REGIS	STRATION BEFORE	E COUNTY	COMMITTEE	
Committee Name: Leks duck	Name:	B0 6	Upho SF	
DATE: 12~13~18	Municip	oality: Tou	un & Dunn	
Petition/CUP #/Resolution/Ordi	inance Amendment/Subj	ect: 20/8	OA-028	creating Chyth
☐ Wish to Speak in Support ☐ Registering in Support	₩ish to Speak in (☐ Registering in Opp		☐ Available for Info	rmation Only
1. On this occasion, are you offi	icially representing an or	rganization or		ourself?
[If you checked "NO," <u>STOP</u> ; you no	eed not complete the rest of i	his form. If you		the next question.]
Name, address and telephone num	nber of each person or orga	anization you a	re representing:	
Comments:				
If you checked "NO" to the question If you checked "YES," turn over to t  3. Are you an elected official wor for your municipality or othe [If you checked "YES," to the question, go wheeled "NO," to the question, go to the question, go wheeled "NO," to the question, go to county lobbying activities due (A reporting period is January to June).	he next question.]  ho is appearing solely on r governmental body? on, STOP, you need not compo on to the next question.] canization you represent ring the current reporting	behalf of your  plete the rest of t  spend more th  g period?	r office	NO nust sign this form. If
5. Do you anticipate making me supervisors other than at public (Do not count contacts with the Count [If you checked "NO," to questions 4 more than 2 contacts at a later date, must also sign this form. If you checked	hearings or meetings? ty Board supervisor who repart and 5 above, <u>STOP</u> ; you newou must then contact the Co	oresents the distri ed not complete ounty Clerk's offi		NO  wever, if you do make ag such activity. You
6. If "YES," do you understand spends more than \$500 during the financial disclosure statement will fine the control of the co	ne current reporting per ith the county clerk? County Clerk at 266-4121 o	iod, you must t	file a 	□ NO f the City-County
Date:	· · · · ·	Signature	·	
		Print Name		·

## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Name:	Jeff En In	23	
DATE:			· .	
Petition/CUP #/Resolution/Ordinan				
	■ Wish to Speak in Oppo			
☐ Registering in Support	☐ Registering in Opposit	ion $\square$ Ava	ilable for Inform	ation Only
1. On this occasion, are you official  [If you checked "NO," STOP; you need not be addressed and telephone number		NO No. If you checked	"YES," go on to th	
Comments:				
2. Are you being paid for your reprother paid duties for this person or [If you checked "NO" to the question, SI If you checked "YES," turn over to the new teacher than the second seco	organization?		.□ YES	NO NO
3. Are you an elected official who is or for your municipality or other go [If you checked "YES," to the question, So you checked "NO," to the question, go on	vernmental body? TOP; you need not complete	**********	□ YES except that you mu	NO st sign this form. 1
4. Has or will the person or organiz on county lobbying activities during (A reporting period is January to June or t	the current reporting p	nd more than \$500 eriod?	□ YES	⊠ NO
5. Do you anticipate making more supervisors other than at public hea (Do not count contacts with the County B	rings or meetings?	• • • • • • • • • • • • • • • • • • • •	☐ YES ch you reside.)	⊠° NO
[If you checked "NO," to questions 4 and more than 2 contacts at a later date, you t must also sign this form. If you checked '	must then contact the County	Clerk's office to file	a form indicating :	ver, if you do make such activity. You
6. If "YES," do you understand that spends more than \$500 during the confinancial disclosure statement with the [If you checked "NO" please call the Country Building, Madison, for more information.	urrent reporting period, he county clerk?nty Clerk at 266-4121 or go	you must file a	□ YES	□ NO ne City-County
Date:	Sig	nature		
	Drint	Name		

## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Name: Chuck RiPP
DATE: 12-13-18 Municipality: DANE
Petition/CUP #/Resolution/Ordinance Amendment/Subject:
☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Support ☐ Registering in Opposition ☐ Available for Information Only
1. On this occasion, are you officially representing an organization or a person other than yourself?  If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.  Name, address and telephone number of each person or organization you are representing:
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period? ☐ YES ☐ NO (A reporting period is January to June or from July to December.)
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if you do ma more than 2 contacts at a later date, you must then contact the County Clerk's office to file a form indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go on to the next question.]
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: Signature
Print Name

REGISTRATION BEFORE COUNTY COMMITTEE
Committee Name: EANR Name: M. KAY Hoffman
DATE: 12-13-18 Municipality:
Petition/CUP #/Resolution/Ordinance Amendment/Subject: Manure management
<ul> <li>□ Wish to Speak in Support</li> <li>□ Registering in Support</li> <li>□ Registering in Opposition</li> <li>□ Available for Information Only</li> </ul>
1. On this occasion, are you officially representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP</u> ; you need not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization you are representing:
Comments:
other paid duties for this person or organization?   [If you checked "NO" to the question, STOP; you need not complete the rest of this form.  If you checked "YES," turn over to the next question.]  3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?   [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.]
4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities during the current reporting period?
5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?
6. If "YES," do you understand that if the person or organization you represent spends more than \$500 during the current reporting period, you must file a financial disclosure statement with the county clerk?
Date: Signature
Print Name