REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Pablic	Vall Name:	Carl	1 Will	i au S		
Committee Name: Phblic DATE: 3/26/19	Munici	pality: 2	001 Fr	uschRo)	
Petition/CUP #/Resolution/Ordina	ance Amendment/Sub	ject:Se	2 6	07		
☐ Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in © ☐ Registering in Opp	~ ~	□ Availab	le for Informa	tion Onl	v
1. On this occasion, are you offici	ially representing an o	rganization o	or a person oth NO ou checked "YES	ner than your	self?	•
Name, address and telephone numb						
Comments:	,					
2. Are you being paid for your re other paid duties for this person of [If you checked "NO" to the question, If you checked "YES," turn over to the	or organization? STOP; you need not comp			YES	Ø	NO
3. Are you an elected official who or for your municipality or other [If you checked "YES," to the question, you checked "NO," to the question, go	governmental body? , <i>STOP</i> ; you need not con		E			NO s form. Ij
4. Has or will the person or organon county lobbying activities during (A reporting period is January to June of	ng the current reporti	ng period?		YES		NO
5. Do you anticipate making mor supervisors other than at public h (Do not count contacts with the County	earings or meetings?		□	YES ou reside.)		NO
If you checked "NO," to questions 4 a more than 2 contacts at a later date, yo must also sign this form. If you checked	ou must then contact the C	ounty Clerk's o	office to file a for	rm indicating si		
6. If "YES," do you understand to spends more than \$500 during the financial disclosure statement with the ground checked "NO" please call the Communication of the communication	e current reporting per h the county clerk? ounty Clerk at 266-4121 (riod, you mus	st file a			(O ounty
Date: 3/26/19		Signature	Cul (av)	lulle	*	
		Duint Mama	(art	en, ((1 on E	