUP # or Subject:	Municipality: Malletm, WI	
00 System budget		
,		
☐ Wish to Speak in Support ☐ Registering in Support ○ (0)	 ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only 	
1. On this occasion, are you officiall	y 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:	
Comments: Please support a leadership on \$15 m	oLA and wage compression as possible, Thanks for ninimum wage!	
2. Are you being paid for your reperson or organization?	presentation or appearing incidental to your other paid duties for this□YES□NO n, <u>STOP</u> ; you need not complete the rest of this form.	
other governmental body?[If you checked "YES," to the question	o is appearing solely on behalf of your office or for your municipality or	
	nization you represent spend more than \$500 on county lobbying activities od?	
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public	
[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.]		
during the current reporting period	nat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?	
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]	
Date: <u>04/15/16</u>	Signature LOR's Mettel Print Name LOR's Mettel	
***	Print Name LORi Mettel	

DATE: 9/15/16	Name: Josh Mersberger
Item #/Petition/CUP # or Subject:	Municipality:
	·
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Available for Information Only
On this occasion, are you officially	y representing an organization or a person other than yourself? YYES □NO not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	of each person or organization you are representing:
Tom snell 608-877-0	1515 Community Living Connections
Carl Hitch cock 608-8	77-0515 Community Living Connection
James Sheets 608-87	17.0515 Commity Living Connecation 5 Elroy Hitchcock 877.0208 ntitly Living Connections
Comments. Comment	ntity Lin Connections
Against Budget cut	ls .
person or organization?	
other governmental body?[If you checked "YES," to the question	is appearing solely on behalf of your office or for your municipality or
	lization you represent spend more than \$500 on county lobbying activities d?□YESਲ਼ੑNO ne or from July to December.)
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public YESXNO nty Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts a	and 5 above, <u>STOP;</u> you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form also sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?
	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date: 9/15/16	Print Name Josh Messberge
	Print Name Josh Meszbegy

DATE: 9-15-16	Name: Hngie Wyse Reeser
Item #/Petition/CUP # or Subject:	Name: Municipality: Madison
□ Wish to Speak in Support	 ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially	representing an organization or a person other than yourself? ———————————————————————————————————
Name, address and telephone number of	of each person or organization you are representing:
Comments: In additions	to no chance in budget est a proposal of increase to the D.D. budg
I mand regu	est a proposal of incheuse to the D.D. budg
person or organization?	oresentation or appearing incidental to your other paid duties for this□YES□NO
[If you checked "NO" to the question If you checked "YES," continue to the	, <u>STOP</u> ; you need not complete the rest of this form.
	is appearing solely on behalf of your office or for your municipality or
other governmental body?	□YES□NO
	on, <u>STOP</u> ; you need not complete the rest of this form except that you must sign e question, go on to the next question.]
4. Has or will the person or organ	ization you represent spend more than \$500 on county lobbying activities
during the current reporting period	d?□YES□NO
(A reporting period is January to Jun	
	than 2 contacts with County Board supervisors other than at public
	nty Board supervisor who represents the district in which you reside.)
	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if
	at a later date, you must then contact the County Clerk's office to file a form lso sign this form. If you checked "YES" to either question at this time, go on to
the next question.]	
during the current reporting period	at if the person or organization you represent spends more than \$500 d, 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	ntormation.]
Date: 94516	Signature Myn Overlow Page 6
	And Do

DATE: 9/15/16	Name:	Ryan B	radelich
Item #/Petition/CUP # or Subject:	Municipalit	y:	radetich
☐ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Oppo☐ Registering in Opposition		☐ Available for Information Only
On this occasion, are you officially	/ representing an organizat	ion or a pers	on other than yourself?
[If you checked "NO," <u>STOP;</u> you need i	not complete the rest of this f	orm. If you cl	Pecked "YES," go on to the next question.]
Name, address and telephone number of	of each person or organization	n you are repi	resenting:
Lyan Bradishch			
4319 Lijfraled			
Ladion W S3711			
439 Liphald. Ladion, W 53711 Comments: Please apport commity seri	an increase in fi	nding for	- DD ad other
community seri	ves.		
[If you checked "NO" to the question If you checked "YES," continue to the state of	n, <u>STOP;</u> you need not com the next question.] is appearing solely on b	nplete the res	□YES□NO st of this form. ur office or for your municipality or
[If you checked "YES," to the question this form. If you checked "NO," to the	on, <u>STOP</u> ; you need not co	omplete the r	□YES□NO rest of this form except that you must sig]
4. Has or will the person or organ during the current reporting perio (A reporting period is January to Jur	d?		nan \$500 on county lobbying activitie □YES□NO
5. Do you anticipate making more hearings or meetings?(Do not count contacts with the Count			YES NO
you do make more than 2 contacts a	at a later date, you must the	en contact th	nplete the rest of this form. However, if ne County Clerk's office to file a form S" to either question at this time, go on to
6. If "YES," do you understand the during the current reporting period	d, you must file a financi	ial disclosur	e statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121	or go to the	□YES□NO Clerk's office at Room 106A of the City-
Date: 9/15/10	Signature		
	Print Name	Fran J	Bradation

DATE: 9/15/16	Name: Scott Strong
Item #/Petition/CUP # or Subject:	Name: Scott Strong Municipality: Madison / Dane County
☐ Wish to Speak in Support **Registering in Support	☐ Wish to Speak in Opposition ☐ 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 r	TYES □NO not complete the rest of this form. If you checked "YES," go on to the next question.]
	of each person or organization you are representing:
Child Youth & Family	hts
Child Youth & Family	y Consortium
Comments: Registering in for Gost of l	Support of an addition to Human Services budget living (COLA) for furchased services
person or organization?	, <u>STOP</u> ; you need not complete the rest of this form.
other governmental body?[If you checked "YES," to the question	is appearing solely on behalf of your office or for your municipality or
	ization you represent spend more than \$500 on county lobbying activities d?□YES□NO e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if a later date, you must then contact the County Clerk's office to file a form so sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?
County Building, Madison, for more i	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date: 9/15/16	Signature Signature Signature

9/15/1/
DATE: 9/15/6 Name: HASSAN DILIB Item #/Petition/CUP # or Subject: COMMUNITY SERVICES A DULT SUPPOR SERVICES
Item #/Petition/CUP # or Subject: Municipality: IM IT 0/50 A
COMMUNITY SERVICES HOULD SUPPOR SERVICES
 □ Wish to Speak in Support □ 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
Name, address and telephone number of each person or organization you are representing: UCPOFGREATER DANT COUNTS
Comments: TAM IN SUPBORT OF OHMUNI BERVICES BUDGET. 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?□YES
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?□YES
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?
□YES□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.]
Date: 9/15/16 Signature AAM Print Name HAGGAN DILIB
Print Name HASSAN DILL

DATE: 9/15/2016	Name:	Ashlee	1 HOSEmany)
Item #/Petition/CUP # or Subject:	Municipa	ılity:	(
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in Op☐ Registering in Oppos		☐ Available for Information	on Only
1. On this occasion, are you officially	representing an organiz	ation or a pers	on other than yourself?	-110
[If you checked "NO," <u>STOP</u> ; you need n	ot complete the rest of this	s form. If you ch	ecked "YES," go on to the n	next question.]
Name, address and telephone number of MadSon Area				É
Comments:				
2. Are you being paid for your repperson or organization?	STOP; you need not coe next question.]	omplete the res	t of this form.	-
3. Are you an elected official who other governmental body?	n, <u>STOP</u> ; you need not	complete the re	□YES est of this form except that	
4. Has or will the person or organical during the current reporting period (A reporting period is January to June	d?			
5. Do you anticipate making more hearings or meetings?(Do not count contacts with the Cour			YES	□NO
[If you checked "NO," to questions 4 you do make more than 2 contacts a indicating such activity. You must all the next question.]	t a later date, you must	then contact th	e County Clerk's office to	file a form
6. If "YES," do you understand the during the current reporting period	d, you must file a finan	ncial disclosur	e statement with the co	unty clerk?
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-412	21 or go to the	Clerk's office at Room 10	16A of the City-
Date:	Signatu	re		
	Print Na	me	0:	

MX

DATE: 9/15/16	Name: HANNA FILMA Municipality: MADISM
Item #/Petition/CUP # or Subject:	Municipality: MAISON
☐ Wish to Speak in Support ☐ Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
1. On this occasion, are you officiall	ly representing an organization or a person other than yourself?
[If you checked "NO," STOP; you need	not complete the rest of this form. If you checked "YES," go on to the next question.]
	of each person or organization you are representing:
	1 1 1 CONTROL PHYDIUS
Comments: Please alloca	Le any expected human senices surplus P.OS, agency COLA increase
forward a	P.OS, agency COLA increase
person or organization?	n, <u>STOP;</u> you need not complete the rest of this form.
	o is appearing solely on behalf of your office or for your municipality or
[If you checked "YES," to the questi	□YES□NO ion, <u>STOP</u> ; you need not complete the rest of this form except that you must sign he question, go on to the next question.]
	nization you represent spend more than \$500 on county lobbying activities od?
hearings or meetings?	re than 2 contacts with County Board supervisors other than at public YES NO unty Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts	4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form also sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	hat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?
	Occupied County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- information 1
Date: 9 15 16	Signature Hannah Hannah

DATE: 9/15/16	Name: Devar
Item #/Petition/CUP # or Subject:	Municipality: Manison
□ Wish to Speak in Support ເ_Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially	y 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:
The Table Blood	WAS A \$6.24 MILLION BOOGET SURPLUS IN HUMBU
Comments: SCRUKES PLEA	THE PURCHASE OF SERVICE AGENGIES.
person or organization?	presentation or appearing incidental to your other paid duties for this
	is appearing solely on behalf of your office or for your municipality or
[If you checked "YES," to the question	on, <u>STOP</u> ; you need not complete the rest of this form except that you must sign ne question, go on to the next question.]
	nization you represent spend more than \$500 on county lobbying activities and?
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form lso sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	nat if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date:	Signature
	Print Name

REGISTRATION BEFORE COUNTY BOARD
DATE: 9/14/16 Name: Brood Schloug S
DATE: 9/14/16 Name: Brad Schloug S Municipality: Mad 200
☐ 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:
Comments: Registering in support of a COLA for POS poundes
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 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?
[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.]
Date: 9/4/16 Signature RMM MM Print Name Road Schoolfh
Print Name Frod Schlough

DATE: 9/15/16	Name:	Nicole Harp
Item #/Petition/CUP # or Subject:	Municipality: _	J
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in Oppositio☐ Registering in Opposition	Available for Information Only
1. On this occasion, are you officially [If you checked "NO," <u>STOP;</u> you need r	representing an organization of complete the rest of this form.	or a person other than yourself? VES □NO If you checked "YES," go on to the next question.]
Name, address and telephone number of Nicole Harp — 9	f each person or organization you ahala House	u are representing:
\cap	nadison, WI	53783
[If you checked "NO" to the question, If you checked "YES," continue to the state of the state o	, <u>STOP;</u> you need not complet ne next question.] is appearing solely on beha nn, <u>STOP</u> ; you need not compl	If of your office or for your municipality or □YESXNO lete the rest of this form except that you must sign
4. Has or will the person or organ during the current reporting period (A reporting period is January to June	d?	more than \$500 on county lobbying activities □YESXNO
hearings or meetings?	***************************************	y Board supervisors other than at public ☐ YESNO esents the district in which you reside.)
you do make more than 2 contacts a	t a later date, you must then c	d not complete the rest of this form. However, if ontact the County Clerk's office to file a form sed "YES" to either question at this time, go on to
during the current reporting period	d, you must file a financial d	on you represent spends more than \$500 isclosure statement with the county clerk?□YES□NO
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-4121 or g	to to the Clerk's office at Room 106A of the City-
Date: 9/15/16	Signature Print Name	Nicote J. Harp

DATE: 09.15.2014	Name: Lynn BRADY
Item #/Petition/CUP # or Subject:	Name: Lynn BRADY Municipality: Madison
,	- Here in support of COLA -
☐ Wish to Speak in Support☐ Registering in Support	 □ Wish to Speak in Opposition □ 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 r	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	of each person or organization you are representing:
	5
-	
Comments:	
[If you checked "NO" to the question of you checked "YES," continue to the state of	is appearing solely on behalf of your office or for your municipality or YES
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if a later date, you must then contact the County Clerk's office to file a form so sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date:	Signature
	Print Name

DATE: Name: Steve Chappell Name: Municipality: Madison, Dam County
DATE: 9-15-16 Name: Steve Chappell
Item #/Petition/CUP # or Subject: Municipality: Madison Dam County
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? ———————————————————————————————————
Name, address and telephone number of each person or organization you are representing:
employees of Jarney Mental Health Center.
The state of state of the state
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?
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?
[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.]
Date: 9-15-16 Signature
Date: 9-15-16 Signature Steve Chappell Print Name

DATE: 9/5/16	Name: Jesse Kaye
Item #/Petition/CUP # or Subject:	Name: Jesse Kaye Municipality: Dane
□ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
	y representing an organization or a person other than yourself? ———————————————————————————————————
	not complete the rest of this form. If you checked "YES," go on to the next question.] of each person or organization you are representing:
Comments: registering	in support of a colA.
person or organization?	oresentation or appearing incidental to your other paid duties for this
other governmental body?	is appearing solely on behalf of your office or for your municipality or YESNO on, <u>STOP</u> ; you need not complete the rest of this form except that you must sign are question, go on to the next question.]
during the current reporting period	d?□YESNO ne or from July to December.)
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public YES
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form lso sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk? □YES□NO
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 9/17/6	Signature Print Name Jesse Kaye
	Print Name <u>Jesse Kaye</u>

DATE: 9/15/16	Name: Dani Rischall
Item #/Petition/CUP # or Subject:	Municipality: Dayl
□ Wish to Speak in Support Registering in Support	 ☐ Wish to Speak in Opposition ☐ 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 r	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	of each person or organization you are representing:
Chrysalis	
1342 Devely Ct.	
madiny w 1370	3
	in support of a colA.
2. Are you being paid for your repperson or organization?	resentation or appearing incidental to your other paid duties for this□YESNO,□YESNO
other governmental body?	is appearing solely on behalf of your office or for your municipality or ———————————————————————————————————
during the current reporting period	ization you represent spend more than \$500 on county lobbying activities d?□YESNO e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if it a later date, you must then contact the County Clerk's office to file a form so sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?□YES□NO
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date: 9 15 6	Signature Dan & Rischall
	Print Name Dani Rischall

REGISTRATION BEFORE COUNTY BOARD
DATE: 7/15 //6 Name: 18/15/WC/
Item #/Petition/CUP # or Subject: Municipality: UENUM
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? ———————————————————————————————————
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?
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? □YES□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.]
Date: 7/5/6 Signature Print Name Super

F	EGISTRATION BEFORE COUNTY BOARD
DATE: 9/15/2016	Name: Dennis + Mary Delaul Municipality: Fitchburg WI
Item #/Petition/CUP # or Subject:	Municipality: 1-1-40 NB WIS COL
☐ Wish to Speak in Support☒ Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
	representing an organization or a person other than yourself?
Name, address and telephone number of	f each person or organization you are representing:
Supporting Sn Ser	eces + Programs in fitchburg & Dane Cone For Such programs.
Comments:	for sucception name.
Commonto.	
person or organization?	resentation or appearing incidental to your other paid duties for this YES
other governmental body?	is appearing solely on behalf of your office or for your municipality or ———————————————————————————————————
	ization you represent spend more than \$500 on county lobbying activities d?□YES□NO e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YESNO Noty Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if it a later date, you must then contact the County Clerk's office to file a form lso sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting perio	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 9/15/0014	Print Name _ Maky & DiVaci

DATE: 9/15/2016 Nam	e: Mary & Brown icipality: City of Madison
Item #/Petition/CUP # or Subject: Muni	cipality: City of Madison
	- V
☐ Wish to Speak in Support ☐ Wish to Speak in	
1. On this occasion, are you officially representing an org	anization or a person other than yourself?
[If you checked "NO," <u>STOP</u> ; you need not complete the rest of	of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organ	nization you are representing:
Jaack-you got the user	Lease! Derives apprecent it
Comments:	
this form. If you checked "NO," to the question, go on to	y on behalf of your office or for your municipality or NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> you do make more than 2 contacts at a later date, you m	; you need not complete the rest of this form. However, if
6. If "YES," do you understand that if the person or during the current reporting period, you must file a fi	
[If you checked "NO" please call the County Clerk at 266 County Building, Madison, for more information.]	6-4121 or go to the Clerk's office at Room 106A of the City-
Date: 9/15/2816 Sign	nature Mary R. Brown Name MARY E. BROWN

DATE:	9-15-11	Name:	ind a	brien
Item #/Peti	tion/CUP # or Subject:	Municipality:		
The second secon	Speak in Support ing in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition		☐ Available for Information Only
		y representing an organization		son other than yourself? YES □NO thecked "YES," go on to the next question.]
en ex		of each person or organization y		-
Del	- crest Area Com	munity and Senior	Cent.	ef
		O		
Comments	S:			
person or [If you ched	organization?	n, <u>STOP;</u> you need not comple		to your other paid duties for this □YES□NO st of this form.
other gove [If you ched	ernmental body? cked "YES," to the questi		olete the r	ur office or for your municipality or YES NO rest of this form except that you must sign
during the	current reporting perio			nan \$500 on county lobbying activities □YES□NO
hearings o	or meetings?			supervisors other than at public PES NO ne district in which you reside.)
you do mai	ke more than 2 contacts a such activity. You must a	at a later date, you must then	contact th	mplete the rest of this form. However, if ne County Clerk's office to file a form S" to either question at this time, go on to
during the	current reporting perio	d, you must file a financial	disclosu	represent spends more than \$500 re statement with the county clerk?
[If you ched	cked "NO" please call the ilding, Madison, for more	County Clerk at 266-4121 or	go to the	□ YES□ NO Clerk's office at Room 106A of the City-
Date:		Signature		

DATE: 9-15-16	Name: Alison Koelsch
Item #/Petition/CUP # or Subject:	Municipality: <u>Oregon</u>
☐ Wish to Speak in Support ☑ Registering in Support	 ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
On this occasion, are you officially	y representing an organization or a person other than yourself?
	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:
Oregon Area Senior Ce	enter RSVP of Dane Co.
219 Parkst.	nter RSVP of Dane Co. 517 N. Segoe Rd #300 Madism, WI 53575
Oregon, WI 53575	Madism, WI 53575
Comments: I'm very grates	the for Dane County's on-going support for the focal in particular) and RSVP of Pane. Co.
points (Oregon	In particular) and KSVP of Pane. Co.
person or organization?	presentation or appearing incidental to your other paid duties for this YES
	nization you represent spend more than \$500 on county lobbying activities od?□YES
hearings or meetings?(Do not count contacts with the Cou [If you checked "NO," to questions 4 you do make more than 2 contacts a	e than 2 contacts with County Board supervisors other than at public YES
the next question.] 6. If "YES," do you understand the	also sign this form. If you checked "YES" to either question at this time, go on to nat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?
***************************************	□ YES□ NO • County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date:	Signature
	Print Name

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/QUP # or Subject: ☐ Wish to Speak in Opposition ☐ Wish to Speak in Support ★ 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," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next guestion.] 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? VES ------- NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.] 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or [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 (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 (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? [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.]

DATE: 9-15-16	Name:	Dynn.	Jorshaup 1+. Idace &
Item #/Petition/CUP # or Subject:	Municipality:	0,11 W	2+. Idacel
A CONTRACTOR OF THE PROPERTY O	□ Wish to Speak in Opposition□ Registering in Opposition		ble for Information Only
1. On this occasion, are you officially [If you checked "NO," STOP; you need no			
Name, address and telephone number of S. W.	each person or organization you have Outr		
comments: Thank y	managerner	N COM	inued supportrition progra
2. Are you being paid for your representation?	esentation or appearing in STOP; you need not comple	cidental to your o	other paid duties for this □YES\⋈NO
3. Are you an elected official who i other governmental body?	n, <u>STOP</u> ; you need not comp	lete the rest of this	
4. Has or will the person or organized during the current reporting period (A reporting period is January to June	?		□YES\\NO
5. Do you anticipate making more hearings or meetings? (Do not count contacts with the Count	han 2 contacts with Count y Board supervisor who repr	y Board supervis	ors other than at public □YESNO in which you reside.)
[If you checked "NO," to questions 4 a you do make more than 2 contacts at indicating such activity. You must als the next question.]	a later date, you must then d	contact the County	Clerk's office to file a form
6. If "YES," do you understand tha during the current reporting period	, you must file a financial d	lisclosure statem	ent with the county clerk?
[If you checked "NO" please call the C County Building, Madison, for more in	County Clerk at 266-4121 or g	go to the Clerk's of	fice at Room 106A of the City-
Date: 9 - 15 - 16	Signature	Sym Henn	Jors houp Forshoup
			1