DATE: 9/15/16	Name: Ellen Voker	
Item #/Petition/CUP # or Subject:	Municipality: Tane	_
□ 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?	
	each person or organization you are representing:	
Rise up Inc		_
1008-237-17-10		
Comments: Please Supp	irl an increase in funding for DD and lity Services.	
Are you being paid for your rep person or organization?	resentation or appearing incidental to your other paid duties for this□YES□ <u>STOP</u> ; you need not complete the rest of this form.	,
other governmental body?[If you checked "YES," to the question	s appearing solely on behalf of your office or for your municipality or	gn
during the current reporting period	zation you represent spend more than \$500 on county lobbying activitie?	S
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YESNO y 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, it a later date, you must then contact the County Clerk's office to file a form o sign this form. If you checked "YES" to either question at this time, go on t	
during the current reporting period	t if the person or organization you represent spends more than \$500, you must file a financial disclosure statement with the county clerk?	
[If you checked "NO" please call the County Building, Madison, for more in	□ 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 Signature	
	Signature Ellen Voken	

DATE: 9/15/16	Name:	
Item #/Petition/CUP # or Subject:	Name: JACob Municipality: Fitchbu	rg,
□ Wish to Speak in Support X Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Ava 	ailable for Information Only
1. On this occasion, are you officially [If you checked "NO," STOP; you need to	representing an organization or a person other	er than yourself? □NO "YES," go on to the next question.]
	f each person or organization you are representir	
Comments: Plant Sypurt Common 2. Are you being paid for your rep	an increase in Funding Suc By Services resentation or appearing incidental to you	DD And Otter
person or organization?	STOP; you need not complete the rest of the	
other governmental body?[If you checked "YES," to the question	is appearing solely on behalf of your officent, strong solely on behalf of your officent, strong solely on behalf of your officent, strong solely on the next question.	□YES□NO
during the current reporting period	ization you represent spend more than \$5 d?e or from July to December.)	
hearings or meetings?	than 2 contacts with County Board super	□YES□NO
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete t a later date, you must then contact the Cou so sign this form. If you checked "YES" to eit	nty Clerk's office to file a form
during the current reporting period	at if the person or organization you repres d, you must file a financial disclosure state	ement 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 nformation.]	office at Room 106A of the City-
Date: 9/15/16	Signature July	Zzalinek Bluolke.
	Print Name JACOb 8	iAlwolke.

DATE: 9/15/16	Municipality:
Item #/Petition/CUP # or Subject:	Municipality: Stockyof, UI
□ 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? □YES⊠NO
[If you checked "NO," <u>STOP;</u> you need n	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number o	of each person or organization you are representing:
Comments:	
person or organization?	is appearing solely on behalf of your office or for your municipality or NES
hearings or meetings?(Do not count contacts with the Count	TYES'≯NO Tyes only 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 d, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more in	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 9/15/10	Signature Jan Print Name Soni Proush

DATE: 9/15/16 Name: Elizabeth Duffer
Item #/Petition/CUP # or Subject: 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 each person or organization you are representing: Support the budget as well as COLA.
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?
Date: 9/15/16 Signature Elizabeth Duffey Print Name Elizabeth Duffey

REGISTRATION BEFORE COUNTY BOARD
DATE: Name: Lynnea Riverse
Item #/Petition/CUP # or Subject: Municipality: Municipality:
thrasovies DD Suget
☐ 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?
Name, address and telephone number of each person or organization you are representing: These supports in the ase in funding for SDD supports—this is so graffy needed + will make a direct impact on many peoples lives.
CSDD supports - this is so gratly needed + will make a
(direct impact on many people's lives.
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 Mrs. Viscon Print Name Lynned R. Nielsen
Print Name Lynned R. Nielsen

DATE: 7/15/16	Name: Late Draf
Item #/Petition/CUP # or Subject:	Municipality: Madison - C: ty
2017 HS BUDGET	
☐ Wish to Speak in Support ☐ Wish to S	Speak in Opposition
	ng in Opposition Available for Information Only
1. On this occasion, are you officially representin	g an organization or a person other than yourself? □NO
[If you checked "NO," STOP; you need not complete to	he 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:
increase Euros	for com. services
	Thank you
Comments:	
Comments.	
2. Are you being paid for your representation person or organization?	William In The Investment of the Control of the Con
ii you checked TES, continue to the flext ques	ion.j
	g solely on behalf of your office or for your municipality or □YES□NO
	ou need not complete the rest of this form except that you must sign
	represent spend more than \$500 on county lobbying activities
hearings or meetings?	tacts with County Board supervisors other than at public YESNO pervisor who represents the district in which you reside.)
you do make more than 2 contacts at a later date	e, <u>STOP</u> ; you need not complete the rest of this form. However, if e, you must then contact the County Clerk's office to file a form form. If you checked "YES" to either question at this time, go on to
during the current reporting period, you must	son or organization you represent spends more than \$500 file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clert County Building, Madison, for more information.]	k at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date:	Signature Kall
	Signature Kate Graf

REGISTRATIO	N BEFORE COUNTY BOARD
DATE: 9-15-16	Name: Colette F Cottoin
Item #/Petition/CUP # or Subject:	Municipality: Mad 15017
	eak in Opposition ☐ Available for Information Only
On this occasion, are you officially representing [If you checked "NO," <u>STOP</u> ; you need not complete the	an organization or a person other than yourself? ———————————————————————————————————
Name, address and telephone number of each person of	or organization you are representing:
I support AAA (Area Age,	nay on Aging budget which
itichdes () Case aguit !!	tyram 2) Volunteet, Guardianshy
Kep Payee 3) Cyltolal Dive	tsity Program 9 special
Comments:	for your continued funding
	or appearing incidental to your other paid duties for this
person or organization?	need not complete the rest of this form.
other governmental body?	solely on behalf of your office or for your municipality or PYES
	epresent spend more than \$500 on county lobbying activities
hearings or meetings?	acts with County Board supervisors other than at public YES
you do make more than 2 contacts at a later date,	<u>STOP</u> ; you need not complete the rest of this form. However, if you must then contact the County Clerk's office to file a form rm. If you checked "YES" to either question at this time, go on to
during the current reporting period, you must f	on or organization you represent spends more than \$500 ile a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk County Building, Madison, for more information.]	at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 9-15-16	Signature Colletto F Corbin
	Print Name Colette F Corbin

REGISTRATION BEFORE COUNTY BOARD			
DATE: 9/15/16 Name: Harral Tanagar	_		
Item #/Petition/CUP # or Subject: Municipality:			
☐ 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:			
	_		
in A listed Country			
Comments: Please Allocate any expected budget surplus as a COLA increase for P.O.S. agencies.			
as a COLA increase for P.O.S. agencies.			
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, <u>STOP</u> ; 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 other governmental body?			
[If you checked "YES," to the question, <u>STOP</u> ; you need not complete the rest of this form except that you must significant. If you checked "NO," to the question, go on to the next question.]	ŋn		
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activitie	S		
during the current reporting period?			
Vi encluser i resultant de la constitución de establica de la constitución de la constitu			
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 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	â		
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.]	0		
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: Signature			

Print Name _____

DATE: 9-15-16	Name: Bridger SNELL
Item #/Petition/CUP # or Subject:	Name: Bridger Swell Municipality:
☐ 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	of each person or organization you are representing:
funded.	Especially the new grads getting Voc
Comments:	Thank you
person or organization?	presentation or appearing incidental to your other paid duties for this YES
other governmental body?[If you checked "YES," to the question	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?□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 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:	Signature
	Print Name

REGISTRATION BEFORE COUNTY BOARD Municipality: M Item #/Petition/CUP # or Subject: ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ 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? [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? YES ------ 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 guestions 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?□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.

Signature _____

Print Name

Date: _____

DATE:	Name:		
Item #/Petition/CUP # or Subject:			
☐ 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 po		
[If you checked "NO," <u>STOP;</u> you need	not complete the rest of this form. If you	u checked "YES," go on to the next question.]	
Name, address and telephone number	of each person or organization you are r	epresenting:	
Comments:			
person or organization?	n, <u>STOP</u> ; you need not complete the	tal to your other paid duties for this □YES□NO rest of this form.	
other governmental body?		rour office or for your municipality or YES	
	od?	e than \$500 on county lobbying activities	
hearings or meetings?		rd supervisors other than at public □ YES□NO s 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 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	od, you must file a financial disclos	ou represent spends more than \$500 sure 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	he Clerk's office at Room 106A of the City-	
Date:	Signature		
	Print Name		

DATE: 9-15-2016	Name: BETH HOUGEN
Item #/Petition/CUP # or Subject:	Municipality: MAOISON
□ Wish to Speak in Support □ Régistering 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 n	ot complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	f each person or organization you are representing:
Comments: I'm registering	in Support of DD services being City Lindel. My Voc. services for grads
Especie	My Voc. services for grads
person or organization?	resentation or appearing incidental to your other paid duties for this□YES
other governmental body?[If you checked "YES," to the question	is appearing solely on behalf of your office or for your municipality or ———————————————————————————————————
See a file of the second of th	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 YES ty Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts at	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	It if the person or organization you represent spends more than \$500 I, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the (County Building, Madison, for more ir	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Citynformation.]
Date:9-15-2016	Signature Scrth J. Huyen
	Print Name Both J. Huyer

DATE: 9/15/16	Name: Kat	Neen	Missley
Item #/Petition/CUP # or Subject:	Municipality:	lactison	Dave County
7	Name: Kat Municipality: Y Support of Quality Service	s for Dr	
Wish to Speak in Support Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition		ble for Information Only
1. On this occasion, are you officia	lly representing an organization or a p	erson other t	han yourself?
[If you checked "NO," STOP; you need	d not complete the rest of this form. If yo	u checked "YE	S," go on to the next question.]
Name, address and telephone numbe	r of each person or organization you are	representing:	
Comments: I am register	sing in Supper of DD Especially new ginds	services gettin	being fully boc. services
person or organization?	epresentation or appearing incider on, <u>STOP;</u> you need not complete the the next question.]		□ YES □ NO
other governmental body? [If you checked "YES," to the ques	no is appearing solely on behalf of tion, <u>STOP;</u> you need not complete to the question, go on to the next quest	he rest of this	YES NO
	anization you represent spend mor iod?une or from July to December.)		
hearings or meetings?	re than 2 contacts with County Bounty Board supervisor who represent		□YES□NO
you do make more than 2 contacts	4 and 5 above, <u>STOP;</u> you need not at a later date, you must then contac also sign this form. If you checked "	ct the County	Clerk's office to file a form
during the current reporting per	that if the person or organization y iod, you must file a financial disclo	sure statem	ent with the county clerk?
[If you checked "NO" please call th County Building, Madison, for more	ne County Clerk at 266-4121 or go to e information.]	the Clerk's or	ffice at Room 106A of the City-
Date:	Signature		
	Print Name		

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/CUP # or Subject: ☐ 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? Mo [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: Employment inc. and 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," 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 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?...... 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 (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 auestion.1 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? Ilf 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 Date:

Print Name

DATE: 9/15/16	Name: Kyle Edlhober
tem #/Petition/CUP # or Subject:	Name: <u>Kyle Edlhober</u> Municipality: <u>Mad, son</u>
□ 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?
[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:
Comments: I with to support	an increase in developmental disabilities bidget.
person or organization?	is appearing solely on behalf of your office or for your municipality or YES
4. Has or will the person or organ	ization 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 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 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?
[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:9-/5-/6	Signature Myle Edlhyber Print Name Kyle Edlhyber
	Print Name Kyle Edlhuber

DATE: 9/15/14	Name: Sara Purdy
Item #/Petition/CUP # or Subject:	Municipality: Madison
□ 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.]
3 · · · · · · · · · · · · · · · · · · ·	of each person or organization you are representing:
1 wish to suppo	disabilities
developmentail	disabilities
Comments:	
person or organization?	oresentation 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
during the current reporting perio	nization you represent spend more than \$500 on county lobbying activities ad?
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public YES NO 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 lso sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting perio	nat if the person or organization you represent spends more than \$500 kd, 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: 9 15 16	Signature Arm Puruly
	Sava P. W.

DATE: 9/15/16	Name: Roth Sarbacker
Item #/Petition/CUP # or Subject:	Municipality: Madison
,	
□ 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?
50 55.5	of each person or organization you are representing:
Roya 2 Evager	
Comments: increase budget -	for these w/ developmental disabilities
100 to 100 to 100 to	
person or organization?	oresentation or appearing incidental to your other paid duties for this
[If you checked "NO" to the question If you checked "YES," continue to the	n, <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 □YES□NO
[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
this form. If you checked "NO," to th	ne question, go on to the next question.]
	ization you represent spend more than \$500 on county lobbying activities d?
	e 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
indicating such activity. You must al the next question.]	lso sign this form. If you checked "YES" to either question at this time, go on to
Goodelier (notherheide), ich (Mittellier von Leitenbert (100 d.)	
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-
- V	A f
Date: 9/15/16	Signature Print Name Print Name
	Print Name Toth Sarbacky

REGISTRATION BEFORE COUNTY BOARD
DATE: 9 15 14 Name: MAYING MACGINIVIAM Item #/Petition/CUP # or Subject: Municipality: Madison
Item #/Petition/CUP # or Subject: Municipality: Madison
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering 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 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:
budget.
I wish to increase the developmental disabilities budget. Marina Machillivray 420 w. wilson St. Advanced Employer inc.
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 activitie 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: 9/15/14 Signature Yaring Maring M
Print Name Marina M

DATE:	9/15/16	Name:	chael Alioto
Item #/Petitio	n/CUP # or Subject:	Municipality:	Madison
□ Wish to Sp XRegistering	eak in Support g in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition	☐ Available for Information Only
1. On this oc	casion, are you officiall	y representing an organization or a	person other than yourself?
[If you checked	d "NO," <u>STOP;</u> you need	not complete the rest of this form. If y	rou checked "YES," go on to the next question.]
Name, address	s and telephone number	of each person or organization you are	e representing:
	-		
Comments:	I am in furp	ort of so cuto to the D	evelopmental Diosbilities
O Ave year h	salma maid fan varin na	buy - Ikeriney while	antal to your other poid duties for this
person or or [If you check	ganization?	n, <u>STOP</u> ; you need not complete th	ental to your other paid duties for this YES
other govern [If you check	nmental body? ed "YES," to the quest		f your office or for your municipality or
during the c	urrent reporting period		ore than \$500 on county lobbying activities□YES□NO
hearings or	meetings?		oard supervisors other than at public
you do make	more than 2 contacts ch activity. You must a	at a later date, you must then conti	ot complete the rest of this form. However, if act the County Clerk's office to file a form "YES" to either question at this time, go on to
during the c	urrent reporting perio	od, you must file a financial disc	you represent spends more than \$500 losure statement with the county clerk?
[If you check	ed "NO" please call the ing, Madison, for more	e County Clerk at 266-4121 or go to	o the Clerk's office at Room 106A of the City-
Date:		Signature	
		Print Name	

DATE: 9/15/16	Name:	Maggi	e Dugan
Item #/Petition/CUP # or Subject:	Municipa	ality:	Madison
☐ Wish to Speak in Support	☐ Wish to Speak in Op	5/	
Registering in Support	☐ Registering in Oppos	sition	☐ Available for Information Only
1. On this occasion, are you officially [If you checked "NO," STOP; you need n	representing an organization complete the rest of the	zation or a pers is form. If you cl	son other than yourself? □YES NO hecked "YES," go on to the next question.]
Name, address and telephone number o	f each person or organiza	tion you are rep	resenting:
Adequate suppo	it for tho	se m	need (elders, devol
mestel desabelitée	s, Greatal	healt	h) is essential
for a noral com	menty.	adegi	nate wages for
Comments:	ployees	in the	puture 15 drucia
Vervice employees	would i	be a r	I to pay there.
2. Are you being paid for your rep person or organization?	<u>0.101</u> ,) 00 11000 1101 0	ing incidental	need (elders, devoluted by we essential form. Let wages for for these to your other paid duties for this of this form.
other governmental body?	n, <u>STOP;</u> you need not	complete the r	ur office or for your municipality or
4. Has or will the person or organic during the current reporting period (A reporting period is January to June	d?		han \$500 on county lobbying activities □YESXNO /VA
5. Do you anticipate making more hearings or meetings? (Do not count contacts with the Count			□YES
you do make more than 2 contacts a	t a later date, you must	then contact th	mplete the rest of this form. However, if he County Clerk's office to file a form S" to either question at this time, go on to
	d, you must file a finar	ncial disclosur	represent spends more than \$500 re statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-41.	21 or go to the	Clerk's office at Room 106A of the City-
Date:	Signatu	ıre	

Print Name _____

DATE: 9/15/16	Name: Megan Gross
Item #/Petition/CUP # or Subject:	Municipality: Madison WI (Dane County)
□ 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? ———————————————————————————————————
	of each person or organization you are representing:
Comments: I would like disabilities. As a speech-lindividuals I serve.	to support funding for development anymage parhologist, this cause is important to me and the
Are you being paid for your reperson 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 pd, 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: 9/15/16	Signature Mayur Sroon
	D

REGISTRATION BEFORE COUNTY BOARD
DATE: 9/15/20/6 Name: SAMES KEBOUE
Item #/Petition/CUP # or Subject: Municipality: WAUNA KEE, WIS.
☐ 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?
Name, address and telephone number of each person or organization you are representing: SULIE M. KEBNE 5333 KEVIN'S WAY (608) 212-2490 JANIES M. KEBNE 1436 PALM GRASS PASS, WAUNAKER 643-4595
Comments: HE DD. MY DAUCHTON JULIE, WAS LIKE A CRUMBLED BEACH TOWEL AFTEN A TBJ. TOON SHOW SHOWS ING, SPERKING 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," 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 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? (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: 9/15/2016 Signature Mills R. REBNE

DATE: 9-15-16 Name: Cathlern Knick
Item #/Petition/CUP # or Subject: Municipality:
Wish to Cook in Connection
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:
Please Support an increase in Funding for DO
Please Support an increase in Funding for DO + other community Services
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 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 Catalon Knit
Print Name

DATE: 9/15/16	Name: Theresa Leighton
Item #/Petition/CUP # or Subject:	Municipality: McFarland
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
Registering in Support	□ Registering in Opposition □ Available for Information Only
	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:
Comments:	
person or organization?	is appearing solely on behalf of your office or for your municipality or
hearings or meetings?	than 2 contacts with County Board supervisors other than at public than 2 contacts with County Board supervisors other than at public than 2 contacts with County 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 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-information.]
Date: 9/15/10	Signature Thereia ex

DATE: 9.15 - 2016 REGISTRATION BEFORE COUNTY BOARD Name: Name: Phil
WE WE WE WOULD IN A LINE OF THE MAN A DICOM
Human Services DD Beelget
 □ 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? ———————————————————————————————————
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: Signature

Print Name _____

DATE: 9/15/16	Name: Darwin Robert Ness
Item #/Petition/CUP # or Subject:	Municipality: Madison
□ 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	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 Supp.	ort and increase in funding for OD and other exuites.
2. Are you being paid for your re	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.
	o is appearing solely on behalf of your office or for your municipality or □YES□NO
[If you checked "YES," to the questi	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?	e than 2 contacts with County Board supervisors other than at public
you do make more than 2 contacts a	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	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	□ YES□ NO • County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- information.]
Date:	Signature
	Print Name

DATE: 9-15-16	Name: Morgan Snith
Item #/Petition/CUP # or Subject:	Name: Morgan Snith Municipality: Madison
□ 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.]
	of each person or organization you are representing:
Comments: Please Supp	services,
other community	services,
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?	o is appearing solely on behalf of your office or for your municipality or YES
during the current reporting perio	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 TYES
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 perio	nat if the person or organization you represent spends more than \$500 od, 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-
Date: 9-15-16	Signature // / / Control of the state o
	Print Namo (// A / a d a) + i + i +

DATE: 9-15-16	Name: Leah Clark
Item #/Petition/CUP # or Subject:	Municipality: Mad. son
	- W. I. (
	☐ 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 n	ot complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	f each person or organization you are representing:
	vcSl
Comments: Plage suppor	t and wage in funding for O.D. and other
2 Are you being paid for your rep	recontation or appearing incidental to your other noid duties for this
person or organization?	STOP; 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
during the current reporting period	zation you represent spend more than \$500 on county lobbying activities I?□YES
hearings or meetings?	than 2 contacts with County Board supervisors other than at public ———————————————————————————————————
you do make more than 2 contacts at	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 in	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Citynformation.]
Date:9-/5-16	Signature John Clark Print Name Leah Clark
	Print Name Leah Clark

DATE: 9/15/16	Name: Nathan M. Mosher Municipality: Madison
Item #/Petition/CUP # or Subject:	Municipality: Madison
□ Wish to Speak in Support□ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Xavailable 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.]
The production of the control of the	of each person or organization you are representing:
Please Support	other Community Services
tor DD and	other Community Services
Comments:	
person or organization?	is appearing solely on behalf of your office or for your municipality or □YES
	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.]
	d?□YESNO e or from July to December.)
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public → YES hty 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 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?□YES□NO
[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 //6r	Signature 22 Print Name $N6than M. Mosher$
	Print Name NGThan M. Musher

DATE: 9-15-16	Name: fatricio (Summons
Item #/Petition/CUP # or Subject:	Name: folicio (Summins) Municipality: madison
	₹.
☐ Wish to Speak in Support	□ Wish to Speak in Opposition
Registering in Support	□ Registering in Opposition □ Available for Information Only
	y representing an organization or a person other than yourself? □YES□NO
[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	of each person or organization you are representing:
Comments:	
	presentation or appearing incidental to your other paid duties for this
	n, <u>STOP;</u> you need not complete the rest of this form.
If you checked "YES," continue to the	
	is appearing solely on behalf of your office or for your municipality or
	□YES□NO 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
	nd?
5. Do you anticipate making more	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 od, 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	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date: 9-15-16	Ciamphura Pathagaia Kanamana)
Date: 17-10	Signature Patricia Kimmons Print Name Patricia Kimmons
	Print Name 19Th Clair mirion

DATE: 1/15/16	Name: Anna Hasky
Item #/Petition/CUP # or Subject:	Municipality: Madi Son
□ 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ズNO
[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: Suffort Lola	
- 01	
	oresentation or appearing incidental to your other paid duties for this
[If you checked "NO" to the question	, <u>STOP</u> ; you need not complete the rest of this form.
If you checked "YES," continue to the	ne next question.]
	is appearing solely on behalf of your office or for your municipality or □YES□NO
[If you checked "YES," to the question	on, STOP; you need not complete the rest of this form except that you must sign
	e question, go on to the next question.]
	ization you represent spend more than \$500 on county lobbying activities d?□YES□NO
(A reporting period is January to Jun	
	than 2 contacts with County Board supervisors other than at public
(Do not count contacts with the Cour	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
you do make more than 2 contacts a	at a later date, you must then contact the County Clerk's office to file a form
indicating such activity. You must all the next question.]	so sign this form. If you checked "YES" to either question at this time, go on to
6. If "YES." do vou understand th	at if the person or organization you represent spends more than \$500
during the current reporting perio	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-
AND	AND CONTRACT CONTRACTOR CONTRACT
Date:	Signature Ma Hou
**	

DATE: 9-15-10	Name: Dan Jallow
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
	y 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:	
2. Are you being paid for your rea	presentation or appearing incidental to your other paid duties for this
person or organization?	
If you checked "YES," continue to the	
	is appearing solely on behalf of your office or for your municipality or
	□YES□NO 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
(A reporting period is January to Jur	nd?
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	nat if the person or organization you represent spends more than \$500 ed, 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: 9-15-16	Signature WOWW
	Print Name DOM Jally

DATE: 9/5/0	Name: Billyworthy
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
	y representing an organization or a person other than yourself?
	of each person or organization you are representing:
 Are you being paid for your reperson or organization?	o is appearing solely on behalf of your office or for your municipality or
[If you checked "NO," to questions a you do make more than 2 contacts a	Inty Board supervisor who represents the district in which you reside.) 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
the next question.]	
during the current reporting period	nat if the person or organization you represent spends more than \$500 pd, 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 (15/10	Signature Billy Worthy
	Print Name