| REG   | SISTRATION BEFORE COUNTY                                 | BOARD )   |
|---|--|---|
| DATE:   | Name:  | 11N   |
| Item #/Petition/CUP # or Subject:   | Municipality:  |   |
|   | $V \geq N$   | CONA  |
|   | Wish to Speak in Opposition<br>Registering in Opposition | ☐ Available for Information Only  |
| 1. On this occasion, are you officially rep   |  |   |
| [If you checked "NO," <u>STOP;</u> you need not o   | complete the rest of this form. If you                   | u checked "YES," go on to the next question.]   |
| Name, address and telephone number of ea  | ach person or organization you are ı                     | representing:   |
|   |  |   |
| Comments:   |  | · · · · · · · · · · · · · · · · · · ·   |
| <ul> <li>2. Are you being paid for your represension or organization?</li></ul>   | TOP; you need not complete the next question.]           | rest of this form. □YES□NO  |
| other governmental body?  | STOP; you need not complete th                           | □YES□NO<br>ne rest of this form except that you must sign   |
| 4. Has or will the person or organizate during the current reporting period?. (A reporting period is January to June of |  | e than \$500 on county lobbying activities<br>⊔YES⊔NO   |
| 5. Do you anticipate making more that hearings or meetings?(Do not count contacts with the County learning)             |  | □YES□NO   |
| you do make more than 2 contacts at a   | later date, you must then contact                        | complete the rest of this form. However, if<br>the County Clerk's office to file a form<br>'ES" to either question at this time, go on to |
|   | ou must file a financial disclo                          | ou represent spends more than \$500 sure statement with the county clerk?   |
| [If you checked "NO" please call the Cool County Building, Madison, for more info                                       | unty Clerk at 266-4121 or go to t                        | the Clerk's office at Room 106A of the City-  |
|   |  |   |

**REGISTRATION BEFORE COUNTY BOARD** Name: 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? [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 [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 [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?......IYES------INO (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?.......YES--------INO (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.1 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: \_\_\_\_\_\_ Signature Jymet Joss have

Print Name Lynon Forsday

[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.]

4

| DATE: 9-11-17  | Name: DAULO LILE  |
|--|---|
| Item #/Petition/CUP # or Subject:  | Name: DAULO LILE  Municipality: FITCHBUYC   |
|  | -<br>-  |
| □ Wish to Speak in Support  X) Registering in Support                      | ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only  |
| 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.]  |
|  | of each person or organization you are representing   |
| MITCHBI  | MG SIGN CTR, ALL FOCAL POINTS   |
|  |   |
| No.  |   |
| Comments:  |   |
|  |   |
| person or organization?  | presentation or appearing incidental to your other paid duties for this   |
| If you checked "YES," continue to t  |   |
|  | o is appearing solely on behalf of your office or for your municipality or  |
| other governmental body? [If you checked "YES," to the questi              | ⊓YES□NO<br>ion, <u>STOP</u> ; you need not complete the rest of this form except that you must sign   |
| this form. If you checked "NO," to to                                      | he question, go on to the next question.]   |
|  | nization you represent spend more than \$500 on county lobbying activities od?  |
| (A reporting period is January to Jul                                      |   |
| hearings or meetings?  | e than 2 contacts with County Board supervisors other than at public  TYES unty Board supervisor who represents the district in which you reside.)                  |
| [If you checked "NO," to questions   | 4 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  | hat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?                    |
| [If you checked "NO" please call the<br>County Building, Madison, for more | Proceeding County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- information.]   |
| Date: 9-1(-19  | Signature   |
|  | Print Name DAVID I+U  |

| REGISTRATION BEFORE COUNTY BOARD   |
|--|
| DATE: 9 1119 Name: CINCLY MC GLYMM   |
| Item #/Petition/CUP # or Subject: Municipality:  |
| Aging Services   |
| ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only  |
| 1. On this occasion, are you officially representing an organization or a person other than yourself?□YES□NO   |
| [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:  |
|  |
|  |
| 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?   |
| 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: 9 11 9 Signature William Signature   |

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

| REGISTRATION BEFORE COUNTY BOARD   |
|--|
| DATE: 9/11/2019 Name: Marcia Hendrickson   |
| Item #/Petition/CUP # or Subject: Municipality: Madison  |
| Ogng Selores   |
| <ul> <li>☐ Wish to Speak in Support</li> <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 person other than yourself?  YES   |
| Name, address and telephone number of each person or organization you are representing:  NWBOAR MAISON INC- 128 E. Chen Aug  |
| Madison WT 537/3   |
| 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?   |
| 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: 9/1/19 Signature Marcya Hendrick Sov   |

REGISTRATION BEFORE COUNTY BOARD 9-11-19 Name: <u>Cindy Mosiman</u>
Municipality: <u>Village of Waunakee</u> Item #/Petition/CUP # or Subject: □ Wish to Speak in Support

Registering 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 ------DNO [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 [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 hearings or meetings?.....⊓YES------□NO (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? ------□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-

Date: 9-11-19

County Building, Madison, for more information.

ignature wedle wok T

Print Name Cinyly Cook-Mosimon

| DATE: 9/19/19  | Name:  | Tudith Hivsel   |
|--|--|---|
| Item #/Petition/CUP # or Subject:  | Municipality: _<br>_   | Madigon   |
| □ Wish to Speak in Support<br>ß Registering in Support                     | ☐ Wish to Speak in Opposition☐ Registering in Opposition☐  | on<br>□ Available for Information Only  |
| 1. On this occasion, are you officiall                                     | ly 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   | ☐YESXNO<br>If you checked "YES," go on to the next question.]   |
| Name, address and telephone number   | of each person or organization yo  | ou are representing:  |
|  | The second secon             |   |
| 1/2.   |  |   |
| Comments:  |  |   |
| person or organization?  | n, <u>STOP</u> ; you need not complet the next question.]  o is appearing solely on behavion, <u>STOP</u> ; you need not complete question, go on to the next of t | alf of your office or for your municipality or□YES  |
| hearings or meetings? (Do not count contacts with the Cou                  | inty Board supervisor who repr   | resents the district in which you reside.)  |
| you do make more than 2 contacts   | at a later date, you must then d   | ed not complete the rest of this form. However, if contact the County Clerk's office to file a form ked "YES" to either question at this time, go on to |
| during the current reporting period  | od, you must file a financial c  | tion you represent spends more than \$500 disclosure statement with the county clerk?   |
| [If you checked "NO" please call the<br>County Building, Madison, for more | e County Clerk at 266-4121 or  | □YES□NO<br>go to the Clerk's office at Room 106A of the City-   |
| Date:9/11/19   | Signature  | Grath Hirsch<br>Tudith Hirsch   |
| - ( '  | Print Name   | Judith Hirsch   |

| DATE: 911/9  | Name: SANATLYNN  Municipality: DANG   |
|--|---|
| Item #/Petition/CUP # or Subject:  | Municipality: PANE'   |
| □ Wish to Speak in Support<br>☑ Registering in Support                     | ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only  |
|  | representing an organization or a person other than yourself?  Output  Output |
| <del>-</del>   | f each person or organization you are representing:   |
| THE RANBION  831 E WASH  MANISON W   | PROJECT   |
| 831 E WASH   | NGTON ME  |
| MANISON W  | 53703   |
| Comments:  |   |
| person or organization?  | resentation or appearing incidental to your other paid duties for this  |
| during the current reporting perio   | ization you represent spend more than \$500 on county lobbying activities<br>d?□YES\√NO<br>e or from July to December.)   |
| hearings or meetings?  | than 2 contacts with County Board supervisors other than at public-<br>   |
| 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  |
|  | 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<br>County Building, Madison, for more | County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-  |
| Date: 9/11/19  | Signature SARA FALVIN   |
|  | Print Nama SARA- MILAIN   |

# REGISTRATION BEFORE COUNTY BOARD OATE: 9/11/17 Name: Lesleigh Luttrell em #/Petition/CUP # or Subject: Municipality: Modison Services for Vulnerable Population (esp Senion) DATE: 9/11/17 Item #/Petition/CUP # or Subject: ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition ☐ Registering in Opposition □ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? □YES ------/ZNO [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next guestion.] 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 Ilf 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?.......YES-------DNO [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 (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.]

Signature Lesleigh Lottre (

Date: 9/11/19

| DATE: 9///9 Item #/Petition/CUP # or Subject:                              | Name: Sr. Fran Hoffinan<br>Municipality: Burkes   |
|--|---|
| Item #/Petition/CUP # or Subject:  | Municipality: Burkel  |
| X Wish to Speak in Support<br>□ Registering in Support                     | ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only  |
| 1. On this occasion, are you officially                                    | y representing an organization or a person other than yourself?<br>   |
| [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                                      | of each person or organization you are representing.  |
|  |   |
| Comments:  |   |
| person or organization?  | presentation or appearing incidental to your other paid duties for this   |
|  | nization you represent spend more than \$500 on county lobbying activities d?□YES□NO ne or from July to December.)  |
| 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 lso sign this form. If you checked "YES" to either question at this time, go on to |
| during the current reporting perio   | 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<br>County Building, Madison, for more | County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]   |
| Date: <u>9/11/1</u>  | Signature Sr. Fran Hoffman  |

| DATE: 9/11/19 Name: TOOD WINSTOO   |               |
|--|---------------|
| DATE: 7111/ Name: Took Winster  Item #/Petition/CUP # or Subject: Municipality: M No 15 Cu   |               |
| 7 - EXPANDED FUNDING FOR DEFTHE SQUARE (L  | 11.1/Z        |
| Wish to Speak in Support □ Wish to Speak in Opposition □ Registering in Support □ Registering in Opposition □ Available for Information Only   | <u> </u>      |
| On this occasion, are you officially 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 ques  | NO<br>tion.]  |
| Name, address and telephone number of each person or organization you are representing:  |               |
| Cuth Social Services of WI & MARENZIMI - OFF THE SQUINK  | <u> </u>      |
|  |               |
| Comments:  |               |
| 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?   | s<br>NO       |
| 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality other governmental body?  | 10 /          |
| 4. Has or will the person or organization you represent spend more than \$500 on county lobbying act during the current reporting period?  | ivities<br>VO |
| 5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?  | ;<br>VO       |
| [If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this form. Howe you do make more than 2 contacts at a later date, you must then contact the County Clerk's office to file a for indicating such activity. You must also sign this form. If you checked "YES" to either question at this time, go the next question.] | ver, if       |
| 6. If "YES," do you understand that if the person or organization you represent spends more than \$50 during the current reporting period, you must file a financial disclosure statement with the county cle  | )0<br>rk?     |
| [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the County Building, Madison, for more information.]   | VO.           |
| Date: 9/1/19 Signature 1205  | _             |
| Print Name TOOD WWSTEEN  |               |

|   | REGISTRATION BEFORE COUNT   | Y BOARD  |
|---|---|--|
| DATE: 9/11/19   | Nama: Basi  | pie Jackson  |
| Item #/Petition/CUP # or Subject:   | Name:/  | bie Jackson<br>Madison   |
| nem #/remon/oor # or oubject.   | Municipality  | 10001 2000   |
|   | _   |  |
| <ul><li>✓ Wish to Speak in Support</li><li>☐ Registering in Support</li></ul>                                     | <ul><li>☐ Wish to Speak in Opposition</li><li>☐ Registering in Opposition</li></ul> | ☐ Available for Information Only   |
|   | y representing an organization or a p   |  |
| [If you checked "NO," <u>STOP</u> ; you need  | not complete the rest of this form. If yo   | ou checked "YES," go on to the next question.]   |
| Name, address and telephone number  | of each person or organization you are  | representing:  |
| Communita   | Restorative C   | ourt   |
|   |   |  |
|   |   |  |
| Commontor   |   |  |
| Comments:   |   |  |
| person or organization?   | n, <u>STOP;</u> you need not complete the   | ntal to your other paid duties for this<br>□YES  |
| other governmental body? [If you checked "YES," to the questi   | ***************************************   | your office or for your municipality or□YES□NO he rest of this form except that you must sig ion.]   |
| 4. Has or will the person or organ<br>during the current reporting perio<br>(A reporting period is January to Jun | od?   | re than \$500 on county lobbying activities<br>□YES  |
|   |   | ard supervisors other than at public   |
| hearings or meetings?   | inty Board supervisor who represent   |  |
| you do make more than 2 contacts  | at a later date, you must then contac   | complete the rest of this form. However, if<br>ct the County Clerk's office to file a form<br>YES" to either question at this time, go on to |
| during the current reporting period   | od, you must file a financial disclo  | ou represent spends more than \$500 sure statement with the county clerk?  |
| [If you checked "NO" please call the<br>County Building, Madison, for more  | e County Clerk at 266-4121 or go to   | ### PYES□NO the Clerk's office at Room 106A of the City-   |
| Date: 9/11/19   | Signature Da  | urbie Jackson  |
|   | Print Name  | arbie Jackson  |

| REGISTRATION BEFORE COUNTY BOARD   | •  |
|--|----|
| DATE: 9/11/19 Name: Marcus Murnug  |    |
| DATE:  | _  |
|  |    |
| <ul> <li>✓ Wish to Speak in Support</li> <li>☐ Registering in Support</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?  |    |
| [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:  |    |
| Family Service Maelisar's  |    |
| Family Service Maelisan's<br>Steps to Success Day Treatment Drogram  |    |
|  |    |
| 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?   | дп |
| 4. Has or will the person or organization you represent spend more than \$500 on county lobbying activitie during the current reporting period?□YES  | S  |
| 5. Do you anticipate making more than 2 contacts with County Board supervisors other than at public hearings or meetings?□YES□XO (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, <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: 9/1/19 Signature   |    |
| Print Name Marcus Murp M   |    |

Print Name

| DATE:SPD. 11, 2019   | Name: VIVOIC  | 1 Robinson John Milton  |
|--|---|---|
| Item #/Petition/CUP # or Subject:  |   |   |
| Wish to Speak in Support  Registering in Support   | ☐ Wish to Speak in Opposition☐ Registering in Opposition  | □ Available for Information Only  |
| 1. On this occasion, are you official  |   |   |
| ######################################   | •••••   | you checked "YES," go on to the next question.]   |
| Name, address and telephone number   |   | ·   |
| NO.  |   |   |
|  |   |   |
| Comments:  |   |   |
| [If you checked "NO" to the question If you checked "YES," continue to the state of | n, <u>STOP</u> ; you need not complete the next question.]  o is appearing solely on behalf of the next question, <u>STOP</u> ; you need not complete the question, go on to the next question you represent spend mod? | of your office or for your municipality or<br>□YES□NO<br>the rest of this form except that you must sign<br>stion.]<br>ore than \$500 on county lobbying activitie<br>□YES□NO |
| 5. Do you anticipate making more hearings or meetings? (Do not count contacts with the Count count count with the Count co                 |   | oard supervisors other than at public   |
| you do make more than 2 contacts a   | at a later date, you must then conta  | ot complete the rest of this form. However, if<br>act the County Clerk's office to file a form<br>"YES" to either question at this time, go on to                             |
| during the current reporting perio   | d, you must file a financial discl  | you represent spends more than \$500 osure statement with the county clerk?   |
| [If you checked "NO" please call the<br>County Building, Madison, for more   | County Clerk at 266-4121 or go to   | o the Clerk's office at Room 106A of the City-  |
| Date: 5(p.11,2019  | Signature Um-   | dia Robinson  |
|  | Print Name _\///  | dia Robinson  |

| DATE:   | Name: (Coach) A STAD  |
|---|---|
| Item #/Petition/CUP # or Subject:   | Municipality: □ A N ∈   |
| <ul><li>□ Wish to Speak in Support</li><li>□ Registering in Support</li></ul>   | <ul> <li>□ Wish to Speak in Opposition</li> <li>□ Registering in Opposition</li> <li>□ Available for Information Only</li> </ul>  |
|   | 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 $\mathcal{MELL}$ o $\omega$ $\mathcal{H}oop$ | of each person or organization you are representing:  |
| 702 S MIDI  | IALE  |
| MADISON WI  | 537-11  |
| Comments:   |   |
| person or organization?   | presentation or appearing incidental to your other paid duties for this   |
|   | od?TYES   |
| 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 od, you must file a financial disclosure statement with the county clerk?  |
| [If you checked "NO" please call the<br>County Building, Madison, for more      | E County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]   |
| Date:   | 9 Signature   |
|   | Print Name Tutarkhamu.  |

Signature Signature Stark BIBONEY IV

County Building, Madison, for more information.]

Date: \_\_\_\_\_\_ Signature \_\_\_\_\_\_

Print Name \_\_\_\_\_\_ Haus words

County Building, Madison, for more information, 1

| DATE:  | 9/11/19  | Na  | ame:   | Joe                                   | Maldonado  |  |
|--|--|---|--|---------------------------------------|--|--|
|  | etition/CUP # or Subject:                                  | Mu  | unicipality: _   |                                       |  |  |
|  | o Speak in Support<br>ering in Support                     | □ Wish to Speak □ Registering in  | in Opposition  | on                                    | ☐ Available for Information  | ı Only   |
| 1. On thi  | s occasion, are you officiall                              | y representing an c   | organization   | or a pers                             | on other than yourself?  |  |
| [If you che  | ecked "NO," <u>STOP;</u> you need                          | not complete the res  | st of this form  | . If you ch                           | ecked "YES," go on to the ne   | □NO<br>xt question.]   |
| Name, ad   | dress and telephone number                                 | of each person or or  | ganization yo  | ou are repr                           | esenting:  |  |
|  | - VII  |   | Management of the second of th | · · · · · · · · · · · · · · · · · · · | 49544.   |  |
|  |  |   |  |                                       |  |  |
|  |  | <u></u>   |  |                                       |  |  |
| Commer   | nts:   |   |  |                                       |  |  |
| gerson of a life you change of the report of | or organization?   | i, <u>STOP</u> ; you need the next question.] Is appearing solon, <u>STOP</u> ; you need the question, go on the property of the property | ely on beha<br>ed not comp<br>to the next of<br>esent spend<br>December.)  | alf of you<br>lete the requestion.    | r office or for your munic<br>□YES<br>est of this form except that<br>an \$500 on county lobbyi  | ipality or<br>ipality or<br>ino<br>you must sign<br>ing activities |
| hearings   | or meetings?   | F13013181131314344F747510F13  |  | ***********                           |  | □NO  |
| you do m<br>indicating   | nake more than 2 contacts                                  | at a later date, you  | must then d  | contact th                            | nplete the rest of this form.<br>e County Clerk's office to fi<br>" to either question at this t | le a form  |
|  | ne current reporting perio                                 | d, you must file a  | a financial c  | isclosur                              | represent spends more the statement with the cour  | nty clerk?   |
|  | necked "NO" please call the<br>Building, Madison, for more | County Clerk at 2   | 66-4121 or (   | go to the                             | ⊓ <b>YES</b><br>Clerk's office at Room 106/  | A of the City-   |
| Date:  | 9////9   |   | ignature <u></u>   |                                       | ) Zz<br>Maldonado  | <del></del>  |
|  |  | Pr  | int Name   | J06                                   | 1 191donado  | <b>&gt;</b>  |

| a/1   | REGISTRATION BEFORE COUNTY BOARD  |
|---|---|
| DATE: 4/11/19   | Name: Joe Mal Danako / John Bauman  |
| Item #/Petition/CUP # or Subject:   | Municipality: Saue Co/  |
|   | $ \angle Y \in$   |
| 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>  |
|   | lly representing an organization or a person other than yourself?   |
| [If you checked "NO," <u>STOP</u> ; you need  | d not complete the rest of this form. If you checked "YES," go on to the next question.]  |
| Name, address and telephone number  | r of each person or organization you are representing:  |
|   |   |
|   |   |
| Comments:   |   |
| person or organization?   | epresentation or appearing incidental to your other paid duties for this  |
| other governmental body? [If you checked "YES," to the ques   | tion, <u>STOP</u> ; you need not complete the rest of this form except that you must sign the question, go on to the next question.]  |
| 4. Has or will the person or orga during the current reporting period (A reporting period is January to June 1997). | anization you represent spend more than \$500 on county lobbying activities iod?  |
| hearings or meetings?   | re than 2 contacts with County Board supervisors other than at public  Unity Board supervisor who represents the district in which you reside.)   |
| [If you checked "NO," to questions you do make more than 2 contacts   | 4 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 peri   | that if the person or organization you represent spends more than \$500 iod, you must file a financial disclosure statement with the county clerk?  |
| [If you checked "NO" please call th<br>County Building, Madison, for more   | e information.] □YES□NO  No County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-  |
| Date:   | Signature   |
|   | Print Name Solu Balling   |

REGISTRATION BEFORE COUNTY BOARD Municipality: Mazism + Monona Item #/Petition/CUP # or Subject: Wish to Speak in Support

Output

Description:

Wish to Speak in Support

Output

Description:

Wish to Speak in Support

Output

Description:

Outp ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only □ Registering in Support 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 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? ......DYES------DNO [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

Date: \_\_\_\_\_

| DATE: 9-11-19   | Name:  | McHone  |
|---|--|---|
| Item #/Petition/CUP # or Subject:   | Municipality:  | chburg  |
| Aging Services for Ser  | 110YD  | J   |
| Wish to Speak in Support  |  | ☐ Available for Information Only  |
| 1. On this occasion, are you officially r   | epresenting an organization or a   | person other than yourself?<br>/YES □NO   |
| [If you checked "NO," <u>STOP;</u> you need no  | t complete the rest of this form. If ye  | ou checked "YES," go on to the next question.]  |
| Name, address and telephone number of   |  |   |
| Fitchburg Senic   | ir Center  |   |
| 5510 E. Lay N   | or Center<br>Id<br>53711   |   |
| Fitchburg W) S  | 537//  |   |
| Comments:   |  |   |
| [If you checked "NO" to the question, if you checked "YES," continue to the  3. Are you an elected official who is other governmental body? | STOP; you need not complete the next question.]  s appearing solely on behalf of the next question, so on to the next question you represent spend mo?  or from July to December.) | f your office or for your municipality or   |
| 5. Do you anticipate making more thearings or meetings?(Do not count contacts with the County)  | han 2 contacts with County Bo<br>y Board supervisor who represer   | oard supervisors other than at public<br>□YESNO<br>nts the district in which you reside.)   |
| you do make more than 2 contacts at   | a later date, you must then conta  | of complete the rest of this form. However, if act the County Clerk's office to file a form "YES" to either question at this time, go on to |
| during the current reporting period,  | , you must file a financial discl  | you represent spends more than \$500 osure statement with the county clerk?   |
| [If you checked "NO" please call the C<br>County Building, Madison, for more in   | County Clerk at 266-4121 or go to  | □YES  |
| Date: 9-/#-/9   | Signature  | Jul McHone  |
|   | Print Name   | Jul metone  |

| REGISTRATION BEFORE COUNTY BOARD   |  |
|--|--|
| DATE: Mame: Dob Superitem #/Petition/CUP # or Subject: Municipality: Superitem #/Petition/CUP # or Subject:  | or.                                      |
| Item #/Petition/CUP # or Subject: Municipality: July Y/C   | uns                                      |
| Aging Servios  |  |
| <ul> <li>☑ Wish to Speak in Support</li> <li>☐ Registering in Support</li> <li>☐ Registering in Opposition</li> <li>☐ Available</li> </ul>   | illable for Information Only             |
| 1. On this occasion, are you officially representing an organization or a person oth   | er 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 of big at the same of the s | ng:                                      |
| 301 Blankenheim Lane   |  |
| Sun Prairie W1 53590   |  |
| Comments:  |  |
| 2. Are you being paid for your representation or appearing incidental to you person or organization?   |  |
| 3. Are you an elected official who is appearing solely on behalf of your office other governmental body?   | ₽YES₽NO                                  |
| 4. Has or will the person or organization you represent spend more than \$5 during the current reporting period?   | 00 on county lobbying activities<br>ழ்ல் |
| 5. Do you anticipate making more than 2 contacts with County Board super hearings or meetings?   | □YES                                     |
| [If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete you do make more than 2 contacts at a later date, you must then contact the Couindicating such activity. You must also sign this form. If you checked "YES" to eithe next question.]   | nty Clerk's office to file a form        |
| 6. If "YES," do you understand that if the person or organization you repres<br>during the current reporting period, you must file a financial disclosure stat   | ement with the county clerk?             |
| [If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's County Building, Madison, for more information.]  | s office at Room 106A of the City-       |
| Date:  | Kon-                                     |
| Print Name Robert  | T. Howe                                  |

Name: <u>Esther Olsow</u> Municipality: <u>Moutrose</u> Item #/Petition/CUP # or Subject: Wish to Speak in Support ☐ Wish to Speak in Opposition □ Available for Information Only □ Registering in Support ☐ Registering in Opposition 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 [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 [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?......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 auestion.1 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 Hoom 106A of the City-County Building, Madison, for more information.] Date: 9/11/19

| DATE: 9-11-19  | Name: TIM SWAOLEY  |
|--|--|
| Item #/Petition/CUP # or Subject:  | Municipality: CITY OF STOU (abtTon)  |
| Wish to Speak in Support     ⊓ Registering in Support                      | ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only   |
|  | y representing an organization or a person other than yourself?  |
| Name, address and telephone number   | of each person or organization you are representing:   |
| CITY OF STUUG  | HTON 207 S FORREST ST.   |
| STOUGHTON, WI<br>1008-873-62   | 53589  |
| 608-873-62   | 8'V  |
| Comments:  |  |
| person or organization?  | presentation or appearing incidental to your other paid duties for thisNONESNONESNONESNONESNONES   |
| 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 lso sign this form. If you checked "YES" to either question at this time, go on to |
|  | nat if the person or organization you represent spends more than \$500 ed, you must file a financial disclosure statement with the county clerk?⊔YES□NO  |
| [If you checked "NO" please call the<br>County Building, Madison, for more | County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-   |
| Date: 9-11-19  | Signature Swaly  Print Name TM SWAD LEY  |
|  | Print Name TM SWADLEY  |

| DATE: Sharm MASM - BOERSMA  Item #/Petition/CUP # or Subject: Municipality: Storghton  |
|--|
| ☐ 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?  ———————————————————————————————————   |
|  |
| Comments:  |
| <ol> <li>2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?</li></ol>  |
| 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: 9/11/19 Signature Shanon Mason-Boersma   |

| DATE: 9/11/19  | Name: Jennifey Monyadia   |
|--|---|
| Item #/Petition/CUP # or Subject:  | Name: <u>Jenniter Monyadin</u><br>Municipality: <u>Stoughton</u>  |
| Wish to Speak in Support   | U Wish to Speak in Opposition   |
| ☐ Registering in Support   | ☐ Registering in Opposition ☐ Available for Information Only  |
| 1. On this occasion, are you official                                      | ly representing an organization or a person other than yourself?  |
| [If you checked "NO," <u>STOP;</u> you need                                | I 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:  |   |
| person or organization?  | epresentation 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<br>YES   |
| 4. Has or will the person or orga  | the question, go on to the next question.] Inization you represent spend more than \$500 on county lobbying activities od?⊔YES□NO Ine or from July to December.)  |
| hearings or meetings?  | re than 2 contacts with County Board supervisors other than at public YES NO unty Board supervisor who represents the district in which you reside.)  |
| you do make more than 2 contacts   | 4 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 peri  | that if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?   |
| [If you checked "NO" please call the<br>County Building, Madison, for more | e County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]   |
| Date:  | Signature Junio Mohlli  Print Name  |
|  | Print Name  |

EAWS

| DATE: 4 11 9  Item #/Petition/CUP # or Subject:   |   | en Adams   |
|---|---|--|
| Wish to Speak in Support  Begistering in Support  | □ Wish to Speak in Opposition □ Registering in Opposition             | □ Available for Information Only   |
| 1. On this occasion, are you officially [If you checked "NO," <u>STOP;</u> you need       | ***************************************                               | person other than yourself?<br>□YES□NO<br>ou checked "YES," go on to the next question.]   |
| Name, address and telephone number of Start (Dieen  | of each person or organization you are                                |  |
| Comments:   |   |  |
|   | n, <u>STOP;</u> you need not complete th                              | ntal to your other paid duties for this<br>□YES⊠NO<br>e rest of this form.   |
| other governmental body?  | on, <u>STOP;</u> you need not complete                                | f your office or for your municipality or<br>YESXNO<br>the rest of this form except that you must sign<br>tion.]                           |
|   | od?   | re than \$500 on county lobbying activities<br>□YES▷NO   |
| 5. Do you anticipate making more hearings or meetings?(Do not count contacts with the Cou | e than 2 contacts with County Bo<br>nty Board supervisor who represer | pard supervisors other than at public<br>  |
| you do make more than 2 contacts a  | at a later date, you must then conta                                  | t complete the rest of this form. However, if act the County Clerk's office to file a form "YES" to either question at this time, go on to |
| during the current reporting period   | d, you must file a financial discl                                    | you represent spends more than \$500 osure statement with the county clerk?  |
| [If you checked "NO" please call the<br>County Building, Madison, for more                | County Clerk at 266-4121 or go to information.]                       | the Clerk's office at Room 106A of the City-   |
|   | Print Name  |  |

REGISTRATION BEFORE COUNTY BOARD 1) ebra J H.11 Item #/Petition/CUP # or Subject: Municipality: XWish to Speak in Support ☐ Wish to Speak in Opposition □ Available for Information Only ☐ Registering in Support □ Registering in Opposition 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. 608 8007049 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?.....□YES------XNO [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 (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.] Date: \_\_\_\_\_

EAWS

#### **REGISTRATION BEFORE COUNTY BOARD**

| DATE: (1-11-2019   | Name:  | WS. B  | Jakh.           | 4 Earl                     | 9 54%                  |
|--|--|--|-----------------|----------------------------|------------------------|
| Item #/Petition/CUP # or Subject:  | Municipa   | MS. C  |                 |                            |                        |
| উWish to Speak in Support<br>⊔ Registering in Support  | <ul><li>  Wish to Speak in Oppos</li><li>  Registering in Oppos</li></ul>  | position<br>Sition (                               | Available fo    | r Information O            | nly                    |
| 1. On this occasion, are you officiall   |  |  |                 |                            | =110                   |
| [If you checked "NO," <u>STOP</u> ; you need   | not complete the rest of this  | s form. If you che                                 | ecked "YES," go | □YES<br>o on to the next q | □NO<br>uestion.]       |
| Name, address and telephone number   | of each person or organizat  | tion you are repre                                 | senting:        |                            |                        |
| Start 3  | Les years  | 2520   | (008            | 1504-                      | -8126                  |
|  |  | B  |                 |                            | - tit                  |
| Comments:  |  |  |                 |                            |                        |
| <ol> <li>Are you being paid for your reperson or organization?</li></ol>   | n, <u>STOP;</u> you need not co<br>the next question.]<br>o is appearing solely on<br>ion, <u>STOP;</u> you need not | omplete the rest  behalf of your  complete the res | of this form.   | □YES<br>your municipa      | □NO<br>ality or<br>□NO |
| 4. Has or will the person or organ during the current reporting period (A reporting period is January to Jun                   | od?  | *****************                                  | ın \$500 on co  | ounty lobbying<br>□YES/    | activities<br>□NO      |
| 5. Do you anticipate making more hearings or meetings? (Do not count contacts with the Count                                   | <i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>   |  |                 | □YES(                      | □NO                    |
| [If you checked "NO," to questions a you do make more than 2 contacts indicating such activity. You must a the next question.] | at a later date, you must i  | then contact the                                   | County Clerk    | d's office to file a       | a form                 |
| 6. If "YES," do you understand the during the current reporting period   | od, you must file a finan  | icial disclosure                                   | statement w     | ith the county             | clerk?                 |
| [If you checked "NO" please call the<br>County Building, Madison, for more   | e County Clerk at 266-412  | 21 or go to the C                                  | Nerk's office a | t Room 106A o              | f the City-            |
| Date: 9-11-2019  | Signatuı   | re <u>~5.</u>                                      | R               |                            |                        |

| DATE: 9-11-19  | Name: _   | Cindy                                    | Thompson              | START                 |
|--|---|--|-----------------------|-----------------------|
| Item #/Petition/CUP # or Subject:  | Municipali  | ity: 51                                  | SUJACTOR 1            | 51AK                  |
| <ul><li>✓ Wish to Speak in Support</li><li>□ Registering in Support</li></ul>  | <ul><li>☐ Wish to Speak in Opp</li><li>☐ Registering in Opposit</li></ul> |  | Available for Inform  | ation Only            |
| 1. On this occasion, are you officially [If you checked "NO," <u>STOP</u> ; you need no  |   | ***************************************  |                       | □NO                   |
| Name, address and telephone number of  |   |  |                       |                       |
|  | Staughton (650)   | Area Rea                                 | Source Tea            | m Inc. ST             |
|  |   | -1-W-1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |                       |                       |
| Comments:  |   |  |                       |                       |
| 2. Are you being paid for your rep<br>person or organization?  | , <u>STOP;</u> you need not cor   | .,                                       | □YES                  | aties for this ∕<br>S |
| 3. Are you an elected official who other governmental body?  | on, <u>STOP;</u> you need not c   | complete the rest                        | YES                   | S                     |
| 4. Has or will the person or organic<br>during the current reporting period<br>(A reporting period is January to June            | d?  | *  |                       |                       |
| 5. Do you anticipate making more hearings or meetings?(Do not count contacts with the Count                                      | ***************************************                                   |  | □YE\$                 | S                     |
| [If you checked "NO," to questions 4 you do make more than 2 contacts a indicating such activity. You must althe next question.] | t a later date, you must th   | hen contact the C                        | County Clerk's office | to file a form        |
| 6. If "YES," do you understand the during the current reporting period   |   | ial disclosure s                         | tatement with the     |                       |
| [If you checked "NO" please call the<br>County Building, Madison, for more i   | County Clerk at 266-412   |  |                       |                       |
| Date: 9-11-19  | Signature   | · Centl                                  | nio Am<br>Thompson    | pm                    |
|  | Print Nam   | ne <u>(ind</u>                           | Thompson              | <u>h</u>              |

| DATE: 9-11 1 2019   | Name: STEVE STARKEY   |
|---|---|
| Item #/Petition/CUP # or Subject:   | Municipality: MADISON   |
| ☐ Wish to Speak in Support ☐ Registering in Support   | ☐ Wish to Speak in Opposition☐ Registering in Opposition☐ Available for Information Only  |
|   | 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:  |
| - Patition |   |
| Comments:   |   |
| person or organization?   | presentation or appearing incidental to your other paid duties for this   |
| other governmental body? [If you checked "YES," to the question   | o is appearing solely on behalf of your office or for your municipality or<br>On, <u>STOP;</u> you need not complete the rest of this form except that you must sign the question, go on to the next question.]   |
| 4. Has or will the person or organduring the current reporting period (A reporting period is January to Jun   | nization you represent spend more than \$500 on county lobbying activities<br>od?□YESস্থা০<br>ne or from July to December.)   |
| hearings or meetings?   | e than 2 contacts with County Board supervisors other than at public  WES Inty 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 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 od, you must file a financial disclosure statement with the county clerk?  |
| [If you checked "NO" please call the<br>County Building, Madison, for more  | PYES□NO  County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- information.]   |
| Date: 2-11 2015   | Signature STEVE STARKEY   |
|   | Print Name STEVE SMARKEY  |

| DATE:                         | 1/11/19   | Name: _ ` - f' < f + th   |  |  |
|-------------------------------|---|---|--|--|
| Item #/Petition               | on/CUP # or Subject:                                | Municipality: 🙃 🔻 🔻 🔻   |  |  |
| ୍ଧ Wish to Sp<br>□ Registerin | peak in Support<br>g in Support                     | ☐ Wish to Speak in Opposition ☐ Registering in Opposition ☐ Available for Information Only  |  |  |
| 1. On this oc                 | casion, are you officiall                           | y representing an organization or a person other than yourself?   |  |  |
| [If you checke                | ed "NO," <u>STOP;</u> you need                      | not complete the rest of this form. If you checked "YES," go on to the next question.]  |  |  |
| Name, addres                  | s and telephone number                              | of each person or organization you are representing.  |  |  |
| <u> </u>                      |   |   |  |  |
|                               | /- Alle   |   |  |  |
| Comments:                     |   |   |  |  |
| person or o                   | rganization?  | presentation or appearing incidental to your other paid duties for this  ———————————————————————————————————  |  |  |
| other gover<br>[If you check  | nmental body?<br>wed "YES," to the questi           | o is appearing solely on behalf of your office or for your municipality or<br>☐ YES☐ NO<br>☐ YES☐ NO<br>☐ No must sign<br>☐ He question, go on to the next question.]   |  |  |
| during the d                  | current reporting perio                             | nization you represent spend more than \$500 on county lobbying activities od?□YES∑⊠NO ne or from July to December.)  |  |  |
| hearings or                   | meetings?   | e than 2 contacts with County Board supervisors other than at public<br>□ YES   |  |  |
| you do make                   | e more than 2 contacts<br>ich activity. You must a  | 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 |  |  |
|                               | current reporting perio                             | nat if the person or organization you represent spends more than \$500 od, you must file a financial disclosure statement with the county clerk?  |  |  |
|                               | ked "NO" please call the<br>ding, Madison, for more | DO County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]  |  |  |
| Date:                         | P7 37   | Signature <u>saft to Ti</u>   |  |  |
|                               |   | Signature A. J. J. F. +1  |  |  |