REGISTRATION BEFORE COUNTY COMMIT Committee Name: 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? TYES [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 \square 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 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 (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 \square 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?...... [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

REGISTRATION BEFORE COUNTY COMMITTEE ('avousel **Committee Name:** DATE: Municipality: __ Petition/CUP #/Resolution/Ordinance Amendment/Subject: Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Registering in Support ☐ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? 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," 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 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?...... 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?...... [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.]

Print Name ____

Date:

Committee Name: Howland Name: Eric Howland								
DATE: Municipality: Municipality: HINL-D-da								
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? 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?								
Date: 1/1/2017 Signature True Howland Print Name Eine Howland								

Committee Name: HHN Name: Paul Saeman									
DATE: 11/1/17 Municipality: Madison									
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Amendment H N - 0-11									
☑ 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 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:									
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? ☐ 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: 1/117 Signature Paul Salman Print Name Paul Salman									

REGISTRATION BEFORE COUNTY BOARD
DATE: WII/17 Name: Joseph Volke
Item #/Petition/CUP # or Subject: / Municipality:
Amendment # 14
☐ 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:
Name, address and totophene names of each person of 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 "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?
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, <u>STOP</u> ; you need not complete the rest of this form. However, if
you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form
indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: Signature
Print Name

Committee Name; Haith Name: STEVE MAURICE
DATE: 11/1/17 Municipality: MAD(SON)
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CMC LEGAC SERVICES # 19
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: CAHOLIC MULTICULTURAL CENTRA
1862 BELDST MADISON, WI 53213
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? ☐ 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:

DATE: 1 1011 2017 Name: Janice Beers
Item #/Petition/CUP # or Subject: Municipality:
Item #/Petition/CUP # or Subject: Municipality:
Wish to Speak in Support □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP</u> ; you need 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:
Catholic Multiculteral Conlor (608) 661-3512
Catholic Multicultural Conter (608) 661-3512
Madison 53713
Comments:
Conments.
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
[If you checked "NO" to the question, <u>STOP</u> ; you need not complete the rest of this form. If you checked "YES," continue to the next question.]
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date:
Print Name Janice Bears

	Name: Waled Inanoon
DATE: NOV /1 /2017	Municipality:
Petition/CUP #/Resolution/Ordina	nnce Amendment/Subject: CENC begal sevvices
▶ Wish to Speak in Support□ Registering in Support	 ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you official	ally representing an organization or a person other than yourself?
[If you checked "NO," STOP; you need	l not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number	er of each person or organization you are representing:
Comments:	
other paid duties for this person	presentation or appearing incidental to your or organization?
or for your municipality or other	o is appearing solely on behalf of your office governmental body?
	nization you represent spend more than \$500 ng the current reporting period? □ YES □ NO or from July to December.)
supervisors other than at public h	re than 2 contacts with County Board nearings or meetings?
more than 2 contacts at a later date, yo	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make bu must then contact the County Clerk's office to file a form indicating such activity. You d "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement wit	that if the person or organization you represent e current reporting period, you must file a h the county clerk?
Date:	Signature
	Print Name Waled Thours

Committee Name:	REGISTRATION BEFORE COUNTY COMMITTEE
DATE:	Committee Name: Hearth & Humer Name: Alan Canacasco Rosso
Petition/CUT #/Resolution/Ordinance Amendment/Subject: CMC Securices 1/4	1 1 1 1 1 1 1 1 1
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	
YES NO	The A Consideration and Ballion and Ballio
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," <u>STOP</u> ; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
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," 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? If you checked "YES," to the question, STOP; 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? 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? Signature YES NO 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.]	Comments:
or for your municipality or other governmental body?	other paid duties for this person or organization?
on county lobbying activities during the current reporting period?	or for your municipality or other governmental body?
Supervisors other than at public hearings or meetings?	on county lobbying activities during the current reporting period? YES
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?	supervisors other than at public hearings or meetings? YES YO
spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?	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
	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
	Date: Nou 1st 2017 Signature Alan Cl

DATE: November 1, 2017 Name: Torrie Kopp Mueller
Item #/Petition/CUP # or Subject: Municipality: Madison IHN-0-09, HHN-C-01, HHN-0-14, Coordinated Entry
THIN SOT, THIN SON, THIN ON THE CONTRACTED CHINGS
1. On this accession, are you officially representing an argenization or a parent other than yourself?
1. On this occasion, are you officially representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:
Homeless Services Consortium of Dane Country
0
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?□XES□NO
[If you checked "NO" to the question, <u>STOP</u> ; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?□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. 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?
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.]
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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.]
$0 \circ 1 \circ 1$
Date: 11.1.17 Signature facility Signature
Date: 11.1.17 Signature facility Signature Formie Kupp Mueller

DATE: 11-1-17	Name: <u>Jeanne Erickson</u> Municipality: <u>Dane</u> Co.
Item #/Petition/CUP # or Subject:	Municipality: Dane Co
3017 Act-411-	Municipality: Dane Co. 44N-0-12, HHN-0-21
Wish to Speak in Support	□ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
1. On this occasion, are you officially	representing an organization or a person other than yourself? □NO
000	ot 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:	
person or organization?	s appearing solely on behalf of your office or for your municipality or
during the current reporting period (A reporting period is January to June	?
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if a later date, you must then contact the County Clerk's office to file a form o sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	t if the person or organization you represent spends more than \$500 , you must file a financial disclosure statement with the county clerk? □YES□NO
	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- formation.]
Date: 11-1-17	Signature James Break one
	Division E Francis E Francis X 500

DATE: ////17	Name:	Tia M	uray		
Item #/Petition/CUP # or Subject:	Municipal	ity: _ D<	uray co.		
2017 ACT 411 Amend HHN-012 HNN-0-64					
₩ish to Speak in Support ☐ Wish to Sp		ocition			
Registering in Support Registering			☐ Availabl	e for Information	Only
On this occasion, are you officially representing	an organiza	ation or a p	person other th	an yourself?	XNO
[If you checked "NO," <u>STOP;</u> you need not complete the	e rest of this	form. If yo	ou checked "YES	G," go on to the next	t question.]
Name, address and telephone number of each person of	or organizati	on you are	representing:		
Comments:					
2. Are you being paid for your representation of person or organization? [If you checked "NO" to the question, STOP; you not for you checked "YES," continue to the next question. 2. Are you are elected official who is appearing.	need not co	mplete the	e rest of this for	m. □YES	□NO
3. Are you an elected official who is appearing other governmental body?	need not d	complete t	he rest of this t	YES	□NO
4. Has or will the person or organization you reduring the current reporting period?(A reporting period is January to June or from July	epresent s	pend mor	e than \$500 o		
5. Do you anticipate making more than 2 conta hearings or meetings?				YES	NO
[If you checked "NO," to questions 4 and 5 above, you do make more than 2 contacts at a later date, indicating such activity. You must also sign this for the next question.]	you must t	hen conta	ct the County (Clerk's office to file	e a form
6. If "YES," do you understand that if the persoduring the current reporting period, you must f	ile a financ	cial disclo	sure stateme	nt with the coun	ty clerk?
[If you checked "NO" please call the County Clerk County Building, Madison, for more information.]					
Date:	Signatur	e_ (/u/	Thur	nu e	
	Print Nan	ne y /	Tia Muri	DKI	

Committee Name:_	HHN	Name:	20 0000	RODRIG	att			
DATE:	11/1/17	Municipality:	MADI					
Petition/CUP #/Rese	olution/Ordina	nce Amendment/Subject:	HHN	-0-08	- (31065	SUR	RUS
⊠Wish to Speak in Supplemental		☐ Wish to Speak in Opposit☐ Registering in Opposition		□ Availa	ble for I	nformatio	on On	ly
[If you checked "NO,"	STOP; you need	Ily representing an organization YES not complete the rest of this form t of each person or organization	n. If you) checked "Y	ES," go o			estion.]
Comments:								
other paid duties fo	or this person of to the question, <u>S</u>	resentation or appearing increase research or appearing increase research or complete the next question.]		E] YES			NO
or for your municip [If you checked "YES,	oality or other g " to the question,	is appearing solely on behale overnmental body?			. YE		□ sign th	NO is form. If
on county lobbying	activities durin	ization you represent spend g the current reporting peri from July to December.)			□ YES	S		NO
supervisors other th	nan at public he	e than 2 contacts with Count earings or meetings? Board supervisor who represents						NO
more than 2 contacts of	ıt a later date, yoı	nd 5 above, <u>STOP;</u> you need not a must then contact the County C "YES" to either question at this	lerk's off	ice to file a	form indi	cating su		
spends more than \$ financial disclosure	500 during the statement with please call the Co	hat if the person or organizal current reporting period, yet the county clerk?	ou must	file a	□ YE			NO County
Date:		Signa	ature					
		Print N	lame					<u></u>

Committee Name:_	MHN	Name:		RODRIGU	E E		
DATE:	11/1/17	Municipality: _	MADIS				
Petition/CUP #/Reso	olution/Ordina	nce Amendment/Subject:	HHN-	-0-09	#780K	DR	sucs
☐ Wish to Speak in S☐ Registering in Sup	5000000	☐ Wish to Speak in Opposit ☐ Registering in Opposition		☐ Available	for Informatio	n Only	
[If you checked "NO,"	STOP; you need	Ally representing an organiza	n. If you o) checked "YES,'	go on to the ne		ion.]
ivame, address and te	перионе натное	Tor each person or organization	on you ar	e representing		State & Market & State Co.	2B
Comments:		ч					
other paid duties fo	or this person of to the question, §	presentation or appearing in or organization?			YES		1O
or for your municip [If you checked "YES,	ality or other and to the question,	is appearing solely on behalgovernmental body?			YES that you must s	19 HISEO	O form. If
on county lobbying	activities duri	nization you represent spending the current reporting perion from July to December.)			YES		10
supervisors other th	an at public h	e than 2 contacts with Counterings or meetings? Board supervisor who represents		🗆	YES a reside.)		10
more than 2 contacts a	ıt a later date, yo	nd 5 above, <u>STOP</u> ; you need not u must then contact the County C d "YES" to either question at this	Clerk's offi	ice to file a forr	n indicating suc		
spends more than \$ financial disclosure	500 during the statement with please call the C	that if the person or organizate current reporting period, you the county clerk?ounty Clerk at 266-4121 or go to on.]	ou must	file a	YES om 106A of the	□ NO	
Date:		Sign	ature				
		Drint N	Jama				

REGISTRATION BEFORE COUNTY COMMITTEE					
Committee Name: HHW Name: RONALD BARBETT					
DATE: /// Z / / Municipality:					
Petition/CUP #/Resolution/Ordinance Amendment/Subject: AMEND MENOS 49					
☑ 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: SANCTUARY / W.C.					
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 \ 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 RONALD BARBET					

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/CUP # or Subject: Municipality: HHN-0-13 HHN-0-20 W Wish to Speak in Support ☐ Wish to Speak in Opposition Registering in Support ☐ Available for Information Only ☐ 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: Comments: 2. Are you being paid for your representation or appearing incidental to your other paid duties for this [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.] 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.] 4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?......\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-------MNO (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.]

Print Name Suc DeBuhy

Committee Name: H+HN Name: Shannon Maier
DATE: Wunicipality: MOOLSA-
Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHN-0-13 4 HHN-0-20
Wish to Speak in Support Wish to Speak in Opposition Registering in Support Registering in Opposition Registering in Opposition Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES DNO [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: AFSCME - Dave County Employed ASSO 720
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:
Print Name Shannoh Maier

Committee Name: HHV Name: Jim Krueger DATE: Nov. 2 2017 Municipality:
DATE: Nov. 2 2017 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHN-0-18
1. On this occasion, are you officially representing an organization or a person other than yourself? YES DNO [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: North [East cide Senior Coalition]
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:

REGISTRATION BEFORE COUNTY COMMITTEE					
Committee Name: HH N Name: Thelley Gaylond					
DATE: Municipality: Multiplication					
Petition/CUP #/Resolution/Ordinance Amendment/Subject: AHNO 3					
 □ 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? [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:					
 Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?					
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: Signature Shelley 5. Grandle Print Name Shelley 5. Grandle					
Į.					

Committee Name: HHN Name: Julie Genovese
DATE: Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: ##// 0 /3
□ 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 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:
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? 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. 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?
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 Julie Genover

Committee Name: HHN 13 Name	: DONNA FOX
DATE: 11/1/17 Munic	cipality:
Petition/CUP #/Resolution/Ordinance Amendment/Su	bject:
☐ Wish to Speak in Support	表(表)
☐ Registering in Support ☐ Registering in O	pposition
1. On this occasion, are you officially representing an YE [If you checked "NO," STOP; you need not complete the rest	
Name, address and telephone number of each person or of Canopy Center, 1457 E. Madison, W1 5370:	rganization you are representing: Washington Ave. #102
Comments:	
2. Are you being paid for your representation or apportunity of the paid duties for this person or organization? [If you checked "NO" to the question, STOP; you need not configure the checked "YES," turn over to the next question.]	YES D NO
3. Are you an elected official who is appearing solely or for your municipality or other governmental body? [If you checked "YES," to the question, STOP; you need not convolved the convolved "NO," to the question, go on to the next question.	Omplete the rest of this form except that you must sign this form. Ij
4. Has or will the person or organization you represe on county lobbying activities during the current repor (A reporting period is January to June or from July to Decemb	ting period? 🗆 YES 💢 NO
5. Do you anticipate making more than 2 contacts wis supervisors other than at public hearings or meetings. (Do not count contacts with the County Board supervisor who	? □ YES 📈 NO
	need not complete the rest of this form. However, if you do make County Clerk's office to file a form indicating such activity. You tion at this time, go on to the next question.]
6. If "YES," do you understand that if the person or spends more than \$500 during the current reporting prinancial disclosure statement with the county clerk?. [If you checked "NO" please call the County Clerk at 266-412 Building, Madison, for more information.]	period, you must file a
Date:	Signature DONNA FOX
	Print Name DONNA FOX

Committee Name: HHN 13 Name: Emply LTA
DATE: 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? 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: Canopy Center 1457 East Washington # 102 Madison wt 53704
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: Signature Smily H

Committee Name: e the tymon Name: amie tuh
DATE: Nov 1 201 Municipality: Madison
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?
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: Nov 1 2017 Signature Print Name Jamie Kuhr

Committee Name: HHN #22 Name: 3HARYL KATO
DATE: //// Municipality: DANE / MADISON
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? 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: THE RANGON PROSECT
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 (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
Drint Nama

Committee Name: 1/4+	Name:	enda	Jelly-6	ordy
DATE: 11-1-17	Munici	pality:	0	
Petition/CUP #/Resolution/O	rdinance Amendment/Sub	ject: HHN-b-1	3 & MAN-	0-20
Wish to Speak in Support O	☐ Wish to Speak in ©		vailable for Informa	ation Only
Registering in Support		No. Visi	COV EAS	Transiens .
	□ YES	NO NO	(Sep)	
[If you checked "NO," STOP; you	u need not complete the rest of	this form. If you checked	d "YES," go on to the	next question.]
Name, address and telephone n	number of each person or org	ganization you are repre	esenting:	
Comments:				
2. Are you being paid for you other paid duties for this per [If you checked "NO" to the quest If you checked "YES," turn over	rson or organization? tion, <u>STOP</u> ; you need not com		…□ YES	□ NO
3. Are you an elected official or for your municipality or of [If you checked "YES," to the question you checked "NO," to the question.	ther governmental body? estion, <u>STOP</u> ; you need not con		□ YES	□ NO st sign this form. I
4. Has or will the person or on county lobbying activities (A reporting period is January to	during the current reporti	ing period?		□ NO
5. Do you anticipate making supervisors other than at pul (Do not count contacts with the C	blic hearings or meetings?.			□ NO
[If you checked "NO," to question more than 2 contacts at a later domust also sign this form. If you contacts are also sign this form.	ite, you must then contact the C	County Clerk's office to fi	le a form indicating .	
6. If "YES," do you underst spends more than \$500 durin financial disclosure statemen [If you checked "NO" please call Building, Madison, for more info	ng the current reporting pe t with the county clerk? the County Clerk at 266-4121	riod, you must file a	□ YES	□ NO he City-County
Date:	-17	Signature	Mey	
		Print Name/		

DATE: Name: Tumewa Thoragon Moore Item #/Petition/CUP # or Subject: Municipality:
Item #/Petition/CUP # or Subject: Municipality:
2017 Act 411 HHN 0-14
Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Availa lole for Information Only
1. On this occasion, are you officially representing an organization or a person other to
[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?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? (Do not count contacts with the County Board supervisor who represents the district in which you reside.) [If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Cou
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: 11 17 Signature Class To Super No. 10

Committee Name: HHV	Name:	Jacob &	Inter			
DATE:	Municipa	ality: Made	SOM			
Petition/CUP #/Resolution/Ordina	nce Amendment/Subje	ect: HN	-0-09,	HHW-(-	Øl	_
☐ 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 official [If you checked "NO," STOP; you need Name, address and telephone number	I not complete the rest of the	his form. If you	O checked "YES,"	" go on to the n		.J
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 compl		□	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 body? STOP; you need not comp				□ NO sign this form	m.
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reportin	g period?	nan \$500	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 1 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	ou must then contact the Co	ounty Clerk's off	fice to file a form	n indicating suc		
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the C Building, Madison, for more information	e current reporting period the county clerk? ounty Clerk at 266-4121 or	iod, you must	file a □	YES om 106A of the	□ NO City-County	у
Date:	The state of the s	Signature Print Name	Jacob I	Snyker	*	_

Committee Name:_	HHN	Name:	NIND KODKIG	VEE	
DATE:	11/1/17	Municipality:	Vesicev		
Petition/CUP #/Reso	olution/Ordina	nce Amendment/Subject:	HHN-C-01	\$ BM FX	CAISIS CI
☑ Wish to Speak in : ☐ Registering in Sup		☐ Wish to Speak in Opposit ☐ Registering in Opposition		for Information	Only
[If you checked "NO,"	STOP; you need	ally representing an organization	n. If you checked "YES,"	go on to the next	question.]
Comments:					
other paid duties fo	or this person of to the question, §	presentation or appearing in or organization?		YES [I NO
or for your municip [If you checked "YES,	oality or other and the control of the question,	o is appearing solely on beha governmental body?		YES C that you must sign	NO this form. If
on county lobbying	activities durin	nization you represent spending the current reporting per or from July to December.)		YES	I NO
supervisors other th	han at public h	e than 2 contacts with Coun earings or meetings? Board supervisor who represent	🗖	IL ILLAND	□ NO
more than 2 contacts of	at a later date, yo	nd 5 above, <u>STOP</u> ; you need not u must then contact the County C d "YES" to either question at thi	Clerk's office to file a forr	n indicating such o	you do make activity. You
spends more than \$ financial disclosure	500 during the statement with please call the Co	chat if the person or organizate current reporting period, you have the county clerk?	ou must file a	YES □ om 106A of the Cit	. The state of the
Date:		Sign	ature		
		Drint N	Jame		

Committee Name: HH	Name:	Sonja	Worth	4	
DATE: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Municipa	lity: <u>M</u> Q	dison	V	
Petition/CUP #/Resolution/Ordina	nce Amendment/Subje	ct: HHK	P COI		
Wish to Speak in Support	☐ Wish to Speak in Op		(PLI) W 227 28 25	1000 Miles 2000 (1000)	0E-0 0E
☐ Registering in Support	☐ Registering in Oppo	sition	☐ Available	for Information	1 Only
1. On this occasion, are you official [If you checked "NO," STOP; you need Name, address and telephone number		is form. If you) checked "YES,"	go on to the ne	
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 comple			YES	□ 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? , <u>STOP</u> ; you need not comp			YES that you must si	□ NO gn this form.
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reporting			YES	□ NO
5. Do you anticipate making more supervisors other than at public has (Do not count contacts with the County	earings or meetings?		П	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 checke	ou must then contact the Co	unty Clerk's off	ice to file a form	n indicating sucl	if you do ma activity. Yo
6. If "YES," do you understand a spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Common Building, Madison, for more information.	e current reporting perich the county clerk? County Clerk at 266-4121 or	od, you must	file a □	YES om 106A of the C	□ NO City-County
Date:		Signature(Print Name	SUA- Sonia L	Jeg - Worth	

Committee Name:	Name:	whe Echenrod	
DATE: 11/2017	Municipality:	60,000000000000000000000000000000000000	29 Middle
Petition/CUP #/Resolution/Ordina	ance Amendment/Subject:	C-01,0-08,0-0	g
☐ Wish to Speak in Support ■ Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition	on Available for Information	mation Only
1. On this occasion, are you officially outlined the second of the secon		NO If you checked "YES," go on to	
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? STOP; you need not complete the r	YES	□ 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? , <u>STOP</u> ; you need not complete the	✓ YES	□ NO must sign this form. ↓
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June	ng the current reporting perio		□ NO
5. Do you anticipate making more supervisors other than at public has (Do not count contacts with the County)	earings or meetings?		□ 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	ou must then contact the County Cle	erk's office to file a form indication	
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement wit [If you checked "NO" please call the O Building, Madison, for more information. Date:	e current reporting period, you h the county clerk? County Clerk at 266-4121 or go to the	a must file a YES The Clerk's office at Room 106A of	□ NO of the City-County
	Print Na	me Luke Echens	, al

DATE: 11-1-2017	Name: Florencio Reves
Item #/Petition/CUP # or Subject:	Municipality: 1624 Forden We Madisas WI
☐ Wish to Speak in Support ☐ Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
1. On this occasion, are you official	ly representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need	I not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number	of each person or organization you are representing:
Comments:	
person or organization?	epresentation or appearing incidental to your other paid duties for this YES
other governmental body? [If you checked "YES," to the quest	o is appearing solely on behalf of your office or for your municipality or □ YES
4. Has or will the person or orga during the current reporting period (A reporting period is January to July 1997).	nization you represent spend more than \$500 on county lobbying activities od?□YES
hearings or meetings?	re than 2 contacts with County Board supervisors other than at public ———————————————————————————————————
you do make more than 2 contacts	4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form also sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting peri-	hat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	e County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Citye information.]
Date: _[- -2017	Signature Win Van
	Print Name Florencia Reves

DATE: 2017 -11-01	Name: Dan Stevens	
Item #/Petition/CUP # or Subject:	Name: Dan Stevens Municipality: City of Modrson	
HHN-C-01, 0-08, 0-09	, i	
	☐ Wish to Speak in Opposition☐ Registering in Opposition☐ Available for Information	n Only
On this occasion, are you officially r	representing an organization or a person other than yourself?	
	of complete the rest of this form. If you checked "YES," go on to the ne	NO ext question.]
Name, address and telephone number of	each person or organization you are representing:	
Comments:		
person or organization?	esentation or appearing incidental to your other paid duties STOP; you need not complete the rest of this form. next question.]	
other governmental body?	s appearing solely on behalf of your office or for your muni	□NO
	ration you represent spend more than \$500 on county lobby?□YES or from July to December.)	
hearings or meetings?	than 2 contacts with County Board supervisors other than a	□NO
(Do not count contacts with the County	y Board supervisor who represents the district in which you resi	de.)
you do make more than 2 contacts at	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. a later date, you must then contact the County Clerk's office to a sign this form. If you checked "YES" to either question at this	file a form
during the current reporting period,	t if the person or organization you represent spends more t , you must file a financial disclosure statement with the cou	inty clerk?
[If you checked "NO" please call the C County Building, Madison, for more in	□ YES County Clerk at 266-4121 or go to the Clerk's office at Room 106 formation.]	□ NO SA of the City-
Date: 2017 - 11 - 01	Signature	
	Print Name Dan Stevens	

Committee Name: HAC	Nama	COULDON	Becke	de	
DATE: 1872/2 11/1/17	Municipal	ity. Mi	lican		
Petition/CUP #/Resolution/Ordinal	nce Amendment/Subjec	t: <u> </u>	- D9 HHN - C	(-D), HHN-D	7-07/08/10
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppos		☐ Available	for Information	Only
1. On this occasion, are you officia	ally representing an orga	anization or	a person other	r than yourself	?
[If you checked "NO," <u>STOP</u> ; you need	YES	I NO	O		
Name, address and telephone number	r of each person or organ	ization you a	re representing	:	
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? <u>TOP</u> ; you need not complet			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 property	governmental body? <u>STOP</u> ; you need not compl			YES that you must sig	NO No If
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			YES	□ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	earings or meetings?			YES reside.)	□ 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 Cou	nty Clerk's off	ice to file a form	indicating such	
6. If "YES," do you understand the spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Consultation, Madison, for more information	current reporting period the county clerk?	d, you must	file a □	YES Community Transfer of the Community Tran	□ NO ity-County
Date:		Signature	927 2 nno 6	gen Rocker	

Committee Name: Name: VESSIE LAZO
DATE: Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHU-D~13 + HHW-0~20
 □ 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 [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? 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: Will 7 Signature Vessic & Lazzo Print Name Vessic & Lazzo

Committee Name: HEALTH AND HUMAN DEEDS Name: SHARRON HUBBARD - MOYER
DATE: Municipality: MADISON
Petition/CUP #/Resolution/Ordinance Amendment/Subject: #\N-0-13 # + \ \ \ \ \ \ \ \ \ \ \ \ \
☐ 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? 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?
Date: 117 Signature Shanon Hullbard Mayer Print Name SHARRON HURBARD - MOT BR

Committee Name: Health + Human Needs Name: Kerri Junieson
DATE: 11 2017 Municipality: Madison - Dane Co
Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHV-0-13 HHV-0-20
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? 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?
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:

Committee Name: HHW Name: JOSEP Lynch
DATE: 11/61/2017 Municipality: MADISON
Petition/CUP #/Resolution/Ordinance Amendment/Subject: WE LEGATER ChanGrants
☐ 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?
258 DIVISION STREET #2 MADISON, WIE 3704
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: 11/01/2017 Signature DSeph Lynch Print Name JUSEPh Lynch

Committee Name: #+ HN Name:	Connie Show Progressive Dane Party
DATE: ! [[[] Municip	pality:
Petition/CUP #/Resolution/Ordinance Amendment/Sub	ject: Mordalde Hausing + Mental Health 09, 011, 3
☐ Wish to Speak in Support ☐ Wish to Speak in G Registering in Support ☐ Registering in Opport	Opposition Quantity Available for Information Only
1. On this occasion, are you officially representing an o YES [If you checked "NO," STOP; you need not complete the rest of Name, address and telephone number of each person or org	NO this form. If you checked "YES," go on to the next question.]
· ·	
Comments:	
2. Are you being paid for your representation or appear other paid duties for this person or organization? [If you checked "NO" to the question, <u>STOP</u> ; you need not compute you checked "YES," turn over to the next question.]	YES \(\square\) NO
3. Are you an elected official who is appearing solely or or for your municipality or other governmental body? [If you checked "YES," to the question, <u>STOP</u> ; you need not con you checked "NO," to the question, go on to the next question.]	YES NO
4. Has or will the person or organization you represent on county lobbying activities during the current reporti (A reporting period is January to June or from July to December	ng period? □ YES □ NO
5. Do you anticipate making more than 2 contacts with supervisors other than at public hearings or meetings?. (Do not count contacts with the County Board supervisor who re	
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you more than 2 contacts at a later date, you must then contact the Comust also sign this form. If you checked "YES" to either question	County Clerk's office to file a form indicating such activity. You
6. If "YES," do you understand that if the person or or spends more than \$500 during the current reporting perfinancial disclosure statement with the county clerk? [If you checked "NO" please call the County Clerk at 266-4121 Building, Madison, for more information.]	riod, you must file a
Date:	Signature
	Print Name

REGISTI	RATION BEFORE COUNTY COMMITTEE
Committee Name:	Name: Valerie Kimble Dune Municipality: Madison nce Amendment/Subject: Affordable Housing & Mental
DATE: 11-1-2017	Municipality: Mulison
Petition/CUP #/Resolution/Ordina	nce Amendment/Subject: Affordable Housing & Mental Health
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officia	ally representing an organization or a person other than yourself?□ YES ☒ NO
	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number	r of each person or organization you are representing:
11	
Comments:	
other paid duties for this person o	oresentation or appearing incidental to your or organization?
or for your municipality or other g	is appearing solely on behalf of your office governmental body?
	nization you represent spend more than \$500 ng the current reporting period?
supervisors other than at public he	e than 2 contacts with County Board earings or meetings?
more than 2 contacts at a later date, you	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make a must then contact the County Clerk's office to file a form indicating such activity. You if "YES" to either question at this time, go on to the next question.]
spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Co Building, Madison, for more information	
Date: 11-1-2017	Print Name Valerie Kimble

Committee Name: H+HN Name: Nicholas Fuet7
DATE: 11/1/2017 Municipality: Madison - Bassett
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 0-09, C-01, 0-07, 0-08, 0-12
□ 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?
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 (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: November 1 2017 Signature Nicholas Pretz

Committee Name: HHV Name:	Dave Burger
DATE: Municipality:	Madison
Petition/CUP #/Resolution/Ordinance Amendment/Subject:	emc legal services 799
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Opposition	
1. On this occasion, are you officially representing an organiza	NO NO
Name, address and telephone number of each person or organization Deve Barger 3 Hempstead Pluce Mes (p) & 535 2460	
Comments:	
2. Are you being paid for your representation or appearing incother paid duties for this person or organization?	□ YES 💆 NO
3. Are you an elected official who is appearing solely on behal or for your municipality or other governmental body?	YES
4. Has or will the person or organization you represent spend on county lobbying activities during the current reporting perio (A reporting period is January to June or from July to December.)	
5. Do you anticipate making more than 2 contacts with Count supervisors other than at public hearings or meetings?	
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not more than 2 contacts at a later date, you must then contact the County C must also sign this form. If you checked "YES" to either question at this	'lerk's office to file a form indicating such activity. You
6. If "YES," do you understand that if the person or organiza spends more than \$500 during the current reporting period, you financial disclosure statement with the county clerk?	ou must file a YES NO
Date: Signa Print N	Tame Dave Barger

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 M Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? YES [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 or for your municipality or other governmental body?...... YES [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?..... 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?..... D NO [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.] Signature

Print Name

Committee Name: 1 Cath and 14	www Needs Name:	Mortin	Musedon	X	
DATE: 1/-111	Municina	ality: Modes	M		
Committee Name: Caff wal DATE: Petition/CUP #/Resolution/Ordina	ance Amendment/Subje	ect: HUN-	0-13	HHN-0-	-20
Wish to Speak in Support Registering in Support	☐ Wish to Speak in Oppo			le for Informatio	on Only
1. On this occasion, are you offici	ally representing an or	ganization or a	a person oth	er than yourse	lf?
[If you checked "NO," <u>STOP</u> ; you need	□ YES	NO)		
Name, address and telephone number	er of each person or orga	nization you ar	re representii	ng:	
Comments:					
2. Are you being paid for your re other paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? <u>STOP</u> ; you need not compl		□	YES	□ 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? , <u>STOP</u> ; you need not comp				□ NO ign this form. I
4. Has or will the person or orga on county lobbying activities duri (A reporting period is January to June of	ng the current reportin	g period?		YES	□ NO
5. Do you anticipate making more supervisors other than at public he (Do not count contacts with the County	nearings or meetings?				□ 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 checke	ou must then contact the Co	ounty Clerk's off	ice to file a fo	rm indicating suc	
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the Common Building, Madison, for more information.	e current reporting period the county clerk? County Clerk at 266-4121 o	iod, you must	file a □	1 1000000000000000000000000000000000000	□ NO City-County
Date:		Signature/	Muh.	I On dur.	V
		Print Name	1 11111	VIN Car y	

, REGISTRATION BEFORE COUNTY BOARD
DATE: Name: Blanca Cour
Item #/Petition/CUP # or Subject: Municipality:
7 Am + 411 Amd HMV 0-12 HHVV 0-6
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP</u> ; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:
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, <u>STOP</u> ; 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?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date:

Committee Name: Health & Human Name: Roberto Manez
DATE: \\ - \ - \ - \ - \ - \ - \ - \ - \ - \
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 17 17 - 0 - 13 - 17 17 10 - 20
□ 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? WES 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?
Date: 11-1-17 Signature Roberto Yanez-Huerta

REGISTRATION BEFORE COUNTY BOARD
DATE: 1/1/2017 Name: Bety Banks
Item #/Petition/CUP # or Subject: Municipality: Dave County 20 (7 Act-41/ Amoud HAN-0-12
2017 ACK-411 Amond HHN-0-12
☐ 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?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: 11/1/2017 Signature Detty Banks Print Name Betty Banks

Committee Name: HHN	Name:	RSTANA VAZO)
DATE: 11/01/(7	Municipality: \) ANE COUNT	1
Petition/CUP #/Resolution/Ordina	₩ W 2 9	N.O.09, HH	K-C-01,
☐ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Opposition ☐ Registering in Opposition	☐ Available for Info	rmation Only
1. On this occasion, are you officia		or a person other than yo	ourself?
[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 numbe	r of each person or organization yo	ou are representing:	
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	or organization? STOP; you need not complete the rest	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 body?	YES	□ NO must sign this form. If
4. Has or will the person or organ on county lobbying activities durin (A reporting period is January to June o	ng the current reporting period?.		□ NO
5. Do you anticipate making mor supervisors other than at public he (Do not count contacts with the County	earings or meetings?	D YES	□ NO
[If you checked "NO," to questions 4 as more than 2 contacts at a later date, you must also sign this form. If you checked	u must then contact the County Clerk'	's office to file a form indicati	
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, Madison, for more information.	current reporting period, you ment the county clerk?ounty Clerk at 266-4121 or go to the C	nust file a	□ NO of the City-County
Date:	Signature Print Name	(NAZOS

Committee Name: Health +	Tymen New Name:	Manlyh feil			
DATE: 11 17	Municipal	lity: Dane Cou	onty		79.0
Petition/CUP #/Resolution/Ordina	nce Amendment/Subject	ct: Casemanagement For	Nix -09	+ Boar	- CC
☐ Wish to Speak in Support Registering in Support	☐ Wish to Speak in Op ☐ Registering in Oppos	-	le for Information	sistickes on Only	5#2
1. On this occasion, are you official [If you checked "NO," STOP; you need Name, address and telephone number		NO is form. If you checked "YES	S," go on to the no		n.]
					3
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 comple		YES)
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? STOP; you need not compl	E		□ NO ign this fo	
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reporting		YES)
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?	🛘	YES ou reside.))
[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 Coi	unty Clerk's office to file a fo	rm indicating suc		
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with [If you checked "NO" please call the C Building, Madison, for more information	e current reporting perion the county clerk? county Clerk at 266-4121 or	od, you must file a	11	□ NO City-Coun	ty
Date:		Signature			_
	P	rint Name			

Committee Name: THN Name: CONNER (N±10)
DATE: 11/1 17 Municipality: MADISON /DANE COUNTY
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 1 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
☐ 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?
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:

REGISTRATION BEFORE COUNTY BOARD

DATE: Name: Tom Frazier Item #/Petition/CUP # or Subject: Municipality: Middle ton
□ Wish to Speak in Support □ Wish to Speak in Opposition Registering in Support HN -0 -18 Registering in Opposition □ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? ———————————————————————————————————
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: Nov. 1, 2017 Signature Jayer Print Name Thomas L. Frazier

Committee Name: Health and	Human Needs Name:	Maff Al	lve			
DATE: 11/1/17	Municij	pality: <u>Mad</u>	lison			
Petition/CUP #/Resolution/Ordinance Amendment/Subject: HHN-O-09, HHN-O-08, HHN-O-07, HHN-C-01						
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opp☐ Registering in Opp		□ Availab	le for Informa	ition On	ly
1. On this occasion, are you off [If you checked "NO," STOP; you n Name, address and telephone num	eed not complete the rest of	this form. If yo	NO ou checked "YE.	S," go on to the		estion.]
Comments:						
2. Are you being paid for your other paid duties for this perso [If you checked "NO" to the question If you checked "YES," turn over to be a second to the property of the pro	n or organization? n, <u>STOP</u> ; you need not comp			YES	П	NO
3. Are you an elected official wor for your municipality or other [If you checked "YES," to the question, you checked "NO," to the question,	er governmental body? on, <u>STOP</u> ; you need not con					NO is form. If
4. Has or will the person or or on county lobbying activities du (A reporting period is January to Jun	iring the current reporti	ng period?		1 YES		NO
5. Do you anticipate making m supervisors other than at public (Do not count contacts with the Coun	c hearings or meetings?.		П			NO
[If you checked "NO," to questions more than 2 contacts at a later date, must also sign this form. If you check	you must then contact the C	County Clerk's o	office to file a fo	orm indicating .		
6. If "YES," do you understan spends more than \$500 during to financial disclosure statement we [If you checked "NO" please call the Building, Madison, for more information.	the current reporting per with the county clerk? • County Clerk at 266-4121	riod, you mus	st file a			NO County
Date: 11/1/17		Signature <u>7</u>	Nathr al	Olie		
		Print Name	Mathew All	P.		