Committee Name: ZLR Name: Alx Backley DATE: 3/27/18 Municipality: Albion
DATE: 3/27/18 Municipality: Albion
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Petition /1252 / CUP 024//
□ 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: Rock Road Co., Inc. 30/W. B-R Town! he Rd
608-752-8944
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk? ———————————————————————————————————
Date: 3/27/18 Signature Alan College

Committee Name: ZLR Name: MIKE GRUSS DATE: 3/27/18 Municipality: Albrox
DATE: 3/27/18 Municipality: Albrox
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Petitive 11252 / Cup 02411
☑ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES DO [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
[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: Rock Road Companies, The 301 W B-R Townline Rd, Janesville, WI
608-752-5944
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: 3/27/18 Signature In Fig. 18
Print Name MICHAEL E. GRUSB

Committee Name: 22 Your Name: Jim howard
DATE of Meeting: 3-27-18 Municipality You Reside in: Christiang
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 1/254
Wish to Speak in Support
☐ Wish to Register in Support ☐ Wish to Register in Opposition
Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?
☐ YES ☐ NO (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 Olerk's office at 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: <u>-3-27-18</u> Signature:
Printed Name: Jim Loueres

REGISTRATION BEFORE COUNTY COMMITTEE	
Committee Name: ZLR Your Name: Danrel Haas DATE of Meeting: 3-27-18 Municipality You Reside in: Town of Roxbury	
Petition/CUP #/Resolution/Ordinance Amendment/Subject:/	
Wish to Speak in Support	
☐ Wish to Register in Support ☐ Wish to Register in Opposition	
Available for Information Only	
1. On this occasion, are you officially representing an organization or a person other than yourself?	
☐ YES ❷ NO (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of the form. If you checked "YES" go 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, <u>STOP</u> ; you do not need to complete the rest of this form. If you checked "YEs go to the next question.)	S",
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 do not need to complete the rest of this form. If you checked "YE go to the next question.)	ES",
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities	es
during the current reporting period?	
5. Do you anticipate making more than two contacts with the County Board supervisors other than at pub	lic
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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>Howev</u> 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. If you checked "YES" to either question, please continue to the question below. You must a sign this form.)	
6. If you answered "YES" to question 5, 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	t
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 210 Martin Luther King Blvd., Room 106A for more information.	Jr.,
Date: 3-27-18 Signature: Daniel Haar	

Printed Name: Dank

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: Your Name: Davik Haas
DATE of Meeting: 3/27/18 Municipality You Reside in: town of Roxbory
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 1255
Wish to Speak in Support
☐ Wish to Register in Support ☐ Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information. Date: Signature: Signature:
Printed Name: Daw Haas

Committee Name: Your Name: Angela wiley
DATE of Meeting: 3/27/18 Municipality You Reside in: Mazoman & Town.
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 1256
Wish to Speak in Support
☐ Wish to Register in Support ☐ Wish to Register in Opposition
Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES NO (If you checked "NO" <u>STOP</u> ; you do not need to complete the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organization you are representing:
Megan Dettoss-Myer
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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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?? ロ YES ロ NO (If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: Signature: / ////
Printed Name: Phaela Wiley

Committee Name:	Your Name: Leene R. Layber
DATE of Meeting: <u>3-27-18</u>	Municipality You Reside in: Town ship of Cross Plain
Petition/CUP #/Resolution/Ordinance	Amendment/Subject: 11257
Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	☐ Wish to Register in Opposition
	Available for Information Only
☐ YES ☑ NO	representing an organization or a person other than yourself?
Name, address and telephone number of	f each person or organization you are representing:
COMMENTS:	
	sentation or appearing incidental to your other paid duties for this
person or organization? YES (If you checked "NO" to the question, <u>ST</u> go to the next question.)	
3. Are you an elected official who is a	appearing solely on behalf of your office or for your municipality or
other governmental body? ☐ YES (If you checked "YES" to the question, S' go to the next question.)	□ NO TOP; you do not need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organizat	tion you represent spend more than \$500 on county lobbying activities
during the current reporting period? (A reporting period is January to June, or	
5. Do you anticipate making more that	an two contacts with the County Board supervisors other than at public
	NO Board supervisor who represents the district in which you reside.)
if you do make more than 2 contacts at a	5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , a later date, you must then contact the County Clerk's office to file a form YES" to either question, please continue to the question below. You must also
6. If you answered "YES" to question spends more than \$500 during the cur	5, do you understand that if the person or organization you represent rrent reporting period, you must file a financial disclosure statement
with the County Clerk? ?	□ NO
(If you checked "NO" please call the Cou Blvd., Room 106A for more information.	unty Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date: Si	gnature:
Printe	ed Name:

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: Pour Name: 16 Rhard Hooky
DATE of Meeting: DATE of Meeting: Der Musicipality You Reside in: Der Musicipality You Reside in:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: DCFRE7-2619-17250
Wish to Speak in Support
☐ Wish to Register in Support ☐ Wish to Register in Opposition
Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES DO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: 3/3 / Signature:
Printed Name:

Committee Name: HRK L	1c Name: Ryan Kratky	
DATE: 3/27/2013	Name: <u>Ryan Kratky</u> Municipality: <u>Albion</u>	50 Th
Petition/CUP #/Resolution/Ord	linance Amendment/Subject:	
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposition☐ Registering in Opposition☐ Available for Information	tion Only
[If you checked "NO," <u>STOP</u> ; you n	ficially representing an organization or a person other than your need not complete the rest of this form. If you checked "YES," go on to the mber of each person or organization you are representing:	
Comments:		
other paid duties for this perso	representation or appearing incidental to your on or organization?	□ NO
or for your municipality or other	who is appearing solely on behalf of your office her governmental body?	□ NO t sign this form. Į
	rganization you represent spend more than \$500 uring the current reporting period? YES ne or from July to December.)	□ NO
supervisors other than at public	nore than 2 contacts with County Board ic hearings or meetings?	□ NO
more than 2 contacts at a later date,	4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, you must then contact the County Clerk's office to file a form indicating sucked "YES" to either question at this time, go on to the next question.]	
spends more than \$500 during financial disclosure statement v	nd that if the person or organization you represent the current reporting period, you must file a with the county clerk? Le County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the nation.]	□ NO ne City-County
Date: 3/34/36/8	Signature Print Name Print Name)

Committee Name:	ZLSR	Name:	Wade	P. Uysc	
		Municipality:			
Petition/CUP #/Resolut	tion/Ordinance	Amendment/Subject:	11262	se	
☐ Wish to Speak in Sup ▼Registering in Support		Wish to Speak in Opposit Registering in Opposition		Available for In	formation Only
1. On this occasion, ar	e you officially	representing an organiza	ation or a per	son other than	yourself?
the process and the second		each person or organization	* Om:	0.000	
Vade	Myse	- Wyser for Madison	Engineer	the	
Civil	Engincer	for Madison	1 Metro	School	Pistics
other paid duties for the [If you checked "NO" to the If you checked "YES," turn the second or for your municipality [If you checked "YES," to you checked "NO," to the second or will the personal terms of the second or the sec	his person or or the question, STOP or over to the next official who is a ty or other gove the question, STO question, go on to son or organizativities during the control of the son or organizativities during the control or organizativities during the son or organizativities during the control organizativities during	appearing solely on beharenmental body? DP; you need not complete the the next question.] tion you represent spend he current reporting per	rest of this form If of your office the rest of this form more than \$1	m. YES The results of the property of the pr	ou must sign this form. Į
supervisors other than	at public heari	an 2 contacts with Countags or meetings?rd supervisor who represent			, NO e.)
more than 2 contacts at a	later date, you mu	above, <u>STOP</u> ; you need not ast then contact the County C ES" to either question at thi	Clerk's office to	file a form indic	ating such activity. You
spends more than \$500 financial disclosure sta	during the cur tement with the ase call the County	if the person or organizatent reporting period, yet county clerk?	ou must file a	🗆 YES	
Date: 03/27	118	Sign	ature	Val	Lyse
		Print N	Name	ade 1.1	Nyse

Committee Name: 2	LR	_ Name:	MaH	Aunin	<u> </u>
DATE: 3 27	118	_ Municipality:		No.	l
Petition/CUP #/Resolution/		ment/Subject:	1124	,2	
☐ Wish to Speak in Support Registering in Support		Speak in Oppositio ing in Opposition		vailable for Info	rmation Only
1. On this occasion, are you [If you checked "NO," STOP;	ı officially represer	nting an organizati	on or a perso	on other than y	ourself?
					ine next question.
Name, address and telephone Madisan V. 545 W					0
545 W	- Dayton	St. Mad	'sin	53763	
Comments:	,				
2. Are you being paid for y other paid duties for this p [If you checked "NO" to the qu If you checked "YES," turn over	erson or organizati uestion, <u>STOP</u> ; you nee	ion? ed not complete the re		YES	□ NO
3. Are you an elected office or for your municipality or [If you checked "YES," to the questyou checked "NO," to the questyour checked "NO," to the questy the second seco	other government question, <u>STOP</u> ; you n	al body?eed not complete the		□ YES	NO must sign this form. I
4. Has or will the person of on county lobbying activitie (A reporting period is January to	es during the curre	nt reporting perio			NO
5. Do you anticipate maki supervisors other than at p (Do not count contacts with the	oublic hearings or m	neetings?			NO
[If you checked "NO," to quest more than 2 contacts at a later must also sign this form. If you	date, you must then co	ontact the County Cle	erk's office to f	ïle a form indicat	ing such activity. You
6. If "YES," do you under spends more than \$500 dur financial disclosure statem. [If you checked "NO" please can Building, Madison, for more in	ring the current repent with the county all the County Clerk a	oorting period, you clerk?	must file a		□ NO of the City-County
Date: 3/27/18	e e		ure	west /	They.
		Print Na	me <u>Ma</u>	Muew 2 - 1	-liming

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: County 2 only Your Name: Antre Kessen
DATE of Meeting: 2-27-18 Municipality You Reside in: Dave
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
Wish to Register in Support
Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? YES DO (If you checked "NO" STOP; you do not need to complete the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organization you are representing: Makeson Mutropulitan School District Mike Barry Payle Humin Blog Markeson Wt
Mike Barry Dayle Helmin Blodg Marloson 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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information. Date: 3-27- 18 Signature:
Printed Name: Hadren H. Kessenich

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: 2LR Your Name: Dance Doskocil
DATE of Meeting: By 3/27 Municipality You Reside in: Pleasant Spr. has.
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 11263 + 11264
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition
☐ Wish to Register in Support ☐ Wish to Register in Opposition
Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself? \[\subseteq \text{YES} \text{NO} \] (If you checked "NO" \(\frac{\text{STOP}}{\text{STOP}} \); you do not need to complete the rest of the form. If you checked "YES" go 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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: Signature: Dura
Printed Name: Dana Doskoci

Committee Name:	Your Name: CARY KARLS
DATE of Meeting: 3-27-/8 Municipa	ality You Reside in:
Petition/CUP #/Resolution/Ordinance Amendment/9	Subject:
Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Wish to Register in Support	☐ Wish to Register in Opposition
☐ Available	e for Information Only
1. On this occasion, are you officially representing VES NO (If you checked "NO" <u>STOP</u> ; you do not need to comple question.)	g an organization or a person other than yourself? ete the rest of the form. If you checked "YES" go to the next
Name, address and telephone number of each person	or organization you are representing:
SCOTT KALSCHEUR	
COMMENTS:	
2. Are you being paid for your representation or a	appearing incidental to your other paid duties for this
person or organization? YES NO (If you checked "NO" to the question, STOP; you do not go to the next question.)	ot need to complete the rest of this form. If you checked "YES",
3. Are you an elected official who is appearing sol	lely on behalf of your office or for your municipality or
other governmental body? ☐ YES ☐ NO (If you checked "YES" to the question, STOP; you do no go to the next question.)	not need to complete the rest of this form. If you checked "YES",
4. Has or will the person or organization you repre	esent spend more than \$500 on county lobbying activities
during the current reporting period? YES (A reporting period is January to June, or July to Decei	mber.)
5. Do you anticipate making more than two contact	cts with the County Board supervisors other than at public
hearings or meetings? YES NO (Do not count contacts with the County Board supervise)	or who represents the district in which you reside.)
if you do make more than 2 contacts at a later date, yo	P ; you do not need to complete the rest of this form. <u>However</u> , we must then contact the County Clerk's office to file a form question, please continue to the question below. You must also
	derstand that if the person or organization you represent g period, you must file a financial disclosure statement
with the County Clerk?? YES NO (If you checked "NO" please call the County Clerk at 20 Blvd., Room 106A for more information.	66-4121 or go to the Clerk's Office at 210 Martin Luther King Jr.,
Date: Signature:	1
Printed Name:	(Jokey in the

Committee Name:	ZLR	_ Your Name: _	DAN O'CALLAGITAN
DATE of Meeting: _ 3	-27-18 Municip	ality You Reside	in: City of Madison
	tion/Ordinance Amendment/		
Wish to Spea	ak in Support		Wish to Speak in Opposition
☐ Wish to Regi	ister in Support		Wish to Register in Opposition
	☐ Availabl	e for Information (Only
YES	□ NO		or a person other than yourself? form. If you checked "YES" go to the next
Name, address and tele	ephone number of each person	or organization y	ou are representing:
ATST COL	۲۶.		
•			# =
COMMENTS:			
2. Are you being paid	d for your representation or	appearing incide	ntal to your other paid duties for this
person or organization (If you checked "NO" to go to the next question.	the question, <u>STOP</u> ; you do no	ot need to comple	te the rest of this form. If you checked "YES",
3. Are you an elected		lely on behalf of	your office or for your municipality or
other governmental be (If you checked "YES" to go to the next question.	to the question, STOP; you do i	not need to compl	ete the rest of this form. If you checked "YES",
4. Has or will the per-	son or organization you repr	esent spend moi	e than \$500 on county lobbying activities
	oorting period?	NO ember.)	
5. Do you anticipate	making more than two conta	cts with the Cou	nty Board supervisors other than at public
hearings or meetings' (Do not count contacts		sor who represent	s the district in which you reside.)
if you do make more that	an 2 contacts at a later date, ye	ou must then cont	ed to complete the rest of this form. <u>However,</u> act the County Clerk's office to file a form continue to the question below. You must also
			he person or organization you represent ust file a financial disclosure statement
with the County Clerk (If you checked "NO" pi Blvd., Room 106A for n	lease call the County Clerk at 2	266-4121 or go to	the Clerk's office at 210 Martin Luther King Jr.,
Date: 3-27-1	Signature:	(Lane	
	Printed Name:	DAN OVAL	eacher!

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: 21R Your Name: Jin Jermain
DATE of Meeting: 3/27/18 Municipality You Reside in: Dane County
Petition/CUP #/Resolution/Ordinance Amendment/Subject: CUP 2396
Wish to Speak in Support Wish to Speak in Opposition
☐ Wish to Register in Support ☐ Wish to Register 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 do not need to complete the rest of the form. If you checked "YES" go to the next question.)
Name, address and telephone number of each person or organization you are representing: NTHT 3/6 William How Loop 46/
Mado as WI 58703 - 608-252-2359
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 do not need to complete the rest of this form. If you checked "YES", go 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 do not need to complete the rest of this form. If you checked "YES", go 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 July to December.)
5. Do you anticipate making more than two contacts with the 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, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However</u> , 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. If you checked "YES" to either question, please continue to the question below. You must also sign this form.)
6. If you answered "YES" to question 5, 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 210 Martin Luther King Jr., Blvd., Room 106A for more information.
Date: 3/27/18 Signature: Suffler
Printed Name: Sim Jermaja

Committee Name: _		Your Name: Michael Tacopetti
DATE of Meeting: _	3/27/18	Municipality You Reside in: <u>City of madison</u>
Petition/CUP #/Res	olution/Ordinance /	Amendment/Subject: <u>(UP 2396</u>
☑ Wish to S	peak in Support	☐ Wish to Speak in Opposition
☐ Wish to R	egister in Support	☐ Wish to Register in Opposition
		☐ Available for Information Only
☑ YES	□ NO	representing an organization or a person other than yourself?
Name, address and	telephone number of	f each person or organization you are representing:
SAC wireless	on behalf of	ATOT
540 W. madi	son St., Ilem F	-loor, Chicago, IL (0014)
COMMENTS:		
2. Are you being p	aid for your repres	sentation or appearing incidental to your other paid duties for this
person or organiza (If you checked "NO go to the next questi	to the question, <u>ST</u>	□ NO OP; you do not need to complete the rest of this form. If you checked "YES",
other governmenta	I body? TYES " to the question, S	nppearing solely on behalf of your office or for your municipality or NO TOP; you do not need to complete the rest of this form. If you checked "YES",
4. Has or will the p	erson or organizat	tion you represent spend more than \$500 on county lobbying activities
during the current (A reporting period is	-	
5. Do you anticipa	te making more tha	an two contacts with the County Board supervisors other than at public
hearings or meeting (Do not count contact		NO Board supervisor who represents the district in which you reside.)
if you do make more	than 2 contacts at a	5 above, <u>STOP</u> ; you do not need to complete the rest of this form. <u>However,</u> a later date, you must then contact the County Clerk's office to file a form YES" to either question, please continue to the question below. You must also
		5, do you understand that if the person or organization you represent rrent reporting period, you must file a financial disclosure statement
with the County Cle (If you checked "NO Blvd., Room 106A fo	" please call the Cou or more information.	□ NO unty Clerk at 266-4121 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date: 3 27 17	Si	gnature: Michigany
	Printe	ed Name: Michael Tacopetti