REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: PPJ PWT Name:	Stefanie Haima
DATE: 5/7/19 Munici	
Petition/CUP #/Resolution/Ordinance Amendment/Subject: 128	
☐ Wish to Speak in Support ☐ Wish to Speak in ☐ Registering in Support ☐ Registering in Op	**
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 or for your municipality or other governmental body?. [If you checked "YES," to the question, STOP; you need not conyou checked "NO," to the question, go on to the next question.]	
4. Has or will the person or organization you represen on county lobbying activities during the current reporting (A reporting period is January to June or from July to December	ing period? □ YES ♥ NO
5. Do you anticipate making more than 2 contacts with supervisors other than at public hearings or meetings?. (Do not count contacts with the County Board supervisor who re	□ YES □ NO
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you n more than 2 contacts at a later date, you must then contact the C must also sign this form. If you checked "YES" to either questic	
6. If "YES," do you understand that if the person or or spends more than \$500 during the current reporting pe financial disclosure statement with the county clerk? [If you checked "NO" please call the County Clerk at 266-4121 Building, Madison, for more information.]	eriod, you must file a
Date: 5/1/9	Signature State Adding
	Print Name Stefance Hains