REGISTRATION BEFORE COUNTY COMMITTÉE

Committee Name: Public	War & DET Name: Ron Wolfe
DATE: 7/17/7018	Work \$187 Name: Ron Wolfe Municipality: Town of Spring gield
Petition/CUP #/Resolution/Ordi	
☐ 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 offi	cially representing an organization or a person other than yourself?
[If you checked "NO," STOP; you ne	eed not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone num	ber of each person or organization you are representing:
Comments:	
[If you checked "NO" to the question If you checked "YES," turn over to the3. Are you an elected official whor for your municipality or other	no is appearing solely on behalf of your office r governmental body?
	anization you represent spend more than \$500 ing the current reporting period?
supervisors other than at public I (Do not count contacts with the Count	re than 2 contacts with County Board hearings or meetings?
more than 2 contacts at a later date, ye	ou must then contact the County Clerk's office to file a form indicating such activity. You do "YES" to either question at this time, go on to the next question.]
pends more than \$500 during the inancial disclosure statement wit	ounty Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County
Date: 07/17/2018	Signature Thom Wall
	Print Name Ron Wolfe