DATE: 8-15-19	Name: JEFF	MOERKE
Item #/Petition/CUP # or Subject:	Municipality:	
Wish to Speak in Support     Registering in Support	<ul><li>☐ Wish to Speak in Opposition</li><li>☐ Registering in Opposition</li></ul>	☐ Available for Information Only
1. On this occasion, are you officially	/ representing an organization or a pe	erson other than yourself?
[If you checked "NO," <u>STOP;</u> you need t	not complete the rest of this form. If you	∴ □YESXNO I checked "YES," go on to the next question.]
Name, address and telephone number of	of each person or organization you are r	epresenting:
Comments:		
	, <u>STOP;</u> you need not complete the	tal to your other paid duties for this □YES□NO rest of this form.
other governmental body?	on, <u>STOP</u> ; you need not complete th	rour office or for your municipality or
	d?	than \$500 on county lobbying activities □YES□NO
		rd supervisors other than at public □YES□NO s the district in which you reside.)
you do make more than 2 contacts a	at a later date, you must then contact	complete the rest of this form. However, if t the County Clerk's office to file a form ES" to either question at this time, go on to
during the current reporting perio	d, you must file a financial disclos	ou represent spends more than \$500 sure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 or go to the	he Clerk's office at Room 106A of the City-
Date: 8-15-19	Signature	SEFERY S. MOERKE
	Print Name	JEFFERY S. MOERKE

DATE: 3/15/19	Name:	aura force
Item #/Petition/CUP # or Subject:	Municipality:	middleton
I-2:0A-009		
Transaction of the state of the	98/10/20 CO 468 YOR BSV 382 9	
	Wish to Speak in Opposi Registering in Opposition	
☐ Registering in Support ☐	negistering in Opposition	☐ Available for Information Only
1. On this occasion, are you officially re		□YES ŪNO
[If you checked "NO," <u>STOP;</u> you need not	complete the rest of this for	m. If you checked "YES," go on to the next question.]
Name, address and telephone number of ea	ach person or organization	you are representing:
		·
Comments:		
2. Are you being paid for your repres	sentation or appearing	incidental to your other paid duties for this
person or organization?		□YES□NO
[If you checked "NO" to the question, <u>S</u> ' If you checked "YES," continue to the r		lete the rest of this form.
II you checked TES, continue to the I	lext question.j	
		half of your office or for your municipality or
		□YES□NO aplete the rest of this form except that you must sign
this form. If you checked "NO," to the q		
4. Has ar will the navon or organize	tion you rankagant and	ad more than \$500 on county labbying activities
		nd more than \$500 on county lobbying activities 
(A reporting period is January to June o		
5. Do you anticipate making more th	an 2 contacts with Cou	nty Board supervisors other than at public
		YESNO
(Do not count contacts with the County	Board supervisor who rep	presents the district in which you reside.)
Ilf you checked "NO " to questions 4 and	d 5 above STOP: you ne	eed not complete the rest of this form. However, if
you do make more than 2 contacts at a	later date, you must then	contact the County Clerk's office to file a form
	sign this form. If you che	ecked "YES" to either question at this time, go on to
the next question.]		
		ation you represent spends more than \$500
during the current reporting period, y	ou must file a financial	disclosure statement with the county clerk?
[If you checked "NO" please call the Co	unty Clerk at 266-4121 o	□YES□NO r go to the Clerk's office at Room 106A of the City-
County Building, Madison, for more info		
Date:	Signature _	pm Two
	Print Name	Lavra Force

DATE: 8 15 19	Name:	atricia Putney
Item #/Petition/CUP # or Subject:	Municipality: _	Dane / Middleton
	Speak in Oppositi ng in Opposition	on    Available for Information Only
On this occasion, are you officially representing [If you checked "NO," <u>STOP</u> ; you need not complete to Name, address and telephone number of each person	he rest of this form	n. If you checked "YES," go on to the next question.]
Comments:		
2. Are you being paid for your representation person or organization?	need not comple tion.]	ete the rest of this form. □YES
3. Are you an elected official who is appearing other governmental body?	u need not comp	□YES□NO  Dilete the rest of this form except that you must sign
4. Has or will the person or organization you during the current reporting period?(A reporting period is January to June or from Jul		
5. Do you anticipate making more than 2 cont hearings or meetings?(Do not count contacts with the County Board supplies.)		□YES□NO
[If you checked "NO," to questions 4 and 5 above you do make more than 2 contacts at a later date indicating such activity. You must also sign this fithe next question.]	e, you must then	
6. If "YES," do you understand that if the personal during the current reporting period, you must	file a financial of	
[If you checked "NO" please call the County Clerk County Building, Madison, for more information.]	k at 266-4121 or	go to the Clerk's office at Room 106A of the City-
Date:8   15   19	Signature Print Name _	Patricia Putray

DATE: 8/15/19	Name: Leslie Frechill
Item #/Petition/CUP # or Subject:	Municipality: Madison
2019 - OA - 009	
	Vish to Speak in Opposition
✓ Registering in Support	Registering in Opposition   Available for Information Only
	resenting an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need not co	omplete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each	ch person or organization you are representing:
Comments:	
person or organization?	ppearing solely on behalf of your office or for your municipality or
during the current reporting period?	on you represent spend more than \$500 on county lobbying activities□YES
hearings or meetings?	n 2 contacts with County Board supervisors other than at public □ YES□NO soard supervisor who represents the district in which you reside.)
you do make more than 2 contacts at a la	5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if ater date, you must then contact the County Clerk's office to file a form ign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period, yo	the person or organization you represent spends more than \$500 ou must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the Coul County Building, Madison, for more infort	nty Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Citymation.]
Date: 8/15/19	Signature & 4
	Print Name Leslie Frechill

DATE: 6/15/19	Name: Eileen Dostman
Item #/Petition/CUP # or Subject:	Municipality: Madison
I-Z 0A-009	
	Wish to Speak in Opposition
□ Registering in Support □	Registering in Opposition wailable for Information Only
	epresenting 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 e	each person or organization you are representing:
Comments:	
person or organization?	appearing solely on behalf of your office or for your municipality or □YES□NO
[If you checked "YES," to the question, this form.  If you checked "NO," to the (	<u>STOP</u> ; you need not complete the rest of this form except that you must sign question, go on to the next question.]
	ation you represent spend more than \$500 on county lobbying activities  YESNO or from July to December.)
hearings or meetings?	nan 2 contacts with County Board supervisors other than at public  YESNO Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts at a	nd 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if a later date, you must then contact the County Clerk's office to file a form sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period,	if the person or organization you represent spends more than \$500 you must file a financial disclosure statement with the county clerk?
If you checked "NO" please call the Co County Building, Madison, for more info	ounty Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Cityormation.]
Date: 8/15/17	Signature
,	Print Name Ellen I Dorfmen

DATE: 15 ANG 2019	Name: FRIF ANTERSON  Municipality: Town of Prampose
Item #/Petition/CUP # or Subject:	Municipality: Town of Prampose
2019 - DA 009	
Registering in Support	□ Registering in Opposition □ Available for Information Only
[If you checked "NO," <u>STOP;</u> you need n	representing an organization or a person other than yourself?  Not complete the rest of this form. If you checked "YES," go on to the next question.]  of each person or organization you are representing:
4	TANK COUNTY EMPLOYEE GROUP LOCAL (5
	78 STATE POAD 69
	18 TIME FUIL BY
Comments:	
person or organization?	is appearing solely on behalf of your office or for your municipality or  ———————————————————————————————————
(A reporting period is January to June	e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public  YESNO  Ity Board supervisor who represents the district in which you reside.)
you do make more than 2 contacts a	and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if t a later date, you must then contact the County Clerk's office to file a form so sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	at if the person or organization you represent spends more than \$500 d, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more i	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Citynformation.]
Date: 15 AMA 2019	Signature Signature
	Print Name EARLY AND EREGON

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/CUP # or Subject: Municipality: Mos. 163 and ☐ 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? ...... YES ------ NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next guestion.] 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or [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?...... (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 (Do not count contacts with the County Board supervisor who represents the district in which you reside.) [If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make 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? [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]

Print Name Mathew Mobers

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/CUP # or Subject: Municipality: 103 MMa ☐ 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? ...... YES -------NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue 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?...... 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 (Do not count contacts with the County Board supervisor who represents the district in which you reside.) [If you checked "NO," to questions 4 and 5 above, STOP; you need not complete the rest of this form. However, if you do make 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: 9 15 2019

Signature 9 A VILHAJETZ

[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-

REGISTRATION BEFORE COUNTY BOARD
DATE: 8/15/ 2019 Name: New Kartola
Item #/Petition/CUP # or Subject: Municipality: Made Subject:
DATE: 8/5/2019 Name: Nam
☐ 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?
Name, address and telephone number of each person or organization you are representing:  AFSCMB Pane County Englished Association
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 make 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?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: Signature Print Name Print Name

DATE: 8-15-19	Name: Shannon Maver
Item #/Petition/CUP # or Subject:	Name: Shannon Maver  Municipality: Madison
7019 Res 163	_
□ Wish to Speak in Support Registering in Support	<ul> <li>☐ Wish to Speak in Opposition</li> <li>☐ Registering in Opposition</li> <li>☐ Available for Information Only</li> </ul>
1. On this occasion, are you officiall	y 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:
	Dane County EGR 720
	1.0. Box 1705
	Madron W1 55701
Comments:	
person or organization?	presentation or appearing incidental to your other paid duties for this
other governmental body?	o is appearing solely on behalf of your office or for your municipality or
	nization you represent spend more than \$500 on county lobbying activities od?
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public ————————————————————————————————————
you do make more than 2 contacts	A and 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if at a later date, you must then contact the County Clerk's office to file a form also sign this form. If you checked "YES" to either question at this time, go on to
during the current reporting period	nat if the person or organization you represent spends more than \$500 pd, you must file a financial disclosure statement with the county clerk?
	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date:	Signature Management
	Signature Shannon Maier  Print Name Shannon Maier

REGISTRATION BEFORE COUNTY BOARD
DATE: 6/15/2019 Name: BRIAN STANDING
Item #/Petition/CUP # or Subject: Municipality: MADISON (CITY)  2019 0A -009 2019 0A -008
☐ 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?
Name, address and telephone number of each person or organization you are representing:
DANE COUNTY PROFESSIONALS EGR 1871
Roon 116 CCB
MADISON, W! 5370'S
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 make 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?□YES□NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: Signature

Print Name \_\_\_\_\_

REGISTRATION BEFORE COUNTY BOARD
DATE: 8 (15 (19)  Name: Municipality: Town of Bunks
Item #/Petition/CUP # or Subject: Municipality:
☐ 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?
Name, address and telephone number of each person or organization you are representing:
Done Country EGR 1/0
PO Box 1705
Madison WT 5370)
Comments:
<ul> <li>2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?</li></ul>
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?
[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 make 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?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: Signature Mount Atto
Date: Signature Signature
Date: 8/15/19 Signature Morgan Aten

DATE: 8/15/2019 Name: Desch Wallage
Item #/Petition/CUP # or Subject: Municipality: City of Madison
<ul> <li>□ Wish to Speak in Support</li> <li>□ Wish to Speak in Opposition</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?
Comments:
<ul> <li>2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?</li></ul>
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?
[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 make 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?□YES□NO
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-County Building, Madison, for more information.]
Date: Signature

Print Name \_\_\_\_\_