

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Margaret C. Olsen

Item #/Petition/CUP # or Subject:

Municipality: City Madison

2017 Budget/HH Needs 2/15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☒ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☒ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☒ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16 Name: Steph Stringer
 Item #/Petition/CUP # or Subject: 2017 Budget HAN/5 & 2 Municipality: Madison

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

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

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 (A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Chet Agni

Item #/Petition/CUP # or Subject:

Municipality: Madison

HHN Amendment (Restorative Justice) by Supervisor Young

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

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

Name, address and telephone number of each person or organization you are representing:
Wisconsin Council on Children & Families
555 W. Washington Ave, Suite 200

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

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(A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☒ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: Chet Agni
Print Name: Chet Agni

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Michael Davidson

Item #/Petition/CUP # or Subject:

Municipality: Dane County

2017 Budget, HHN 2, HHN 15

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

☐ YES ☒ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO

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

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☒ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Michael Davidson

Print Name Michael Davidson

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Angie Wyse Reeser

Item #/Petition/CUP # or Subject:

2017 Budget w/ HHN 2 & 15

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-19-16

Signature: Angie Wyse Reeser

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Mary E. Jacobs

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget HHN 2 v 15

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

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

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

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

Goodwill Industries
1302 Mendota St
Madison, WI 53714 608-246-3140

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?

.....☐ YES ☒ NO
(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?

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

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

.....☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-19-16

Signature Mary E. Jacobs

Print Name Mary E Jacobs

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: FRANCES BICKNELL

Item #/Petition/CUP # or Subject:

Municipality: MADISON

Support 2017 Budget to HAN 2 and 15!

SUBMITTED WRITTEN TESTIMONY

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Gina Shea

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget with HHN 2+15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?

..... ☐ YES ----- ☐ NO
(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?

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

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..... ☐ YES ----- ☐ NO
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Date: 10/19/16

Signature Gina Shea

Print Name Gina Shea

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Casey Behrend

Item #/Petition/CUP # or Subject:

Municipality: Madison

HHN-0-2 and HHN-0-15

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

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

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

[Signature]

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

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Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: Oct 19, 2016

Name: Christine With

Item #/Petition/CUP # or Subject:

Municipality: Windsor

HAW 2015 2017 Duport

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

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Comments:

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Robin Williamson

Item #/Petition/CUP # or Subject:

Municipality: Windsor

BUDGET HIN 2015

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

☐ YES ☒ NO

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

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

Comments:

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

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If you checked "YES," continue to the next question.]

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Maggie Dugan

Item #/Petition/CUP # or Subject:

Municipality: MADISON

2017 Budget - NNN 2 & NNN 15

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

1. On this occasion, are you officially representing an organization or a person other than yourself? ☐ YES ☒ NO
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Comments:

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3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

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 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: Maggie Dugan

Print Name: Maggie Dugan

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Melanie Witte

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget + HHN 2 +
HHN 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Melanie Witte

Print Name Melanie Witte

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Candy Knick

Item #/Petition/CUP # or Subject:

2017 Budget w/ HHW2 + 15

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Kristyn Chlebowski

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget w/ HHn 2 + 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature [Signature]

Print Name Kristyn Chlebowski

REGISTRATION BEFORE COUNTY BOARD

DATE: October 19, 2016

Name: Lucy Jackson

Journey Mental Health Center

Item #/Petition/CUP # or Subject:

Municipality: Madison, WI

HHN 2 & HHN 15

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☐ Available for Information Only

☒ Registering in Support

☐ Registering in Opposition

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

☐ YES

☒ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO

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

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(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature

Lucy Jackson

Print Name

Lucy Jackson

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Laura Zimmerman

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget HHA, HANIS

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Karen Neitzel

Item #/Petition/CUP # or Subject:

Municipality:

2017 Budget HHV2 ANN15

Dave Fitchburg

☐ 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 officially representing an organization or a person other than yourself?

☐ YES ☒ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☒ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☒ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☒ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Karen Neitzel

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Lean Baerischni

Item #/Petition/CUP # or Subject:

Municipality: Brooklyn

2017 Budget with HHN 2+15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]


4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: 
Print Name: Lean Baerischni

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Randy Klein

Item #/Petition/CUP # or Subject:

2017 Budget HHN2 §15

Municipality: Brodhead WI

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

☐ YES ☒ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10

Signature

Print Name

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Donald A Braun

Item #/Petition/CUP # or Subject:

Municipality: Cottage Grove

2017 Budget
HAN 2 HAN 15

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

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

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

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

Comments:

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

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

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4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO

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

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..... ☐ YES ----- ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Donald A Braun

Print Name Donald A Braun

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: SANDY BRAUND

Item #/Petition/CUP # or Subject:

Municipality: COTTAGE GROVE

2017 BUDGET
HHN 2 HHN 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

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

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(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Sandy Braund

Print Name SANDY BRAUND

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Todd Costello

Item #/Petition/CUP # or Subject:

Municipality: _____

2017 Budget w/HHNG + \$15

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

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

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

Community Living Alliance
1414 MacArthur R.D Madison, WI

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ----- ☐ YES ----- ☒ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ----- ☐ YES ----- ☒ NO
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(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-19-16

Signature Todd Costello

Print Name Todd Costello

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Stephanie

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget & HHN2 & HHN15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO

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

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(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: October 19, 2016

Name: Jamie Gulseth

Item #/Petition/CUP # or Subject:
2017 Budget HHN 2 HHN 15

Municipality: Madison

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____ Signature _____
 Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10.19.16

Name: Lynne R Nielsen

Item #/Petition/CUP # or Subject:

Municipality: Madison, WI (Dane Co.)

HAN #2 & #15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2014

Name: Deloris D Nash

Item #/Petition/CUP # or Subject:

Municipality: Madison

HHN #24 #15 + 2017 human Services Budget

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

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

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

Access to Independence
3810 Milwaukee ST.
Madison - 53717

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?☐ YES ☒ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form.
 If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?☐ YES ☒ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?☐ YES ☒ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?☐ YES ☒ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 8/21/10/19/14

Signature Deloris D Nash

Print Name Deloris D Nash

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Wendy Hecht

Item #/Petition/CUP # or Subject:

Municipality: Madison

HHN 2 + 15 + 2017 human services budget

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16
 Item #/Petition/CUP # or Subject:
HHN-0-2

Name: Jim Krueger
 Municipality: _____

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

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

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

North/Eastside Senior Coalition
1625 Northport Dr. Madison, WI 53704
(608) 243-5252

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?☐ YES ☒ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?☐ YES ☒ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?☐ YES ☒ NO
 (A reporting period is January to June or from July to December.)

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

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 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Christine Albertson

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget HUN 2, HUN 15

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

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

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

Juvary Mental Health Center, 85 Kessel Ct, Madison, WI
53711

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☒ NO
 (A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☒ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: [Signature]
 Print Name: Christine M. Albertson

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016

Name: DAVE DELAP

Item #/Petition/CUP # or Subject:

Municipality: MADISON

2017 BUDGET + HHN 2
HHN 15

PLEASE PROVIDE THE POS AGENCIES AS LARGE OF

- | | | |
|--|--|---|
| <input type="checkbox"/> Wish to Speak in Support | <input type="checkbox"/> Wish to Speak in Opposition | <u>A COST OF LIVING INCREASE AS POSSIBLE</u> |
| <input checked="" type="checkbox"/> Registering in Support | <input type="checkbox"/> Registering in Opposition | <input type="checkbox"/> Available for Information Only |

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

☐ YES ☒ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Suzanne Hanson

Item #/Petition/CUP # or Subject:
2017 Budget & HHN 2+15

Municipality: Sun Prairie

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10

Name: Jettie Purkes

Item #/Petition/CUP # or Subject:

Municipality: Madison

HHN #2 and #15, 2017 budget

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

☐ YES ☒ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

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

☐ YES ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-2016

Name: Jeff Bailey

Item #/Petition/CUP # or Subject:
H 117 2 ord 15

Municipality: Madison

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form.
 If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: BETH HOUEN

Item #/Petition/CUP # or Subject:

Municipality: MADISON

HTN #2 and #15 + 2017 budget

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Deborah Dove

Item #/Petition/CUP # or Subject:

Municipality: City of Madison

2017 budget and HHN 2 + 15

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

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

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

[Signature]

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Andrew Shea

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget with HHV 2 + 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form.
 If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: Andrew Shea

Print Name Andrew Shea

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Tim Cordon

Item #/Petition/CUP # or Subject:

Municipality: Madison

HHN #2 & #15 of 2017 Budget

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form.
 If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: Tim Cordon

Print Name: Tim Cordon

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Jane MacLean
Municipality: Dane County Town of Middleton

Item #/Petition/CUP # or Subject:

#2017 Budge & HAN 2-15

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

1. On this occasion, are you officially representing an organization or a person other than yourself? ☒ YES ☐ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Mary Solson

Item #/Petition/CUP # or Subject:

Municipality: Stoughton, work on
Pearl County

2017 Budget, HAN 2, HAN 15

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

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

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-19-16

Signature: Mary Solson

Print Name: Mary Solson

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016

Name: Amy Callahan

Item #/Petition/CUP # or Subject:

Municipality:

2017 BUDGET HHN 2 HHN 15

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

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

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

2017 BUDGET

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature: Amy Callahan

Print Name: Amy Callahan

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Kathryn Ring

Item #/Petition/CUP # or Subject:

Municipality: _____

HHN 15 - code for pos
HHN 2

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

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

Name, address and telephone number of each person or organization you are representing: Journey Mtlc
25 Kessel Ct
Madison, WI 53711

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☒ NO
(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: Kathryn Ring
Print Name: Kathryn Ring

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Teresa Rhodes

Item #/Petition/CUP # or Subject:

Municipality: Madison

HHN 24 15

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

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

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

REM Wisconsin Inc.
2005 W. Belknap Hwy Ste 100
Madison WI 53713

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?☒ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?☐ YES ☒ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-19-16

Signature Teresa Rhodes

Print Name Teresa Rhodes

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016
 Item #/Petition/CUP # or Subject: _____

Name: CARYL TERRELL
 Municipality: MADISON

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

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

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

CRANES, PO Box 3413 MADISON WI 53704

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?☐ YES ☒ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

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 (A reporting period is January to June or from July to December.)

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

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 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature: Caryl Terrell
 Print Name: CARYL TERRELL

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Heather Schaller

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget of HHN 2 & 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature: 

Print Name: Heather Schaller

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Theresa Leighton

Item #/Petition/CUP # or Subject:

Municipality: McFarland

2017 Budget & HHN 2 HHN 15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ----- ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-2016

Name: Lisa Swenson

Item #/Petition/CUP # or Subject:
2017 Budget HHA 2415

Municipality: Blanchardville

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016

Name: Kim Gobrecht

Item #/Petition/CUP # or Subject:

Municipality: Mt. Horeb

2017 Budget & HHN 2 & 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO
(A reporting period is January to June or from July to December.)

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016

Name: Ashley Beiter

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget and HHN 2 HHN 15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ----- ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature: Ashley Beiter

Print Name: Ashley Beiter

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2014

Name: Lynsey Sultze

Item #/Petition/CUP # or Subject:

Municipality: _____

2017 Budget + HHN2NNN15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/14

Signature

Print Name

Lynsey Sultze
Lynsey Sultze

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016

Name: Xue Timm

Item #/Petition/CUP # or Subject:

Municipality: MADISON

2017 Budget and HHN ~~2~~ and 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
..... ☐ YES ----- ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Xue Timm

Print Name XUE TIMM

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Margarita Barajas

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget & HHN2 and 15
HHN 15

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

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

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO

..... ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-19-16

Signature Margarita Barajas

Print Name Margarita Barajas

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Josie Ramirez

Item #/Petition/CUP # or Subject:

Municipality: Madison

2117 Budget #1 HHN 2
HHN 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-19-16

Signature Josie Ramirez

Print Name Josie Ramirez

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Dimitar Spasov
Municipality: Madison, Dane County

Item #/Petition/CUP # or Subject:
2017 Budget HHS HANS

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO
(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Grover Wilson

Item #/Petition/CUP # or Subject:
2017 Budget H12 H1N15

Municipality: Madison, Dane County

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO
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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Steven McDermott

Item #/Petition/CUP # or Subject:
2017 Budget HH2 HH NIS

Municipality: Madison, Dane County

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO
(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Angela Bork

Item #/Petition/CUP # or Subject:

Municipality: Neenah

2017 Budget HANZHNIS

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016

Name: GEOFF STREATOR

Item #/Petition/CUP # or Subject:

Municipality: Sun Prairie

2017 Budget w/ HHU 2 §15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

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(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature: [Signature]

Print Name: GEOFF STREATOR

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Jennifer Streater

Item #/Petition/CUP # or Subject:
2017 Budget w/ FTHN 2+15

Municipality: Sun Prairie

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

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(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature Jennifer Streater
Print Name Jennifer Streater

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Fred R. Swanson

Item #/Petition/CUP # or Subject: HHN 2
2017 Budget HHN 15

Municipality: Madison

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

☐ YES ☒ NO

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO

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

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(A reporting period is January to June or from July to December.)

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

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[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-19-16

Name: Paul A. Yochum

Item #/Petition/CUP # or Subject:

Municipality: Cross Plains

2017 Budget 0 HNN 2 \$15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/17

Name: Nichole Wright

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget HHN 2 + 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☒ NO *nw*
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☒ NO *nw*
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: William Szmanda

Item #/Petition/CUP # or Subject:

Municipality: Verona

2017 budget with HHN2 +15

☐ Wish to Speak in Support

☐ Wish to Speak in Opposition

☒ Registering in Support

☐ Registering in Opposition

☐ Available for Information Only

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ----- ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature 

Print Name William Szmanda

REGISTRATION BEFORE COUNTY BOARD

DATE: 10-29-16
Item #/Petition/CUP # or Subject: 2017 budget HHN2015

Name: Cole Miller
Municipality: Madison

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10-29-16

Signature: Cole Miller

Print Name: Cole Miller

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Sarah Cutler

Item #/Petition/CUP # or Subject:

Municipality: Brooklyn

2017 Budget with HHN 2 + 15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ----- ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Sarah Cutler

Print Name Sarah Cutler

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Valentine Oluchi

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget \$HHN 2 HHN 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form.
 If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Fallon Smith

Item #/Petition/CUP # or Subject:

Municipality: Madison Fitchburg

2017 Budget #H4N2 H4N15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: 
 Print Name: Fallon Smith

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/14

Name: Cody Campbell

Item #/Petition/CUP # or Subject:

Municipality: Fitchburg

2017 Budget + HHWZ HHN15

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

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

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

..... ☐ YES ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Catherine Buerger

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 budget HAN 2 HAN 15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
 [If you checked "NO" to the question, STOP; you need not complete the rest of this form.
 If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
 [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
 (A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ☐ NO
 (Do not count contacts with the County Board supervisor who represents the district in which you reside.)
 [If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
 [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature: Catherine Buerger

Print Name: Catherine Buerger

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/2016

Name: CASEY Thompson

Item #/Petition/CUP # or Subject:

Municipality: MADISON, WI

2017 HHN 2, HHN 15
BUDGET

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

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

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

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

Comments:

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

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

If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☒ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☒ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ----- ☒ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

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

..... ☐ YES ----- ☒ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/2016

Signature Cyfer
Print Name CASEY Thompson

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Emma Czarapata

Item #/Petition/CUP # or Subject:

Municipality: Madison

2017 Budget
HHN2 & HHN15

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ☐ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ☐ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: _____

Signature _____

Print Name _____

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/16

Name: Scott Ringer

Item #/Petition/CUP # or Subject:
2017 HAN 2 HAN 15

Municipality: Stoughton

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

↑ 3% COLA

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

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

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

Comments:

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

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

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☐ NO

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

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☐ NO

(A reporting period is January to June or from July to December.)

5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings? ☐ YES ----- ☐ NO

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ☐ YES ----- ☐ NO

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/16

Signature Scott Ringer

Print Name SCOTT RINGER

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/19/14

Name: Melissa Amati

Item #/Petition/CUP # or Subject:
2017 Budget Htz HHNIS

Municipality: Marona

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

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

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

Comments:

2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? ☐ YES ----- ☒ NO
[If you checked "NO" to the question, STOP; you need not complete the rest of this form.
If you checked "YES," continue to the next question.]

3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body? ☐ YES ----- ☒ NO
[If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]

4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ----- ☒ NO
(A reporting period is January to June or from July to December.)

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

[If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]

6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
..... ☐ YES ----- ☐ NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Date: 10/19/14

Signature: [Signature]
Print Name: Melissa Amati