Committee Name:	Name:	Nancy Cex	•
Committee Name:	Municipality: _	Vermont To	wnship
Petition/CUP #/Resolution/Ordinance Am	nendment/Subject:		
	sh to Speak in Opposition gistering in Opposition		Information Only
1. On this occasion, are you officially rep  [If you checked "NO," STOP; you need not com	YES  uplete the rest of this form.	If you checked "YES," go	
Name, address and telephone number of eac	h person or organization	n you are representing:	
	, ,		
Comments:			
2. Are you being paid for your represents other paid duties for this person or organ [If you checked "NO" to the question, <u>STOP</u> ; you shocked "YES," turn over to the next que	nization?ou need not complete the n	TYES	S □ NO
3. Are you an elected official who is appeared or for your municipality or other government [If you checked "YES," to the question, STOP; you checked "NO," to the question, go on to the	<b>nental body?</b> you need not complete the	Y	ES 🔲 NO  t you must sign this form. I
4. Has or will the person or organization on county lobbying activities during the c (A reporting period is January to June or from J	current reporting perio	nore than \$500 d? □ YF	ES D NO
5. Do you anticipate making more than a supervisors other than at public hearings (Do not count contacts with the County Board s	or meetings?		
[If you checked "NO," to questions 4 and 5 about more than 2 contacts at a later date, you must the must also sign this form. If you checked "YES"	hen contact the County Cl	erk's office to file a form inc	licating such activity. You
6. If "YES," do you understand that if the spends more than \$500 during the current financial disclosure statement with the country [If you checked "NO" please call the County Clauding, Madison, for more information.]	nt reporting period, younty clerk?	u must file a □ YI	
Date:	Signat	ure	
	Print Na	ime	

Committee Name:	Name: David hucey
DATE:	Municipality: In of Berry
Petition/CUP #/Resolution/Ord	inance Amendment/Subject: RES S77
<ul><li>✓ Wish to Speak in Support</li><li>☐ Registering in Support</li></ul>	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," <u>STOP</u> ; you n	icially representing an organization or a person other than yourself?
•	
Comments:	
other paid duties for this perso [If you checked "NO" to the question If you checked "YES," turn over to a second of the control of the contr	who is appearing solely on behalf of your office er governmental body?
4. Has or will the person or org	ganization you represent spend more than \$500 ring the current reporting period?
supervisors other than at public	ore than 2 contacts with County Board  hearings or meetings?
more than 2 contacts at a later date, j	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make you must then contact the County Clerk's office to file a form indicating such activity. You ked "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement w	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County
Date: Apr 25, 201	2 Signature
	Print Name David Lucey

Committee Name: FANR Name:
DATE: 4 35 17 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2016 Res-577
Wish to Speak in Support
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:  Driftless Area Land Conservancy, 2065. Jowa St  Dodgeville, WI 608-930-3252
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," turn over to the next question.]
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4-25-17 Signature Signature

Committee Name: <u>FANR</u>	Name:	BOYD GO	1RBONS		
DATE: 4/25/17	Municip	ality: <u>Uyo.</u>	TOWNISHI	Cowa C	vienty
Petition/CUP #/Resolution/Ordina	nce Amendment/Subj	ect: <u>2016</u>	Re5-5	577	
☑ Wish to Speak in Support □ Registering in Support	☐ Wish to Speak in O☐ Registering in Opp		☐ Available	for Informatio	n Only
1. On this occasion, are you official.  [If you checked "NO," STOP; you need	YES		)		
Name, address and telephone number	er of each person or orga	anization you aı	e representing	:	
DRIFTLESS DEFENDERS	608-935-5105				
Comments:			•		
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization?  STOP; you need not comp	-		YES	Ď NO
3. Are you an elected official who or for your municipality or other a [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? <u>STOP</u> ; you need not com			YES that you must st	NO ign this form. I
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ig the current reportin	ng period?		YES	⊠ NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?		🛍	YES reside.)	□ NO
[If you checked "NO," to questions 4 a more than 2 contacts at a later date, yo must also sign this form. If you checked	u must then contact the Co	ounty Clerk's off	ice to file a form	indicating such	
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Combuilding, Madison, for more information.	current reporting per the county clerk? county Clerk at 266-4121 c	iod, you must	file a		□ NO City-County
	* *				
Date: 47212 25, 2019	·	Signature	Loille	blow	
		Print Name 1	BOYD GIR	BBONS	,

Committee Name: <u>FANR</u> Name: <u>Rob Panielson</u>
DATE: 4125117 Municipality: TOWN of Stark - Vernon Cty
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2016 Res-577
Wish to Speak in Support  ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  VES  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:  Energy Planning & Information Committee  Town of Stark - Vernow Coung
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: April 25, 2017 Signature Rob Danielson
Print Name Rob Danielson

	RATION BEFORE			TEE	
Committee Name: <u>FANR</u> DATE: 4 25 17	Name:	Mich	ael M	cher	mot
DATE: 4/25/17	Municip	ality: しぇ	RMC	UNT	
Petition/CUP #/Resolution/Ordina					
Wish to Constant Constant	<b>— — — — — — — — — —</b>	• • • • • • • • • • • • • • • • • • • •			
Wish to Speak in Support  Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		□ Available	for Information	on Only
1. On this occasion, are you officia	ally representing an or	ganization or a		r than yourse	If?
[If you checked "NO," STOP; you need				" go on to the ne	ext question.]
Name, address and telephone number  VERMUNT  PUWERLI	or of each person or orga	nization you ar	e representing	g: <-	
PUERLI	NE AC	TICN	CU	MMI	TTEE
Comments:					
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, So If you checked "YES," turn over to the	r organization? TOP; you need not compl	• • • • • • • • • • • • • • • • • • •		YES	₽ NO
3. Are you an elected official who or for your municipality or other g [If you checked "YES," to the question, you checked "NO," to the question, go of the control of the property of the pro	governmental body?  STOP: you need not comp			YES that you must s	NO No ligh this form.
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reportin	g period?	🗆	YES	Þ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County)	earings or meetings?		🗖 et in which you	YES n reside.)	NO
[If you checked "NO," to questions 4 an more than 2 contacts at a later date, you must also sign this form. If you checked	ı must then contact the Co	unty Clerk's offic	ce to file a forn	n indicating suc	
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co Building, Madison, for more information	current reporting peri the county clerk? unty Clerk at 266-4121 or	od, you must f	ile a	YES m 106A of the G	□ NO City-County
Date: 4/25/	17	Signature <u>W</u> Print Name <u>M</u>	(séheu	DWO	Duy-
	I	Print Name	ICHK	: E L	
			MCD.	cenci	~ [

Committee Name: BANR Name: Lisa Or	man
DATE: 4-25-17 Municipality: Vern	ront township
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Resolution/Ordinance Amendment/Subject:	5 77
✓ 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 per	ked "YES," go on to the next question.]
Comments:	·
[If you checked "NO" to the question, <u>STOP</u> ; you need not complete the rest of this for If you checked "YES," turn over to the next question.]  3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?	YES NO  rm.  ice YES NO  orm except that you must sign this form. If
on county lobbying activities during the current reporting period?	□ YES □ NO
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?	
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the remore than 2 contacts at a later date, you must then contact the County Clerk's office to must also sign this form. If you checked "YES" to either question at this time, go on to	file a form indicating such activity. You
6. If "YES," do you understand that if the person or organization you represpends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?	a □ YES □ NO
Date: Signature	
Print Name	

REGISTRATION BEFORE COUNTY COMMITTEE Committee Name: Municipality: DATE: Petition/CUP #/Resolution/Ordinance Amendment/Subject: Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? [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," turn over to the next question.] 3. Are you an elected official who is appearing solely on behalf of your office [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 (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?..... XI 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, <u>STOP</u>; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.] 6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?...... X YES [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.] Signature

Print Name

Committee Name: Trans Line Name: Louise Klopp:  DATE: 4/25/17 Municipality: Town Cross Plains
DATE: 4/25/17 Municipality: Town Cross Plains
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Resolution/Ordinance Amendment/Subject:
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
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?
[If you checked "NO" to the question, <u>STOP</u> ; you need not complete the rest of this form.  If you checked "YES," turn over to the next question.]
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?□ YES □ NO
[If you checked "YES," to the question, <u>STOP</u> ; you need not complete the rest of this form except that you must sign this form.
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, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make
more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity.  You must also sign this form.  If you checked "YES" to either question at this time, go on to the next question.]
6 If "VES " do you undougtond that if the manger or engagination was required.
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.]
zanang, manon, tor more information.
Date: Signature
Print Name

Committee Name: FANR	Name: Marta vovtovich	
DATE: 4/25/17	Municipality: Vennont	
Petition/CUP #/Resolution/Ordinal	nce Amendment/Subject: <u>2016</u> Re5-577	
Wish to Speak in Support	Wigh to Smools in Composition	
☐ Registering in Support	<ul><li>☐ Wish to Speak in Opposition</li><li>☐ Registering in Opposition</li><li>☐ Available for Info</li></ul>	rmation Only
[If you checked "NO," <u>STOP</u> ; you need	ally representing an organization or a person other than y	*
Comments:		
other paid duties for this person or	resentation or appearing incidental to your rorganization? YES  TOP; you need not complete the rest of this form.  next question.]	□ NO
or for your municipality or other go	is appearing solely on behalf of your office overnmental body? YES STOP; you need not complete the rest of this form except that you to the next question.]	□ NO must sign this form. [
4. Has or will the person or organion county lobbying activities during (A reporting period is January to June or	ization you represent spend more than \$500 g the current reporting period?	□ NO
supervisors other than at public he	than 2 contacts with County Board arings or meetings?	□ NO
more than 2 contacts at a later date, you	d 5 above, <u>STOP</u> ; you need not complete the rest of this form. How must then contact the County Clerk's office to file a form indicatin "YES" to either question at this time, go on to the next question.]	wever, if you do make 1g such activity. You
spends more than \$500 during the of financial disclosure statement with	tat if the person or organization you represent current reporting period, you must file a the county clerk?   The YES cunty Clerk at 266-4121 or go to the Clerk's office at Room 106A or a.]	□ NO of the City-County
•		
Date:	Signature	
	Print Name	

Committee Name: FANR Name: 600+ Baker
DATE: 4 25 117 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2016 Res-577
Wish to Speak in Support  Registering in Support  Registering in Opposition  Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES □ NO
[If you checked "NO," <u>STOP</u> ; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:  The Baker Family 4201 CTR F (The Stone Ho Blue Mounds WI 53517
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: W25/17 Signature Seit a B

Committee Name: FANR		Name:	Philip	Ziw	Crillan	(	
DATE: 4/25/17		Municipality	Dan	e	Can	D land	·
Petition/CUP #/Resolution/Ordina	ınce Amendm			_	•		
☑ Wish to Speak in Support	☐ Wish to S	peak in Oppos	ition				
☐ Registering in Support	-	g in Oppositio		☐ Avail	able for Inf	ormation Or	ıly
1. On this occasion, are you officing.  [If you checked "NO," STOP, you need		1 YES	Ø NO	)		•	estion.]
Name, address and telephone number	er of each perso	on or organizat	ion you are	e represen	nting:	-	
	· · · · · · · · · · · · · · · · · · ·			-			
Comments:							
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization STOP; you need	a?			□ YES		NO
3. Are you an elected official who or for your municipality or other a [If you checked "YES," to the question, you checked "NO," to the question, go	governmental <u>STOP</u> ; you need	body?d not complete i	•••••			□ 1 must sign th	NO nis form. I
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June of	ng the current	reporting per			□ YES	. 🗖	NO
5. Do you anticipate making mor supervisors other than at public he (Do not count contacts with the County	earings or med	etings?	••••••		□ YES a you reside.)		NO
[If you checked "NO," to questions 4 as more than 2 contacts at a later date, yo must also sign this form. If you checked	u must then cont	act the County	Clerk's offic	ce to file a	form indica	ting such acti	
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Combuilding, Madison, for more information.	current report the county clounty Clerk at 20	ting period, yerk?	ou must f	ile a	□ YES		<b>NO</b> County
Date:		Sign	nature				
		Duint 7	Nome o				•

Committee Name: <u>FANR</u> Name: <u>Burbura Borns</u>
DATE: 4 25 17 Municipality: Vermont
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2016 Re5-577
Wish to Speak in Support
☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
Name, address and telephone number of each person or organization you are representing:
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? □ YES □ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: Signature
Print Nama

Committee Name: FANR	Name:	1 Darver	Gaglil	. /	
DATE: 4125117		pality: Town	nol Ver	nort Dais	Cont
Petition/CUP #/Resolution/Ordin				17	
					¥
☐ Wish to Speak in Support  ☐ Registering in Support	☐ Wish to Speak in ☐ Registering in Op-		☐ Available for	Information O	nlv
- registering in support					
1. On this occasion, are you office				an yourself?	
[If you checked "NO," STOP, you nee	YES and not complete the rest of			on to the next q	uestion.]
	-				٥,
Name, address and telephone numb	er of each person of org	ganization you ar	e representing:		
		<u> </u>		*	
. :					
Comments:					
2. Are you being paid for your re	epresentation or appea	ring incidental	to your		
other paid duties for this person				S $\square$	NO
[If you checked "NO" to the question, If you checked "YES," turn over to the		plete the rest of thi	s form.		
3. Are you an elected official wh		1.7			NO
or for your municipality or other [If you checked "YES," to the question				ES   t vou must sign t.	NO his form.
you checked "NO," to the question, go		, and the second			J
4. Has or will the person or orga	nization vou represen	t spend more th	an \$500		
on county lobbying activities duri				ES . $\square$	NO
(A reporting period is January to June	or from July to December	.)		5.	
5. Do you anticipate making mor	re than 2 contacts with	County Board			s a
supervisors other than at public h					NO
(Do not count contacts with the County	y Board supervisor who re	presents the distri	ct in which you res	ide.)	
[If you checked "NO," to questions 4 of					
more than 2 contacts at a later date, you must also sign this form. If you checke					tivity. You
			Ta .		
6. If "YES," do you understand spends more than \$500 during the	_				
financial disclosure statement wit				ES 🗆	NO
[If you checked "NO" please call the C Building, Madison, for more informati		or go to the Clerk	s office at Room 1	06A of the City-	County
building, Madison, for more informati	on.j				
	d		y *		
Date:		Signature		# # # # # # # # # # # # # # # # # # #	
		Print Name			ī

Committee Name: EANR Name: TRISHA McCOWEL JIM BILL WES
DATE: 4 25 17 Municipality: DWN of UGAMONT
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2016 Re5-577
□ 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:
PATRICIA McCONNEU 4839 CTY ROAD F BLACK EARTH WI 53515 608 767 2433
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 4-25-2017 Signature Jan 7. Billingo
Print Name JAMES F BILLINGS

Committee Name:	Name:	Relly	Dettav	en:		
DATE: 4-25-2017	Municipal	ity: <u>Vec</u>	mont	-		
Petition/CUP #/Resolution/Ordi	nance Amendment/Subjec	t:			.,,	
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opp☐ Registering in Oppos	•	□ Available	e for Inform	ation On	ly
	TYES	Ø NC	)			
[If you checked "NO," <u>STOP</u> ; you ne	red not complete the rest of this	s form. If you o	checked "YES,	" go on to th	e next que	estion.]
Name, address and telephone num	ber of each person or organi	ization you ar	e representin	g:		
Comments:						
2. Are you being paid for your rother paid duties for this person [If you checked "NO" to the question If you checked "YES," turn over to the solution.  3. Are you an elected official whor for your municipality or other [If you checked "YES," to the question you checked "NO," to the question, g	n or organization?	e the rest of thi	s form.	~	, M	NO NO is form. I
4. Has or will the person or org on county lobbying activities dur (A reporting period is January to June	anization you represent sp			YES	図	NO
5. Do you anticipate making mosupervisors other than at public (Do not count contacts with the Coun	hearings or meetings?			YES u reside.)	Ŋ	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 Cour	nty Clerk's offic	ce to file a for	m indicating .		
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Building, Madison, for more information.	he current reporting period ith the county clerk? County Clerk at 266-4121 or g	d, you must f	ile a □	YES om 106A of th		NO County
Date:	S	Signature				
	D <sub>rr</sub> i	int Name		÷		

Committee Nam	e:	,	Name:	Dav	ed R	Wilhe	v_	
DATE: 4	125/17		_ Municipal	ity: <u>Verm</u>	out Tor	urship D.	ane Co	WI
Petition/CUP #/F						7		
☐ Wish to Speak ☑ Registering in	~ ~		Speak in Oppos	•	□ Avai	lable for Info	rmation Or	ıly
1. On this occasi	O," <u>STOP</u> ; you ne	ed not complete	.D YES the rest of thi	s form. If you	O i checked "	YES," go on to		uestion.]
			,					
Comments:								
2. Are you being other paid dutie [If you checked "No If you checked "YE	s for this person O" to the question	or organizati , <u>STOP</u> , you nee	ion?ed not complet		•••••	□ YES		NO
3. Are you an el or for your muni [If you checked "YI you checked "NO,"	<b>cipality or othe</b> ES," to the questio	r <b>government:</b> n, <u>STOP</u> ; you no	al body? eed not comple	••••			□ must sign th	NO his form.
4. Has or will the on county lobbying (A reporting period	ng activities du	ing the curre	nt reporting			□ YES	-	NO
5. Do you antici supervisors other (Do not count conta	than at public	hearings or m	eetings?			YES h you reside.)		NO
[If you checked "No more than 2 contac must also sign this J	ts at a later date, y	ou must then co	ontact the Cou	nty Clerk's of	fice to file d	a form indicatii		
6. If "YES," do spends more that financial disclosu [If you checked "No Building, Madison,	n \$500 during the statement with the control of the	ne current rep th the county County Clerk at	orting perioclerk?	d, you must	file a	□ YES		<b>NO</b> County
Date:				Signature				
				int Nama				

Committee Name:	Name: 💍	roline	Lex Joseph	
DATE: 4/25/20 T	Municipality: S	3cigham	Townsh	ip/edge
Petition/CUP #/Resolution/Ordinane	ce Amendment/Subject:	6 stue?	tounds	
	☐ Wish to Speak in Opposition☐ Registering in Opposition		lable for Inform	nation Only
1. On this occasion, are you officiall  [If you checked "NO," <u>STOP</u> ; you need no Name, address and telephone number of	D YES ot complete the rest of this form	NO . If you checked "	YES,'' go on to th	
Comments:				
2. Are you being paid for your reproof other paid duties for this person or [If you checked "NO" to the question, STO If you checked "YES," turn over to the new terms of the person of	organization?		□ YES	□ 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 on	vernmental body? TOP; you need not complete the	• • • • • • • • • • • • • • • • •		□ NO ust sign this form. If
4. Has or will the person or organiz on county lobbying activities during (A reporting period is January to June or f	the current reporting period		□ YES	□ NO
5. Do you anticipate making more to supervisors other than at public hea (Do not count contacts with the County Bo	rings or meetings?		☐ YES h you reside.)	□ NO
[If you checked "NO," to questions 4 and more than 2 contacts at a later date, you must also sign this form. If you checked "	nust then contact the County Cl	erk's office to file o	a form indicating	
6. If "YES," do you understand that spends more than \$500 during the confinancial disclosure statement with tagged [If you checked "NO" please call the Cound Building, Madison, for more information.	urrent reporting period, you he county clerk?nty Clerk at 266-4121 or go to t	u must file a	□ YES	□ NO the City-County
Date:	Signat	ure		
	Print Na	me		

Committee Name: Environment,	Ag. + NR Name: SAILY	mather		
DATE: 4/25/17	Municipality:		20000000000000000000000000000000000000	p. A. 100 (100 (100 (100 (100 (100 (100 (100
	inance Amendment/Subject: _ ೩೦١			
☐ Wish to Speak in Support  Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition	□ Available	e for Informa	ation Only
[If you checked "NO," <u>STOP</u> ; you n	icially representing an organization  YES  weed not complete the rest of this form. If y  when the complete the rest of this form is a complete the rest of this form.	NO you checked "YES,	" go on to the	
Comments:		A	····	· · · · · · · · · · · · · · · · · · ·
other paid duties for this perso	representation or appearing incident on or organization?	<b>D</b>	YES	□ NO
or for your municipality or other	who is appearing solely on behalf of yer governmental body?	<b></b> □		□ NO st sign this form.
	ganization you represent spend mor uring the current reporting period? ne or from July to December.)		YES	□ NO
supervisors other than at public	nore than 2 contacts with County Boc hearings or meetings?	П	YES u reside.)	□ NO
more than 2 contacts at a later date,	4 and 5 above, <u>STOP</u> ; you need not compayou must then contact the County Clerk's ked "YES" to either question at this time,	office to file a for	m indicating :	
spends more than \$500 during the financial disclosure statement w	d that if the person or organization yethe current reporting period, you mutth the county clerk?e County Clerk at 266-4121 or go to the Cation.]	ust file a	YES om 106A of t	□ NO he City-County
Date:	Signature			
	Print Name			

Committee Name: FANR	Name:			
DATE: 4/25/17	Municipa	ality: <u>Tol</u>	on of bennon-	+ Dane Ct,
Petition/CUP #/Resolution/Ordina	ance Amendment/Subje	ect: <u>2016</u>	Res-577	
☐ Wish to Speak in Support  Registering in Support	☐ Wish to Speak in O☐ Registering in Oppo		☐ Available for Informa	ation Only
1. On this occasion, are you offici	YES  d not complete the rest of the	his form. If you ch	necked "YES," go on to the	•
Name, address and telephone numb	er of each person of orga	unzation you are	representing.	
Comments:				
2. Are you being paid for your reother paid duties for this person [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? <u>STOP</u> ; you need not comp		□ YES	À NO
3. Are you an elected official who or for your municipality or other [If you checked "YES," to the question you checked "NO," to the question, go	governmental body?  a, <u>STOP</u> ; you need not com		YES	NO ust sign this form. I
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June	ing the current reportin	ag period?	nn \$500 □ YES	NO NO
5. Do you anticipate making mo supervisors other than at public I (Do not count contacts with the Count	hearings or meetings?		The trin which you reside.)	NO
[If you checked "NO," to questions 4 more than 2 contacts at a later date, you must also sign this form. If you checked	ou must then contact the C	ounty Clerk's offic	ce to file a form indicating	ver, if you do make such activity. You
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement wir [If you checked "NO" please call the Building, Madison, for more information	e current reporting per th the county clerk? County Clerk at 266-4121 c	riod, you must f	ile a □ YES	□ NO the City-County
Date: <u>April 25, 201</u>	7	Signature/_	Maion Sashi Maron Gaski	1 U
,		Print Name	haron Gaski	1/

Committee Name:	Name: Sugan Ludington
DATE: 4/25/2017	Municipality: Elve Monds
Petition/CUP #/Resolution/Ordinar	
☐ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Opposition  Registering in Opposition  ☐ Available for Information Only
y	lly representing an organization or a person other than yourself?  NO  not complete the rest of this form. If you checked "YES," go on to the next question.]
	of each person or organization you are representing:  Moveds Dd Blue Moveds W1 668 576-240  Mark D
Comments:	
other paid duties for this person or	resentation or appearing incidental to your organization?
or for your municipality or other go	is appearing solely on behalf of your office  overnmental body?
	zation you represent spend more than \$500 g the current reporting period?
supervisors other than at public hea	than 2 contacts with County Board  arings or meetings?   Board supervisor who represents the district in which you reside.)
more than 2 contacts at a later date, you	d 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make must then contact the County Clerk's office to file a form indicating such activity. You "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the c financial disclosure statement with	at if the person or organization you represent current reporting period, you must file a the county clerk?
Date: 425/2017	Signature Suas Substantia
	Print Name Susan Ludington

Committee Name:	Name:	Tanylun	LENS.	
DATE: 4-25-17	Municipality	r: (les	Morth	
Petition/CUP #/Resolution/Ordinal	nce Amendment/Subject:	517		
☐ Wish to Speak in Support  Registering in Support	☐ Wish to Speak in Oppo Registering in Oppositi		ilable for Inform	ation Only
1. On this occasion, are you officia			other than you	rself?
[If you checked "NO," <u>STOP</u> ; you need	not complete the rest of this fo	□ NO orm. If you checked '	'YES, " go on to th	e next question.]
Name, address and telephone number	r of each person or organiza	ation you are represe	enting:	
Comments:				
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, So If you checked "YES," turn over to the results.  3. Are you an elected official who or for your municipality or other go [If you checked "YES," to the question, you checked "NO," to the question, go of the checked "NO," to the question, go of the paid to	r organization?	he rest of this form.	□ YES	□ NO □ NO ust sign this form.
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	g the current reporting pe		□ YES	□ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County l	earings or meetings?	• • • • • • • • • • • • • • • • • • • •	TYES	□ NO
[If you checked "NO," to questions 4 an more than 2 contacts at a later date, you must also sign this form. If you checked	ı must then contact the County	Clerk's office to file	a form indicating	
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co" Building, Madison, for more information	current reporting period, the county clerk?unty Clerk at 266-4121 or go	you must file a	□ YES	□ NO he City-County
Date:	Sia	gnature		
			-	

Committee Name:	Name: Dim Schiller
DATE:	Municipality: Town of middleton
Petition/CUP #/Resolution/Ord	
☐ Wish to Speak in Support  ☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
[If you checked "NO," <u>STOP</u> ; you n	cially representing an organization or a person other than yourself?  NO  ed not complete the rest of this form. If you checked "YES," go on to the next question.]  ber of each person or organization you are representing:
Comments:	
other paid duties for this perso	representation or appearing incidental to your or organization?
or for your municipality or oth	ho is appearing solely on behalf of your office r governmental body?
4. Has or will the person or or on county lobbying activities du (A reporting period is January to Jun	ring the current reporting period?   YES  NO e or from July to December.)
supervisors other than at publi	hearings or meetings?
more than 2 contacts at a later date	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make you must then contact the County Clerk's office to file a form indicating such activity. You ked "YES" to either question at this time, go on to the next question.]
spends more than \$500 during financial disclosure statement	that if the person or organization you represent he current reporting period, you must file a ith the county clerk?
	$O \cdot O_{A \cdot A}$
Date: 4-25-17	Signature Sim Schilter  Print Name Dim Schilter
	Print Name Jim Schiller

Committee Name:	46 9/14-70 Name:	1744K	<u> </u>	
DATE: 4/25/17	Municipality	: <u>- Big = 111</u>	West / 1940	Marie Gillian
Petition/CUP #/Resolution/C	Ordinance Amendment/Subject:_	<u> CAGONA - 4</u>	<u>ismaj Mes</u>	<u> </u>
☐ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Oppos ☐ Registering in Opposition		vailable for Inform	ation Only
[If you checked "NO," <u>STOP</u> , y	officially representing an organical YES  ou need not complete the rest of this for the number of each person or organization.	NO NO Norm. If you checked	d "YES," go on to th	
Comments:				
other paid duties for this pe	our representation or appearing in erson or organization?		□ YES	□ NO
or for your municipality or	ial who is appearing solely on behother governmental body? uestion, <u>STOP</u> ; you need not complete ion, go on to the next question.]		$\dots$	NO ust sign this form. I
on county lobbying activitie	r organization you represent spenses during the current reporting per pure or from July to December.)	nd more than \$50 eriod?	00 □ YES	E NO
supervisors other than at pi	ng more than 2 contacts with Couublic hearings or meetings? County Board supervisor who represent			□ NO
more than 2 contacts at a later of	ions 4 and 5 above, <u>STOP</u> ; you need no date, you must then contact the County checked "YES" to either question at th	Clerk's office to f	ìle a form indicating	ver, if you do make such activity. You
spends more than \$500 dur	stand that if the person or organing the current reporting period, ent with the county clerk?	you must file a	<b>D</b> YES	□ NO the City-County
Date: 4/25/	Sig	gnature	<del></del>	
	Print	t Name	W CAND	

Committee Name: FANR Name: Laurie Garper  Name: Vermont  Municipality: Town of Vermont
DATE: 4/25/17 Municipality: Town of Vermont
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 2016 Resolution/Ordinance Amendment/Subject:
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  YES NO  [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]  Name, address and telephone number of each person or organization you are representing:
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?   1 YES INO [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: 4/25/17  Signature Jame Jame  Print Name Lavvic Garper

Committee Name: FANR	Name: Drv	12 Elderbrock	
DATE: 4/25/17	Municipality: P	Jue hours	
Petition/CUP #/Resolution/Ordina		_	
☐ Wish to Speak in Support  Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition	n □ Available for Inform	nation Only
1. On this occasion, are you offici	$\square$ YES $\square$ Inot complete the rest of this form.	NO  If you checked "YES," go on to the	
Comments:	·.		
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization?		□ NO
3. Are you an elected official who or for your municipality or other a [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? <u>STOP</u> ; you need not complete the r		□ NO ust sign this form. I
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June of	ng the current reporting period		□ NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?	<b>D</b> YES	□ NO
[If you checked "NO," to questions 4 a more than 2 contacts at a later date, yo must also sign this form. If you checked	u must then contact the County Cler	rk's office to file a form indicating	
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Common Building, Madison, for more information.	current reporting period, you the county clerk?	must file a	□ NO the City-County
Date:	Signatur	re	
	Print Nam	ne	,

Committee Name: <u>FAN</u>	Name: Jaman Kusmin  Municipality:	
DATE: 4/25/17	Municipality:	
Petition/CUP #/Resolution/C	Ordinance Amendment/Subject: 2016 Re5-577	
		Name of the Control o
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Available for Informa	tion Only
7 3 0 0 11		
	officially representing an organization or a person other than your□ YES □ NO	self?
[If you checked "NO," STOP; yo	ou 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	number of their person of organization jou die representing.	
Comments:	•	<del></del>
2. Are you being paid for you	our representation or appearing incidental to your	
	erson or organization?	□ NO
If you checked "YES," turn over		
3. Are you an elected officia	al who is appearing solely on behalf of your office	
or for your municipality or	other governmental body? YES	$\square$ NO
[If you checked "YES," to the questi you checked "NO," to the questi	uestion, <u>STOP</u> ; you need not complete the rest of this form except that you mus	t sign this form.
= 		
	r organization you represent spend more than \$500	
	s during the current reporting period?	LI NO
5 Do way antisinate malrin	ag more than 2 contacts with County Board	
	ag more than 2 contacts with County Board ablic hearings or meetings?   YES	□ NO
	County Board supervisor who represents the district in which you reside.)	
[If you checked "NO," to questic	ons 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. Howeve	er, if you do make
	late, you must then contact the County Clerk's office to file a form indicating s	uch activity. You
must also sign this form. If you c	checked "YES" to either question at this time, go on to the next question.]	
	stand that if the person or organization you represent	
	ng the current reporting period, you must file a nt with the county clerk? □ YES	□ NO
	nt with the county clerk?	
Building, Madison, for more info		
Data	Signature	
Date:	Signature	
	Print Name	