

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Ellen Voker

Item #/Petition/CUP # or Subject:

Municipality: Dane

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☒ YES ----- ☐ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Rise up Inc
1101 Nob Hill
608-237-7710

Comments: Please support an increase in funding for DD and other community services.

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 hearings or meetings? ☐ YES ----- ☐ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: 

Print Name: Ellen Voker

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16
Item #/Petition/CUP # or Subject:

Name: JACOB
Municipality: Fitchburg.

☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
☒ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?
.....☒ YES ☐ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: Please support an increase in funding for DD and other Community Services

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 hearings or meetings?☐ YES ☐ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?☐ 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: [Signature]
Print Name: JACOB SAUWOLKE.

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: J. Prough

Item #/Petition/CUP # or Subject:

Municipality: Shoshone, WI

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
..... ☐ YES ----- ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ 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.)

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(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?
..... ☐ 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: J. Prough

Print Name: Joni Prough

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Elizabeth Duffey

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ----- ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

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? ☐ 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 hearings or meetings? ☐ YES ----- ☐ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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.]

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[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 Elizabeth Duffey
Print Name Elizabeth Duffey

REGISTRATION BEFORE COUNTY BOARD

DATE: 9.15.16

Name: Lynnea R Nielsen

Item #/Petition/CUP # or Subject:
Human Services / DD Budget

Municipality: _____

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
..... ☐ YES ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:
Please support an increase in funding for
DD supports— this is so greatly 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? ☐ 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 hearings or meetings? ☐ YES ☐ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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.]

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[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 Lynnea R Nielsen

Print Name Lynnea R. Nielsen

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Kate Graf

Item #/Petition/CUP # or Subject:

Municipality: Madison - City

2017 HS Budget

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

☐ YES ☒ NO

[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Increase funds for comm. services

Thank you

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 hearings or meetings? ☐ YES ☐ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

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[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 Kate Graf

Print Name Kate Graf

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-16

Name: Colette F Corbin

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
☐ YES ☒ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

I support AAA (Area Agency on Aging) budget which includes 1) Case Mgmt Program 2) Volunteer Guardianship Rep Payee 3) Cultural Diversity Program & Special Project Fund.

Comments:

Thank you Ms Green for your continued funding of AAA Board priorities

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 hearings or meetings? ☐ YES ☒ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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.]

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 [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: Colette F Corbin

Print Name: Colette F Corbin

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Hannah Tanagar
Municipality: Madison

Item #/Petition/CUP # or Subject:

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
..... ☐ YES ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: Please Allocate any expected budget surplus 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? ☐ 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 hearings or meetings? ☐ YES ☒ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

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[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 _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-16

Name: Bridget Snell

Item #/Petition/CUP # or Subject:

Municipality: _____

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ☒ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

I am in Support of DD Services being fully
funded. Especially the new guards getting Voc
Support.

Comments: Thank you

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 hearings or meetings? ☐ YES ☐ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16
Item #/Petition/CUP # or Subject: _____

Name: Ann Freiwald
Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
..... ☐ YES ----- ☐ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

I'm registering in support of fully funding
the DD services including the new
High school grads. Thanks you!

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
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(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

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[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 _____

REGISTRATION BEFORE COUNTY BOARD

DATE: _____

Name: _____

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?

..... ☐ YES ----- ☐ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ 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 hearings or meetings? ☐ YES ----- ☐ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-2016

Name: BETH HUGEN

Item #/Petition/CUP # or Subject:

Municipality: MADISON

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☒ YES ☐ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: I'm registering in support of DD services being fully funded.
Especially Voc. services for grads

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.]

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(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? ☐ YES ☒ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: 9-15-2016

Signature: Beth J. Hugen

Print Name: Beth J. Hugen

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Kathleen Missley

Item #/Petition/CUP # or Subject:

Municipality: Madison/Dare County

Support of Quality Services for DD

| | | |
|--|--|---|
| <input checked="" type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ☒ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: I am registering in support of DD services being fully funded, especially new grads getting voc. services

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 hearings or meetings? ☐ YES ☐ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/14
 Item #/Petition/CUP # or Subject: _____

Name: Rylie Sarbacher
 Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
~~YES~~ ----- ~~NO~~
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:
Rylie Sarbacher, I am a job coach/coordinator at
Advanced Employment, inc. and ~~am~~ ~~to~~ support
the increase in the budget

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 hearings or meetings? ----- ☐ YES ----- ☐ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Kyle Edlhuber

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
..... ☐ YES ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: I wish to support an increase in developmental disabilities budget.

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 hearings or meetings? ☐ YES ☐ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: Kyle Edlhuber

Print Name: Kyle Edlhuber

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Sara Purdy

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

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:

I wish to support an increase in budget to developmental disabilities

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," 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, 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? (A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; 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: Sara Purdy
Print Name: Sara Purdy

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Ruth Sarbacher

Item #/Petition/CUP # or Subject:

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

☒ YES ☒ NO

[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Ruth Sarbacher

Comments: increase budget for those w/ developmental disabilities

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 hearings or meetings? ☐ YES ☐ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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

Ruth Sarbacher

Print Name

Ruth Sarbacher

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Item #/Petition/CUP # or Subject:

Name: Marina MacGillivray

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

☒ YES ☒ NO

[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

I wish to increase the developmental disabilities budget.

Marina MacGillivray 420 W. Wilson St. Advanced Employment Inc.

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 hearings or meetings? ☐ YES ☐ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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 Marina MacGillivray

Print Name Marina M

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Michael Alioto

Item #/Petition/CUP # or Subject:

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

..... ☐ YES ----- ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: I am in support of \$' cuts to the Developmental Disabilities budget - increases would be great!

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 hearings or meetings? ☐ YES ----- ☐ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16
 Item #/Petition/CUP # or Subject:

Name: Maggie Dugan
 Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
 ☐ YES ☒ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Adequate support for those in need (elders, develop-
mental disabilities, mental health) is essential
for a moral community. Adequate wages for
service employees in the future is crucial.

Comments:

Service employees could be a rich source of
future employment. We need to pay these folks

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO well
 [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.) NA

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☒ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Megan Gross

Item #/Petition/CUP # or Subject:

Municipality: Madison, WI (Dane County)

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

☐ YES ☒ NO

[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: I would like to support funding for ~~disability~~ services for developmental disabilities. As a speech-language pathologist, this cause is important to me and the individuals I serve.

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 hearings or meetings? ☐ YES ☒ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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 Megan Gross

Print Name Megan Gross

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/2016
 Item #/Petition/CUP # or Subject:

Name: JAMES REBNE
 Municipality: WAUNAKEE, WIS.

| | | |
|---|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☒ YES ☐ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

JULIE M. REBNE 5333 KEVIN'S WAY (608) 212-2490
JANICE M. REBNE 1436 PALM GRASS PASS, WAUNAKEE (608) 459-4595

Comments: PLEASE CONTINUE TO FUND QUALITY SERVICES FOR THE DD. MY DAUGHTER, JULIE, WAS LIKE A CRUMPLED BEACH TOWEL AFTER A TBI. TODAY SHE IS NEARLY STANDING, SPEAKING AND ENJOYING ACTIVITIES DUE TO DANE CO. SERVICES

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 hearings or meetings? ☐ YES ☒ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: 9/15/2016

Signature: [Signature]
 Print Name: JAMES R. REBNE

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-16

Name: Cathleen Knick

Item #/Petition/CUP # or Subject:

Municipality: Madison

☒ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

..... ☐ YES ----- ☐ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Please Support an increase in funding for DD
& 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? ☐ 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 hearings or meetings? ☐ YES ----- ☐ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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 Cathleen Knick

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Theresa Leighton

Item #/Petition/CUP # or Subject:

Municipality: McFarland

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ----- ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ 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 hearings or meetings? ☐ YES ----- ☒ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: Theresa Leighton

Print Name: Theresa Leighton

REGISTRATION BEFORE COUNTY BOARD

DATE: 9.15-2016

Name: Phil Porter (Phil Porter)

Item #/Petition/CUP # or Subject:

Municipality: MADISON

Human Services DD Budget

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
 ☐ YES ☐ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ 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 hearings or meetings? ☐ YES ☐ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Darwin Robert Ness

Item #/Petition/CUP # or Subject:

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

☐ YES ☒ NO

[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: Please support and increase in funding for DD and other community services.

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 hearings or meetings? ☐ YES ☒ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-16

Name: Morgan Smith

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ☒ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: Please Support an increase in funding for DD and other community services,

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 hearings or meetings? ☐ YES ☒ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: [Signature]

Print Name: Morgan Smith

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-16

Name: Leah Clark

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
..... ☐ YES ----- ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

1

Comments: Please support an increase in funding for D.O. and other community services

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 hearings or meetings? ☐ YES ----- ☒ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: Leah Clark

Print Name: Leah Clark

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Nathan M. Mosher

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|---|--|--|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input checked="" type="checkbox"/> Available for Information Only |
| <input type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ☒ NO
 [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Please Support an increase in funding
for DD and 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? ☐ 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 hearings or meetings? ☐ YES ☒ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: [Signature]

Print Name: Nathan M. Mosher

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-16

Name: Patricia Kimmons

Item #/Petition/CUP # or Subject:

Municipality: Madison

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ 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 hearings or meetings? ☐ YES ☒ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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 Patricia Kimmons

Print Name Patricia Kimmons

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16

Name: Anna Haskey

Item #/Petition/CUP # or Subject:

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself?

☐ YES ☒ NO

[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: Support LOLA

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 hearings or meetings? ☐ YES ☒ NO

(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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 Anna Haskey

Print Name Anna Haskey

REGISTRATION BEFORE COUNTY BOARD

DATE: 9-15-16

Name: Duan Jallow

Item #/Petition/CUP # or Subject:

Municipality:

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself?
..... ☐ YES ----- ☒ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ 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 hearings or meetings? ☐ YES ----- ☐ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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: [Signature]

Print Name: Duan Jallow

REGISTRATION BEFORE COUNTY BOARD

DATE: 9/15/16
Item #/Petition/CUP # or Subject:

Name: Billy Worthy
Municipality: _____

| | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <input type="checkbox"/> Available for Information Only |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | |

1. On this occasion, are you officially representing an organization or a person other than yourself? ☒ YES ☐ NO
[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]

Name, address and telephone number of each person or organization you are representing:

Comments: please support an increase in funding for DD and other community services

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 hearings or meetings? ☐ YES ☐ NO
(Do not count contacts with the County Board supervisor who represents the district in which you reside.)

[If you checked "NO," to questions 4 and 5 above, STOP; you 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 Billy Worthy
Print Name _____