REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Name:	CV	Vitolo	Had	dad
DATE: 5/7/19	Municip	ality:	Machiso		
Petition/CUP #/Resolution/Ordinance	Amendment/Subj	ect:	Jai	Fund	ling
	Wish to Speak in C Registering in Opp		□ Avail	able for Infor	mation Only
1. On this occasion, are you officially r [If you checked "NO," <u>STOP</u> ; you need not o Name, address and telephone number of e	TYES complete the rest of t	his form. If	NO you checked "Y	ES," go on to	
Comments:	,				
2. Are you being paid for your represe other paid duties for this person or org [If you checked "NO" to the question, STOP; If you checked "YES," turn over to the next of	ganization?			□ YES	₽ №
3. Are you an elected official who is ap or for your municipality or other gover [If you checked "YES," to the question, STOD you checked "NO," to the question, go on to	nmental body? 2; you need not comp				NO NO nust sign this form. Ij
4. Has or will the person or organization county lobbying activities during the (A reporting period is January to June or from	e current reportin	g period?.		□ YES	NO NO
5. Do you anticipate making more than supervisors other than at public hearing (Do not count contacts with the County Board)	gs or meetings?		I	YES you reside.)	NO NO
[If you checked "NO," to questions 4 and 5 a more than 2 contacts at a later date, you must must also sign this form. If you checked "YES	t then contact the Co	unty Clerk's	s office to file a	form indicatin	
6. If "YES," do you understand that if spends more than \$500 during the currefinancial disclosure statement with the [If you checked "NO" please call the County Building, Madison, for more information.]	ent reporting pericounty clerk?	od, you m	ust file a	□ YES	□ NO f the City-County
Date: _5/7/19		Signature _		Molo-vtad	daal
		Print Name	(4) (I	VIG - WO	V UPX