Committee Name: HHN	Name: SW	Fran Ho	ffuan		
DATE: 10/35/17 N	Municipality:	own of	Burka		
Petition/CUP #/Resolution/Ordinance Amendment		Jan 141	1(-1	and the same	
	eak in Opposition g in Opposition	☐ Available	for Informatio	n Onl	y
1. On this occasion, are you officially representing	ng an organization	or a person othe	r than yoursel	f?	
[If you checked "NO," <u>STOP</u> ; you need not complete the		NO you checked "YES,	" go on to the ne	xt que:	stion.]
Name, address and telephone number of each person	n or organization yo	u are representing	y:		
Comments:					
2. Are you being paid for your representation or other paid duties for this person or organization [If you checked "NO" to the question, <u>STOP</u> ; you need not fixed the you checked "YES," turn over to the next question.]	?		YES		NO
3. Are you an elected official who is appearing s or for your municipality or other governmental to [If you checked "YES," to the question, STOP; you need you checked "NO," to the question, go on to the next que	oody?t not complete the rest				NO s form. If
4. Has or will the person or organization you report on county lobbying activities during the current of (A reporting period is January to June or from July to De	reporting period?.		YES		NO
5. Do you anticipate making more than 2 contact supervisors other than at public hearings or meet (Do not count contacts with the County Board supervisors)	tings?	🗆	YES u reside.)		NO
[If you checked "NO," to questions 4 and 5 above, <u>STOI</u> more than 2 contacts at a later date, you must then contamust also sign this form. If you checked "YES" to either	act the County Clerk's	s office to file a form	n indicating sucl		
6. If "YES," do you understand that if the person spends more than \$500 during the current report financial disclosure statement with the county cle [If you checked "NO" please call the County Clerk at 26 Building, Madison, for more information.]	ting period, you meerk?	ust file a	YES om 106A of the C		NO ounty
Date:	SignaturePrint Name	S. Fran	res Ho	fm Ff	man

Committee Name: / HAN Name: RONA-UD BAR BETT
DATE: / 8 / 7 / Municipality:
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? ———————————————————————————————————
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? YES
Print Name RONATA BARREN

Committee Name: HHS	Name:	Eileen	Zeiger	
DATE: 10/25/17	Municipa		V	
Petition/CUP #/Resolution/Ordinal	nce Amendment/Subje	ect: HHM C	0-05	
☑ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in Oppo		☐ Available for Informat	ion Only
1. On this occasion, are you official [If you checked "NO," STOP; you need	YES			
Name, address and telephone number Rape Crisis Centre 2801 Coho St., Ma	•		e representing:	
Comments:				s
2. Are you being paid for your repother paid duties for this person of [If you checked "NO" to the question, Solution of the checked "YES," turn over to the	r organization? TOP; you need not comple		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 checked "NO," to the question, go of the question and question are the	governmental body? STOP; you need not comp		□ YES	□ NO t sign this form. If
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	ng the current reportin	g period?		□ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	earings or meetings?			□ 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	u must then contact the Co	ounty Clerk's offi	ice to file a form indicating s	
6. If "YES," do you understand to 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 perint the county clerk? Sounty Clerk at 266-4121 or	iod, you must i	file a DYES	□ NO ne City-County
Date: 10/25/17		Signature	12. Eileen Zeiger	
	·]	Print Name	meen Leiger	

Committee Name: HHN Name: Summer Herrmann
DATE: 10/75/17 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Dewent on Gundung
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 DO [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: Pape crisis (enter, 280) Coho St. Madison W1 53713
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: 10/25/17 Signature 9
Print Name Summer Hermann

Committee Name: HHN Name: Esther Olson
DATE: 10/25/17 Municipality: MONTROSE
Petition/CUP #/Resolution/Ordinance Amendment/Subject: /f/// - O - O - T / D
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: AREA AGENCY ON AGING
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? YES NO [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: 10/25/17 Signature Lasetul Colson Print Name Lesther Olson

Committee Name: HAHN Name: Jon Frazier
DATE: 10/25/17 Municipality: Mildle ton
Petition/CUP #/Resolution/Ordinance Amendment/Subject: # 2 + 10
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 D 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: Alex Agencyon Aging & Dane Co, Logiste Tive / Alocacy Commi
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? _ \text{YES} \text{NO} \text{ (If you checked "NO" to the question, \(\frac{STOP}{STOP} \); 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: 10/25/17 Signature Thurs L. Frazier

Committee Name: HPA/H + HVM	an Noeds Name:	Margar	set Carde	M	
DATE: 10/25/17	Municipa	lity:			
Petition/CUP #/Resolution/Ordina	nce Amendment/Subject	ct: Amenda	nent HHN-C)-01	
☑ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppor		☐ Available for	Information Only	у
1. On this occasion, are you officia	ally representing an org	anization or a		an yourself?	
[If you checked "NO," <u>STOP</u> ; you need	not complete the rest of th	is form. If you o	checked "YES," go	on to the next ques	ition.]
4	unity Alliance:		W Washin	gton Ave	
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 comple		YE	s o	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		Y		NO s form. Į
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June or	ng the current reporting			es e	NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	earings or meetings?		🗆 YI		NO
[If you checked "NO," to questions 4 armore than 2 contacts at a later date, you must also sign this form. If you checked	u must then contact the Co	unty Clerk's offi	ce to file a form in	dicating such activ	do make ity. You
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Communication of the pullding, Madison, for more information.	current reporting perion the county clerk? county Clerk at 266-4121 or	od, you must	file a	ES IN NOTES	NO ounty
Date: 10/25 /17		Signature 7	Margare M.	Laiden	
	F	Print Name	largaret 1	arden	

Committee Name: RONALD BARBETI
DATE: 10 / 26/27 / 17 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHN - 0 - 9
☐ 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?
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:
Print Name RUNARD BARBETT