REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: PP&J/PW+T	_ Name: Sonja Worthy	
DATE: 5 7/19	_ Municipality: Dave, District	2
Petition/CUP #/Resolution/Ordinance Amend	Iment/Subject: <u>CI ACA 28</u>	
	o Speak in Opposition ering in Opposition □ Available for Informa	tion Only
1. On this occasion, are you officially represe	e the rest of this form If you checked "YES," go on to the	
Comments:		<u> </u>
2. Are you being paid for your representation other paid duties for this person or organizate [If you checked "NO" to the question, STOP; you ne If you checked "YES," turn over to the next question	tion? YES eed not complete the rest of this form.	NO NO
3. Are you an elected official who is appearing or for your municipality or other government [If you checked "YES," to the question, STOP; you not you checked "NO," to the question, go on to the next	tal body? YES need not complete the rest of this form except that you mus	NO t sign this form. Į
4. Has or will the person or organization you on county lobbying activities during the curre (A reporting period is January to June or from July to	ent reporting period? □ YES	NO
5. Do you anticipate making more than 2 consupervisors other than at public hearings or making not count contacts with the County Board supervisors.		NO
more than 2 contacts at a later date, you must then co	TOP; you need not complete the rest of this form. However, ontact the County Clerk's office to file a form indicating stather question at this time, go on to the next question.]	
6. If "YES," do you understand that if the pespends more than \$500 during the current repfinancial disclosure statement with the county [If you checked "NO" please call the County Clerk a Building, Madison, for more information.]	porting period, you must file a	□ NO e City-County
Date:	Signature	
	Print Name Sonja World	72