DATE: Name: Erica K. LLopez

Item #/Petition/CUP # or Subject: Muni	icipality:	
Res - 180 (support) X Wish to Speak in Support Wish to Register	in Support Wish to Speak in Opposition Wish to Register in	Opposition Available for Information Only
	to complete the rest of the form. If yo	on other than yourself? x YES NO (If you ou checked "YES" go to the next question.) are representing: United Legal Workers
COMMENTS: 2. Are you being paid for your represe	• • •	-
		e rest of this form. If you checked "YES", go
3. Are you an elected official who is ap	opearing solely on behalf of you	ur office or for your municipality or other
governmental body?checked "YES" to the question, STOP; yo the next question.)		est of this form. If you checked "YES", go to
4. Has or will the person or organization	on you represent spend more th	nan \$500 on county lobbying activities
during the current reporting period? (A	A reporting period is January to Ju	une, or July to December.) \square YES X NO
5. Do you anticipate making more than	n two contacts with the County	Board supervisors other than at public
hearings or meetings?not count contacts with the County Board		
you do make more than 2 contacts at a la	ater date, you must then contact th	to complete the rest of this form. However, if he County Clerk's office to file a form " to either question at this time, go on to the
6. If you answered "YES" to question spends more than \$500 during the cur		· · · · · · · · · · · · · · · · · · ·

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 210 Martin			
Blvd., Room 106A for more information.			

Date: Signature: Electronically signed by Erica K Lopez Printed Name: Erica K Lopez, ULW co-chair

DATE: 1	0/15/2020	Name: Judd Blau	
Item #/Pe	tition/CUP # or Subject:	Municipality: DeForest	
Resolu	tion 200		
□ v	Wish to Speak in Support	■ Wish to Speak in Opposition	Available for Information Only
□ v	Wish to Register in Support	Wish to Register in Opposition	Available for information only
		representing an organization or a person of the form. If you	
	dress and telephone number of DeForest	of each person or organization you are r	epresenting:
120 S S	Stevenson St DeFore	st, WI 53532	
COMMEN	ITS:		
2. Are yo	ou being paid for your rep	resentation or appearing incidental to	your other paid duties for this
(If you che	•	STOP ; you do not need to complete the re	
3. Are yo	ou an elected official who i	s appearing solely on behalf of your of	ffice or for your municipality or
(If you che	_	STOP; you do not need to complete the	
4. Has o	r will the person or organiz	zation you represent spend more than	\$500 on county lobbying activities
during th	e current reporting period?	? (A reporting period is January to June,	or July to December.) \square YES \square NO
5. Do yo	u anticipate making more	than two contacts with the County Boa	ard supervisors other than at public
_	•	Board supervisor who represents the dis	
you do ma	ake more than 2 contacts at a such activity. You must also	nd 5 above, <u>STOP</u> ; you do not need to co a later date, you must then contact the Co sign this form. If you checked "YES" to e	ounty Clerk's office to file a form
		n 5, do you understand that if the pers current reporting period, you must file	
(If you che	ecked "NO" please call the C	ounty Clerk at 266-4121 or go to the Cler	
	om 106A for more information /15/2020	signature: Judd Blau	Digitally signed by Judd Blau Date: 2020.10.21 13:35:56 -05'00'
Printed Name: Judd Blau			

Submit

Clear Form

REGISTRATION BEFORE COUNTY BOARD

DATE: 10/15/20	Name: Marilyn Feil	
Item #/Petition/CUP # or Subject: Climate Action Plan	Municipality: Madison	
 ■ Wish to Speak in Support ■ Wish to Register in Support 1. On this occasion, are you officially repreduced "NO" STOP; you do not need to be a support of the support of the		
Name, address and telephone number of each Madison 350 Dane County Work (ach person or organization you are re	epresenting:
COMMENTS:		<i>f</i>
2. Are you being paid for your represer	ntation or appearing incidental to y	our other paid duties for this
person or organization?		
3. Are you an elected official who is app	pearing solely on behalf of your off	ice or for your municipality or
other governmental body?		
4. Has or will the person or organization	n you represent spend more than \$	500 on county lobbying activities
during the current reporting period? (A	reporting period is January to June, o	r July to December.) YES NO
5. Do you anticipate making more than	two contacts with the County Boar	d supervisors other than at public
hearings or meetings?(Do not count contacts with the County Boa		
[If you checked "NO" to questions 4 and 5 a you do make more than 2 contacts at a late indicating such activity. You must also sign next question.].	r date, you must then contact the Cou	unty Clerk's office to file a form
6. If you answered "YES" to question 5, of spends more than \$500 during the current		
with the County Clerk?	ature: Marilyn Feil	's office at 210 Martin Luther King In
Print	ted Name: Marilyn Feil	

Submit

DATE:	Name:	
Item #/Petition/CUP # or Subject:	Municipality:	
☐ Wish to Speak in Support☐ Wish to Register in Support	─────────────────────────────────────	☐ Available for Information Only
On this occasion, are you officially re	☐ Wish to Register in Opposition epresenting an organization or a person need to complete the rest of the form. If you	n other than yourself? YES NO
Name, address and telephone number	of each person or organization you are	e representing:
COMMENTS:		
2. Are you being paid for your repre	esentation or annearing incidental to	o your other naid duties for this
person or organization?	•	rest of this form. If you checked "YES",
3. Are you an elected official who is	appearing solely on behalf of your	office or for your municipality or
		e rest of this form. If you checked "YES",
4. Has or will the person or organiza	ation you represent spend more tha	n \$500 on county lobbying activities
during the current reporting period?	(A reporting period is January to June	e, or July to December.) \square YES \square NO
5. Do you anticipate making more tl	han two contacts with the County Bo	pard supervisors other than at public
hearings or meetings?(Do not count contacts with the County		district in which you reside.)
you do make more than 2 contacts at a	later date, you must then contact the	complete the rest of this form. However, if County Clerk's office to file a form o either question at this time, go on to the
6. If you answered "YES" to question spends more than \$500 during the co		
(If you checked "NO" please call the Co	ounty Clerk at 266-4121 or go to the Cl	erk's office at 210 Martin Luther King Jr.,
Date:	Signature:	·
	Printed Name:	

Clear Form

DATE: 10-20-20	Name: Will FitzGerald	
Item #/Petition/CUP # or Subject: Resolution 180	Municipality: City of Madis	on
☐ Wish to Speak in Support☐ Wish to Register in Support	■ Wish to Speak in Opposition■ Wish to Register in Opposition	Available for Information Only
	representing an organization or a person of the form. If you	
Name, address and telephone number Socialist Alternative	of each person or organization you are r	representing:
COMMENTS:		
2. Are you being paid for your repr	resentation or appearing incidental to	your other paid duties for this
	STOP; you do not need to complete the re	
3. Are you an elected official who is	s appearing solely on behalf of your of	ffice or for your municipality or
	STOP; you do not need to complete the	
4. Has or will the person or organiz	cation you represent spend more than	\$500 on county lobbying activities
during the current reporting period?	? (A reporting period is January to June,	or July to December.) 🗌 YES 🗏 NO
5. Do you anticipate making more t	than two contacts with the County Boa	ard supervisors other than at public
•	Board supervisor who represents the dis	
you do make more than 2 contacts at a	nd 5 above, <u>STOP</u> ; you do not need to co a later date, you must then contact the Co sign this form. If you checked "YES" to e	ounty Clerk's office to file a form
<u> </u>	n 5, do you understand that if the pers current reporting period, you must file	· · · · · · · · · · · · · · · · · · ·
(If you checked "NO" please call the C	ounty Clerk at 266-4121 or go to the Cler	k's office at 210 Martin Luther King Jr.,
Blvd., Room 106A for more information Date: 10-20-20	Nill FitzGerald	Digitally signed by Will FitzGerald Date: 2020.10.20 22:02:00 -05'00'
	Printed Name: Will FitzGerald	

Submit