	Print Name
Date:	Signature
[If you checked "NO" please call the Cou County Building, Madison, for more infor	Inty Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Citymation.]
during the current reporting period, y	the person or organization you represent spends more than \$500 ou must file a financial disclosure statement with the county clerk?
you do make more than 2 contacts at a l	I 5 above, <u>STOP</u> ; you need not complete the rest of this form. However, if 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
hearings or meetings?	an 2 contacts with County Board supervisors other than at public YES
	ion you represent spend more than \$500 on county lobbying activities□YES□NO from July to December.)
other governmental body?	appearing solely on behalf of your office or for your municipality or ☐YES□NO ☐STOP; you need not complete the rest of this form except that you must signuestion, go on to the next question.]
person or organization? [If you checked "NO" to the question, <u>ST</u> If you checked "YES," continue to the no	•
Comments:	
Name, address and telephone number of ea	ch person or organization you are representing:
	oresenting an organization or a person other than yourself? Organization or a person other than yourself?
	Registering in Opposition
	Vish to Speak in Opposition
ntern #/Petition/GOP # or Subject.	Municipality. Mad to on
DATE: 6 9 9 Subject:	Name: Joan Downs Municipality: Madison

DATE: 1/0/20	Name: Sherie Hops
Item #/Petition/CUP # or Subject: Mental Heath - youth	Municipality: Madi SO2
	Wish to Speak in Opposition Registering in Opposition □ Available for Information Only
	oresenting an organization or a person other than yourself? □YESXNO
[If you checked "NO," <u>STOP;</u> you need not d	complete the rest of this form. 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:	
person or organization?	sentation or appearing incidental to your other paid duties for this
other governmental body?	appearing solely on behalf of your office or for your municipality or
during the current reporting period?	tion you represent spend more than \$500 on county lobbying activities□YESNO r from July to December.)
hearings or meetings?	an 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	d 5 above, <u>STOP;</u> you need not complete the rest of this form. However, if 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, y	f 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 Cou County Building, Madison, for more info	unty Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date:	Signature Sherié Hohs
	Print Name Sherie Hohs

REGISTRATION BEFORE COUNTY BOARD DATE: Item #/Petition/CUP # or Subject: □ 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 other governmental body?..... UYES ------ NO [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: Signature ____

Print Name

DATE: 1.6.20		C. C		WEINER	
Item #/Petition/CUP # or Su	bject:	Municipality:	DADE	LOUNTY	
BEHAN LOCAL +	配口計			·	
Wish to Speak in Support		eak in Opposit		voilable for Information	Only
□ Registering in Support	\(\text{\text{Heyistering}}\)	g in Opposition		vailable for Information	Offig
1. On this occasion, are you				□YES	XNO
[If you checked "NO," <u>STOP</u> ; y	ou need not complete the	e rest of this forn	n. If you checke	ed "YES," go on to the nex	t question.]
Name, address and telephone	number of each person of	or organization y	ou are represen	ting:	
Comments:					
2. Are you being paid for	vour representation	or annearing i	ncidental to v	our other naid duties f	or this
person or organization?					
[If you checked "NO" to the					
If you checked "YES," cont	inue to the next questic	on.]			
3. Are you an elected offi	cial who is appearing	solely on beh	alf of your of	fice or for your munici	pality or
other governmental body	?			□YES	□NO
[If you checked "YES," to th				of this form except that y	ou must sign
this form. If you checked "N	10," to the question, go	on to the next	question.j		
4. Has or will the person					
during the current reporting				YES	□NO
(A reporting period is Janua	ry to June or from July	to December.)			
5. Do you anticipate maki					
hearings or meetings? (Do not count contacts with					
(Do not count contacts with	the County Board Supe	ervisor who rep	reserits the dis	strict in writer you reside	;.)
[If you checked "NO," to que	estions 4 and 5 above,	STOP; you ne	ed not complet	te the rest of this form.	However, if
you do make more than 2 c indicating such activity. You	ontacts at a later date,	you must then	contact the Co	ounty Clerk's office to file	e a form
the next question.]	u must also sign tilis lo	iiii. Ii you ched	cked res lo	either question at this th	ne, go on to
6. If "YES," do you under	etand that if the nere	n or organiza	ntion vou renr	eeant enande more the	an \$500
during the current reporting	ng period, you must f	ile a financial	disclosure sta	atement with the coun	ty clerk?
[If you checked "NO" please	e call the County Clerk	at 266-4121 or	ao to the Cler	YES k's office at Room 106A	⊔NO of the City-
County Building, Madison, t		a. 200 1121 01	90 10 1110 0101	o omeo at ricom room	or the only
Date:		Signature			

Print Name _____

REGISTRATION BEFORE COUNTY BOARD
DATE: 01 CCo José Name: Janua Lettman Sture
Item #/Petition/CUP # or Subject: Municipality:
₩ish 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," <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:
Towney Montal Health Center and
Forchose of Service Community
Comments:
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: 0 / 06 30 20 Signature Signature
Print Name Vanya Letteran-Shue

Signature ______Print Name _

/ _/	REGISTRATION BEFORE COUNT	TY BOARD
DATE: 1/6/2020	Name: +au	da frego are Co.
Item #/Petition/CUP # or Subject:	Municipality:	ave Co.
₩ish 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 officially		person other than yourself? □NO
[If you checked "NO," <u>STOP;</u> you need r	not complete the rest of this form. If y	ou checked "YES," go on to the next question.]
Name, address and telephone number of		e representing:
1334 Dewey		
madism WI	53 703	
Comments:		
2. Are you being paid for your rep person or organization?	, <u>STOP;</u> you need not complete th	ental to your other paid duties for this
other governmental body?	on, <u>STOP;</u> you need not complete	f your office or for your municipality or □YES
	d?	re than \$500 on county lobbying activities □YES□NO
5. Do you anticipate making more hearings or meetings? (Do not count contacts with the Count		oard supervisors other than at public NO nts the district in which you reside.)
you do make more than 2 contacts a	nt 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?□YES□NO
[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 City-
Date:	Signature	

Print Name _____

REGISTRATION BEFORE COUNTY BOARD DATE: 1-6-20 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? ______□YES ------□NO [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: Mental Health Center 25 Kessel (Washison W.) 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 (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 -------(-DNO (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.]

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/CUP # or Subject: 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?□YES ----[If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next duestion.] 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 ------. [If you checked "NO" to the question, <u>STOP</u>; 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 have 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 hearings or meetings?...... YES------(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: 1/10/20

County Building, Madison, for more information.]

Signature

......□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-

Print Name (MSQ

L. Tubbs

REGISTRATION BEFORE COUNTY BOARD 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 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 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 (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?...... (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 guestion 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

REGISTRATION BEFORE COUNTY BOARD Alorie Owens Name: Item #/Petition/CUP # or Subject: Municipality: Wish to Speak in Support ☐ 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 [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 hearings or meetings?...... (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: / - 4 - 2020 Signature

Print Name

) REGISTRATION BEFORE COUNTY BOARD
DATE: / /o/2020 Name: Aindo Jameson Item #/Petition/CUP # or Subject: Municipality: Madisor
Item #/Petition/CUP # or Subject: Municipality: Madison
☐ 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: Self 1459 E Main St. MSN 53703
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: 1/6/2020 Signature Signature

Print Name IND

DATE: 1-6-20	Name: MIKE SpiEWAK Municipality: Middleton
Item #/Petition/CUP # or Subject:	Municipality: Middleton
> 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 officially	representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need r	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number o	of each person or organization you are representing:
Comments:	
person or organization?	is appearing solely on behalf of your office or for your municipality or
during the current reporting period (A reporting period is January to Jun	d?
hearings or meetings?	than 2 contacts with County Board supervisors other than at public Unit of the County Board supervisors of the County 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 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 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 City-information.]
Date: 1-6-20	Signature M. Spiewak Print Name M. Spiewak
	Print Name M. Spiewak

DATE: 1/6/20	Name: Chelsea Crane
Item #/Petition/CUP # or Subject:	Name: Chelsea Crane Municipality: Dane (0.
✓ 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 officially	representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need r	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	f each person or organization you are representing:
Comments:	
person or organization?	resentation or appearing incidental to your other paid duties for this
other governmental body?	is appearing solely on behalf of your office or for your municipality or
during the current reporting period	ization you represent spend more than \$500 on county lobbying activities d?□YES□NO e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES□NO Type 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:	Signature
	Print Name

DATE: 1/4/2020	Name: Monua Caldwell
Item #/Petition/CUP # or Subject:	Municipality: Dane Cu
Wish to Speak in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
On this occasion, are you officially	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.]
Name, address and telephone number of 155 4 DLMCIA	f each person or organization you are representing:
Mudisun	W193703
Comments:	
person or organization?[If you checked "NO" to the question If you checked "YES," continue to the	
other governmental body?	is appearing solely on behalf of your office or for your municipality or □YES□NO n, <u>STOP</u> ; you need not complete the rest of this form except that you must sign e question, go on to the next question.]
	ization you represent spend more than \$500 on county lobbying activities d?□YES□NO e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES NO sty 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	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 1/6/2020	Signature Monica Caldwell Print Name Vin I ca Caldwell

DATE: 01/06/2020 Name: Myra McNarr Municipality:	
Item #/Petition/CUP # or Subject: Municipality:	
Wish to Speak in Support □ Wish to Speak in Opposition □ Registering in Support □ Registering in Opposition □ Available for Inform	nation 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 a Name, address and telephone number of each person or organization you are representing:	S
Comments:	
2. Are you being paid for your representation or appearing incidental to your other paid deperson or organization?	luties for this :SNNO
3. Are you an elected official who is appearing solely on behalf of your office or for your other governmental body?	S
4. Has or will the person or organization you represent spend more than \$500 on county I during the current reporting period?	lobbying activities :SNO
5. Do you anticipate making more than 2 contacts with County Board supervisors other the hearings or meetings?	han at public :SNO u reside.)
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete the rest of this you do make more than 2 contacts at a later date, you must then contact the County Clerk's offic indicating such activity. You must also sign this form. If you checked "YES" to either question at the next question.]	ce to file a form
6. If "YES," do you understand that if the person or organization you represent spends m during the current reporting period, you must file a financial disclosure statement with the	e county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or go to the Clerk's office at Room County Building, Madison, for more information.]	n 106A of the City-
Date: Signature	
Print Name	

DATE: Jan 6th 2020	Name: Clifton Davis
	Municipality:
	ak in Opposition in Opposition
On this occasion, are you officially representing a	
[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:	
person or organization?	olely on behalf of your office or for your municipality or □ YES
4. Has or will the person or organization you reporting the current reporting period?(A reporting period is January to June or from July to	oresent spend more than \$500 on county lobbying activities □ YESNO □ December.)
hearings or meetings?	ts with County Board supervisors other than at public□YES
you do make more than 2 contacts at a later date, yo	<u>TOP</u> ; you need not complete the rest of this form. However, if ou must then contact the County Clerk's office to file a form n. If you checked "YES" to either question at this time, go on to
during the current reporting period, you must file	or organization you represent spends more than \$500 e a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk at County Building, Madison, for more information.]	TYES□NO 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: <u>Jan 6,2020</u>	Signature Afton L Davis Print Name Clifton L Davis
	Print Name Llikton L Davis

DATE: Name: Dani Rinhall
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:
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
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, <u>STOP</u> ; 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
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-
Date: Signature
Date: Signature

Print Name Dani Rischall

DATE: 1/6/2020	Name: Joy Stieghtz Municipality: Cely of Madegon
Item #/Petition/CUP # or Subject:	Municipality: Cety of Makeyon
	-
☑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 officially	y 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	of each person or organization you are representing:
Jon Stier	jut 2
Modison, U	1153704 608-692-2050
Comments:	
person or organization?	presentation or appearing incidental to your other paid duties for this YES
other governmental body?	is appearing solely on behalf of your office or for your municipality or
	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 PES
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	nat 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	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 1/6/2010	Signature WSGH
•	Print Name Joy W. Stiegutz

DATE: 1/6/19	Name: Kathy Oviel Municipality: Dane
Item #/Petition/CUP # or Subject:	Municipality: Dave
✓ 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 officially	representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need r	ot complete the rest of this form. If you checked "YES," go on to the next question.]
	f each person or organization you are representing:
Out Health Inc	5231 University Ave, Madison, WI 608-238 010
Comments:	
Comments.	
person or organization?	is appearing solely on behalf of your office or for your municipality or PYESNO In, STOP; you need not complete the rest of this form except that you must sign or question, go on to the next question.] Ization you represent spend more than \$500 on county lobbying activities I?
hearings or meetings?	ty 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	□ YES□ NO County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City- Information.]
Date: 116 2020	Signature Vutt On
	Signature Print Name Rathy Ovie

DATE: 116 20	Name: Jami Crespo
Item #/Petition/CUP # or Subject:	Name: Jami Crespo Municipality: Waddson
	 □ 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:
-here speaking	on personal note, but an employee
of publicity	earth Mardison + Dane cty. PHMAC F of county gov't so me nort nety officials a lol.
15 Pas	- of county gov't so me nort
Comments:	nety atticiate a lat.
person or organization?	o is appearing solely on behalf of your office or for your municipality or
[If you checked "YES," to the questi	ion, <u>STOP</u> ; you need not complete the rest of this form except that you must sigr he question, go on to the next question.]
	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 YESVNO 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 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?
	PYES□NO County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-information.]
Date: 116120	Signature Jami Crespo
	Print Name Jami Crespo

DATE: 1- 6-20	Name: John Brown
Item #/Petition/CUP # or Subject:	Municipality: 1200
✓ Wish to Speak in Support☐ Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
	representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need r	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:
John Brown	1713 Beld ST. Madeson, WI 53713
Comments:	
person or organization?	presentation or appearing incidental to your other paid duties for this TYES
other governmental body?	is appearing solely on behalf of your office or for your municipality or
during the current reporting period	ization you represent spend more than \$500 on county lobbying activities d?□YES
hearings or meetings?	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 it 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 City-information.]
Date: 1-6 - 2020	Signature Sohn Brown
	Print Name John Brown

DEGICTE ATION DEFENDE COUNTY DO ADD TO
REGISTRATION BEFORE COUNTY BOARD I'm gub 45
DATE: 16/20 Name: Styr Calyx
Item #/Petition/CUP # or Subject: Municipality: Mad-So
✓ 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," <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:
ACCESS to Independence 608-242-8484 3810 Milwantee St.
Madison WI 53714
Madison, WE 23/6
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this
person or organization?
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
[If you checked "YES," to the question, <u>STOP</u> ; 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
(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?
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: 1/6/20 Signature Signature

Print Name

DATE: 1/4/19	Name: Aysha Clark
Item #/Petition/CUP # or Subject:	Municipality:
⊠ Wish to Speak in Support □ Registering in Support	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
	representing an organization or a person other than yourself? NO ot complete the rest of this form. If you checked "YES," go on to the next question.]
Chrysalis	each person or organization you are representing:
1342 Dewey Cours	+ Madison WI 53703
Comments:	
person or organization?	resentation or appearing incidental to your other paid duties for this STOP; you need not complete the rest of this form. e next question.] is appearing solely on behalf of your office or for your municipality or YES
during the current reporting period	zation you represent spend more than \$500 on county lobbying activities !?
hearings or meetings?	than 2 contacts with County Board supervisors other than at public □ YES□NO ty 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 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	t if the person or organization you represent spends more than \$500 l, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more i	
Date:\\(\(\lambda\) \(\gamma\)	Signature BClack Print Name Syska Clash
	Print Name Aysha Clark

DATE: 1/4/19	Name:	Kathy	Fregert
Item #/Petition/CUP # or Subject:	Municipality:	<u> </u>)
✓Wish to Speak in Support ☐ Registering in Support	☐ Wish to Speak in Opposi☐ Registering in Opposition		e for Information Only
1. On this occasion, are you officially	representing an organizatio	n or a person other tha	nn yourself?
[If you checked "NO," <u>STOP</u> ; you need r	not complete the rest of this for	m. If you checked "YES	TYES □NO ," go on to the next question.]
Name, address and telephone number of		e i i i i i i i i i i i i i i i i i i i	
Chrysalis 1342 Dewey Ct. Madism WI 53703	(608) 256-31	02	
1342 Dewey Ct.			
Madisin WI 53703			
Comments:			
 Are you being paid for your repperson or organization? [If you checked "NO" to the question of the you checked "YES," continue to the source of the you checked "YES," continue to the source of the you checked "YES," to the question this form. If you checked "NO," to the source of the you checked "NO," to the source of the source of the source of the source of the your checked "NO," to the source of the source of the source of the your checked "NO," to the source of the source of the your checked "NO," to the your checked "NO	is appearing solely on be not compose next question.] is appearing solely on be not compose, STOP; you need not compose question, go on to the nextication you represent spend? e or from July to December.	half of your office or half of your office or half of the rest of this for the question.] nd more than \$500 or half board supervisor	for your municipality or
(Do not count contacts with the Cour			
[If you checked "NO," to questions 4 you do make more than 2 contacts a indicating such activity. You must all the next question.]	t a later date, you must ther	n contact the County C	Clerk's office to file a form
6. If "YES," do you understand the during the current reporting period		disclosure statemer	nt with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-4121 of		
Date: 1/6/2028	Signature _ Print Name _	Mathy &	jegert

DATE: 2020/01/06	Name:	Garre	the
Item #/Petition/CUP # or Subject:	Municipali	ty: Madis	ttlee
Wish to Speak in Support ☐ Registering in Support			☐ Available for Information Only
1. On this occasion, are you officially	y representing an organiza	tion or a per	son other than yourself?
[If you checked "NO," <u>STOP;</u> you need	not complete the rest of this	form. If you o	:
Name, address and telephone number of	of each person or organization	on you are rep	presenting:
Madison Area Care F			
Madison, W1 53763	1.te 155		
Madison, W1 58103			
Comments:			
[If you checked "NO" to the question If you checked "YES," continue to the state of the	n, <u>STOP;</u> you need not con he next question.] o is appearing solely on l on, <u>STOP;</u> you need not c	mplete the rebelling the help of your complete the	■ YES Post of this form. Pur office or for your municipality or Pur office or for your municipality or Pur of this form except that you must sign
4. Has or will the person or organ during the current reporting period (A reporting period is January to Jun	od?		han \$500 on county lobbying activities □YES□NO
5. Do you anticipate making more hearings or meetings? (Do not count contacts with the Cou			□YES□NO
you do make more than 2 contacts a	at a later date, you must th	nen contact t	implete the rest of this form. However, if the County Clerk's office to file a form S" to either question at this time, go on to
during the current reporting period	od, you must file a financ	ial disclosu	represent spends more than \$500 ire statement with the county clerk?
[If you checked "NO" please call the County Building, Madison, for more	County Clerk at 266-412	1 or go to the	e Clerk's office at Room 106A of the City-
Date: 2020 01 06	 Signature Print Nam		attle and the second se
	FIIII Naii	IC CONTR	VI Let

DATE: Name: Donnthy Krause Item #/Petition/CUP # or Subject: Municipality: Cut hours
Item #/Petition/CUP # or Subject: Municipality:
₩ Wish to Speak in Support
,
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:
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, <u>STOP</u> ; 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, <u>STOP</u> ; 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?
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

DATE: 1-6-20 Name: Ticiq	Kelsey
Item #/Petition/CUP # or Subject: Municipality:	
 □ Wish to Speak in Support □ Registering in Support □ Registering in Opposition □ Avairable 	lable for Information Only
1. On this occasion, are you officially representing an organization or a person othe [If you checked "NO," <u>STOP</u> ; you need not complete the rest of this form. If you checked "	
Name, address and telephone number of each person or organization you are representing Ticia Kelsey - 2701 International LN 608 - 255 - 8587	
Comments:	
2. Are you being paid for your representation or appearing incidental to you person or organization?	□YES/NO
3. Are you an elected official who is appearing solely on behalf of your office other governmental body?	YES
4. Has or will the person or organization you represent spend more than \$50 during the current reporting period?	
5. Do you anticipate making more than 2 contacts with County Board supervisor meetings? (Do not count contacts with the County Board supervisor who represents the distri	
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need not complete to you do make more than 2 contacts at a later date, you must then contact the Cour indicating such activity. You must also sign this form. If you checked "YES" to eith the next question.]	nty Clerk's office to file a form
6. If "YES," do you understand that if the person or organization you represe during the current reporting period, you must file a financial disclosure state	ment 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.]	office at Room 106A of the City-
Date: Signature Print Name	Melop
THIR Name Was	1-0150

DATE: 1-6-2020 Item #/Petition/CUP # or Subject:	Name: STEVE STARKEY Municipality: MADISON
	o Speak in Opposition ering in Opposition
***************************************	ting an organization or a person other than yourself? ———————————————————————————————————
Name, address and telephone number of each personal	son or organization you are representing:
STEUR STARKEY O	DUNE EACH COBY COMMUNITY CENT
Comments:	
2. Are you being paid for your representation person or organization?	
other governmental body?	ring solely on behalf of your office or for your municipality or
4. Has or will the person or organization your during the current reporting period?	ou represent spend more than \$500 on county lobbying activities□YES□NO July to December.)
hearings or meetings?	ontacts with County Board supervisors other than at public
you do make more than 2 contacts at a later de	ove, <u>STOP</u> ; you need not complete the rest of this form. However, if late, you must then contact the County Clerk's office to file a form is form. If you checked "YES" to either question at this time, go on to
during the current reporting period, you mu	person or organization you represent spends more than \$500 ust file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County County Building, Madison, for more information	Ilerk at 266-4121 or go to the Clerk's office at Room 106A of the City-n.]
Date: 1-6-2020	Signature <u>Aun</u> Aunun Print Name <u>STEUE SYARKGY</u>
	Print Name STEVE STARKEY

DATE: 1/6/2030 Name: SHRYLIKATO Item #/Petition/CUP # or Subject: Municipality: PADGON	
Item #/Petition/CUP # or Subject: Municipality: PADCON	
□ 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?	ł
[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? [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 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 activity.	sigr
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, 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 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 Ci County Building, Madison, for more information.]	ty-
Date: Signature	
Print Name	

R	REGISTRATION BEFORE COUNTY BOARD
DATE: 1-6-20	Name: Bethamy Mansen
Item #/Petition/CUP # or Subject:	Municipality: Moulsen Dane
☐ Wish to Speak in Support	☐ Wish to Speak in Opposition
☐ Registering in Support	☐ Registering in Opposition ☐ Available for Information Only
	representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need r	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
other governmental body?	is appearing solely on behalf of your office or for your municipality or
	ization you represent spend more than \$500 on county lobbying activities d?□YES□NO e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES
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 it 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 City-information.]
Date:	Signature
	Print Name

REGISTRATION BEFORE COUNTY BOARD 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 person or organization?PYES ------- NO [If you checked "NO" to the question, <u>STOP</u>; 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 (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 guestion 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

DATE://6/20	Name: Veronica Figuera
Item #/Petition/CUP # or Subject:	Municipality: Dane County
Mich to Speak in Support	Wish to Speak in Opposition
	 □ Wish to Speak in Opposition □ Registering in Opposition □ Available for Information Only
	representing an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need r	not complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of	f each person or organization you are representing:
2005 W Deltlir	re Huy #206 madisn vot 53713
Comments:	
person or organization?	resentation or appearing incidental to your other paid duties for this
other governmental body?	is appearing solely on behalf of your office or for your municipality or
	ization you represent spend more than \$500 on county lobbying activities d?□YES□NO e or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES NO 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?
	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date:	Signature
	Print Name Werom Cartig Werow

DATE: 13-6-19 Name: Lizbeth Ramseier Item #/Petition/CUP # or Subject: Municipality: Verona, wit
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:
Lizbeth Ramseier (Verona School District) 114 Melody Circle (608) 228-1802
114 Melody (irde (608) 228-1862
Verong, WI 53593
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? (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: 12-6-19 Signature Ramseier Print Name Lizbeth Ramseier
Print Name Lizbeth Ramseier

REGISTRATION BEFORE COUNTY BOARD Municipality: Item #/Petition/CUP # or Subject: Followe Presention Behavioral Health ✓ Wish to Speak in Support ☐ 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?□YES ------ ☑ŃO [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, <u>STOP</u>; 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 ------ NO [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 guestion 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: / 6 /2020	Name:Ma	ia fearson	
Item #/Petition/CUP # or Subject:	Municipality://	ladition city	
	☐ Wish to Speak in Opposition☐ Registering in Opposition	☐ Available for Information Only	
1. On this occasion, are you official	ly representing an organization or a p	person other than yourself?	
[If you checked "NO," <u>STOP;</u> you need	not complete the rest of this form. If yo	u 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?	n, <u>STOP;</u> you need not complete the the the next question.] o is appearing solely on behalf of	your office or for your municipality or □YES□NO	
[If you checked "YES," to the quest	ion, <u>STOP;</u> you need not complete the the question, go on to the next quest	he rest of this form except that you must sign	
	od?	e than \$500 on county lobbying activities □YES□NO	
hearings or meetings?		ard supervisors other than at public □YES□NO ts 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.]			
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 County Building, Madison, for more	e County Clerk at 266-4121 or go to	the Clerk's office at Room 106A of the City-	
Date:	Signature		

Print Name _____

DATE: // 6/2020 Item #/Petition/CUP # or Subject:	Name: 5645trong Municipality: Madism
Item #/Petition/CUP # or Subject:	Municipality: Madism
, , , , , , , , , , , , , , , , , , , ,	□ Wish to Speak in Opposition□ Registering in Opposition□ Available for Information Only
On this occasion, are you officially	representing an organization or a person other than yourşelf?
[If you checked "NO," <u>STOP;</u> you need no	ot complete the rest of this form. If you checked "YES," go on to the next question.]
-	each person or organization you are representing:
RISE Wisansin	
Comments:	
person or organization?	resentation or appearing incidental to your other paid duties for this STOP; you need not complete the rest of this form. e next question.] s appearing solely on behalf of your office or for your municipality or YES
(A reporting period is January to June	or from July to December.)
hearings or meetings?	than 2 contacts with County Board supervisors other than at public YES NO ty Board supervisor who represents the district in which you reside.)
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County Building, Madison, for more in	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date:	Print Name Sur Strong