## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Name:	Dave	10	Mare	glo
DATE: 1/10/17	Municipa	ality:	Town	Veron	ra_
Petition/CUP #/Resolution/Ordinance				1	
	Wish to Speak in Oppo		□ Available	for Information	on Only
Registering in Support	Registering in Oppo	SILION	☐ Available	for Information	on Only
1. On this occasion, are you officially [If you checked "NO," STOP; you need no	□ YES	NO	)		
Name, address and telephone number o	f each person or orga	•		:	
Comments:					
2. Are you being paid for your repre other paid duties for this person or of [If you checked "NO" to the question, STO If you checked "YES," turn over to the next	organization? OP; you need not comple		□	YES	A NO
3. Are you an elected official who is or for your municipality or other gov [If you checked "YES," to the question, ST you checked "NO," to the question, go on the checked "NO," to the question, go on the checked "NO," to the question, go on the question is question.	rernmental body? OP; you need not comp				NO sign this form. If
4. Has or will the person or organiza on county lobbying activities during a (A reporting period is January to June or fr	the current reporting			YES	5 NO ?
5. Do you anticipate making more the supervisors other than at public hear (Do not count contacts with the County Bo	ings or meetings?			YES reside.)	□ NO
[If you checked "NO," to questions 4 and . more than 2 contacts at a later date, you m must also sign this form. If you checked "Y	nust then contact the Co	unty Clerk's offi	ce to file a forn	indicating suc	
6. If "YES," do you understand that spends more than \$500 during the cufinancial disclosure statement with the [If you checked "NO" please call the Coun Building, Madison, for more information.]	nrent reporting perine county clerk? ty Clerk at 266-4121 or	od, you must	file a	YES m 106A of the	□ NO City-County
Date:	7	Signature	Jafel !	1/1/1	2000
	ī	Print Name	111110	110101	1100

## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Name:	Var	e Kus	5	<del></del>
DATE: 1-18-17	Municip	ality:	ottage	Grov	17
Petition/CUP #/Resolution/Ordinan	nce Amendment/Subj	ect:	058		ý.
	☐ Wish to Speak in O☐ Registering in Oppo	(m) (m)	☐ Available	for Information	n Only
1. On this occasion, are you official  [If you checked "NO," <u>STOP</u> ; you need n  Name, address and telephone number	YES not complete the rest of the	his form. If you	O checked "YES,"	go on to the nex	
Comments:					
2. Are you being paid for your reprother paid duties for this person or [If you checked "NO" to the question, SI If you checked "YES," turn over to the n	organization? TOP; you need not compl			ÆS	□ NO
3. Are you an elected official who is or for your municipality or other go [If you checked "YES," to the question, So you checked "NO," to the question, go or	overnmental body? STOP; you need not comp			YES that you must sig	□ NO gn this form. I
4. Has or will the person or organi on county lobbying activities during (A reporting period is January to June or	g the current reportin	g period?		YES	□ NO
5. Do you anticipate making more supervisors other than at public hea (Do not count contacts with the County B	arings or meetings?		🗆 🧎	YES reside.)	□ NO
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6. If "YES," do you understand the spends more than \$500 during the clinancial disclosure statement with [If you checked "NO" please call the Cou Building, Madison, for more information.	current reporting per the county clerk? unty Clerk at 266-4121 o	iod, you must	file a □	2-0-1-0-0-0-0-0	NO ity-County
Date:	17	Signature	David	Rysl	

## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: ZLR	Name:	Alex an	d Man	Lee 1	VICTE	SUE LO	
DATE: 1/10/17	mmittee Name: ZLR Name: Alex and May Lee McTreuse TE: 1/10/17 Municipality: Town of Vermont						
Petition/CUP #/Resolution/Ordin							
☐ Wish to Speak in Support  ☐ Registering in Support	☐ Wish to Speak in Op☐ Registering in Oppo	A STATE OF THE PARTY OF THE PAR	☐ Available	for Informa	tion On	ly	
1. On this occasion, are you office [If you checked "NO," STOP; you need Name, address and telephone numbers.	ed not complete the rest of the	is form. If you	) checked "YES,	" go on to the		estion.]	
Comments:			0.		- Man-		
2. Are you being paid for your r other paid duties for this person [If you checked "NO" to the question If you checked "YES," turn over to the control of the person of the control of the	or organization?		□	YES		NO	
3. Are you an elected official whor for your municipality or other [If you checked "YES," to the question, gou checked "NO," to the question, g	governmental body? n, <u>STOP</u> ; you need not compl					NO is form.  Į	
4. Has or will the person or orgon county lobbying activities dur (A reporting period is January to June	ing the current reporting			YES		NO	
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Count	hearings or meetings?		🏻	YES 1 reside.)		NO	
[If you checked "NO," to questions 4 more than 2 contacts at a later date, y must also sign this form. If you check	you must then contact the Cou	unty Clerk's offi	ce to file a form	n indicating s			
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement wis [If you checked "NO" please call the Building, Madison, for more informations and the statement with the statement will be statement with the statement will be statement with the s	th the county clerk? County Clerk at 266-4121 or	od, you must f	file a □	YES m 106A of th		NO County	
Date: 1/10/17	M	Signature	ex me	chezer			
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