

Registration Report

Report Generated: 1/10/2024 17:00

Topic	Webinar ID	Scheduled Time	Duration (minutes)	# Registered	# Cancelled	# Approved	# Denied
Park Commission	992 3320 1091	1/10/2024 17:30	120	2	1	2	0

Attendee Details

First Name	Last Name	Email	City	Phone	Registration Time	Approval Status	What are your Pronouns?
Nancy	Wiegand	wiegand@cs.wisc.edu	Madison	608-261-1451	1/7/2024 11:05	approved	
Mike	Weber	michael.weber@deancare.com	Madison	608-827-4014	1/8/2024 12:04	cancelled by self	
Brock	Woods	brock.woods@wisc.edu	Madison	608-225-5858	1/10/2024 14:35	approved	He, his

First Name	Last Name	How do you plan on attending the meeting?	Do you wish to provide public comment or register in support/opposition of an agenda item?	Agenda Item Number(s)	Do you support or oppose the agenda item?	Do you want to speak?	Are you being paid to represent an organization?
Nancy	Wiegand	In Person	Yes, Continue to the Next Question	Indian Lake draft plan: oppose, want to speak	Oppose	Yes, I want to speak	No
Mike	Weber	In Person	No, STOP and SUBMIT Registration form				
Brock	Woods	In Person	Yes, Continue to the Next Question	Comments on Indian Lake Plan as representative of the Madison Nordic Ski Club, and separately for me personally	Neither Support or Oppose	Yes, I want to speak	No

REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name: Park Commission Name: DAVID ROBB

DATE: 1/10/2024 Municipality: MADISON

Petition/CUP #/Resolution/Ordinance Amendment/Subject: INDIAN LAKE

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:

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," turn over 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 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? 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: JAN 10, 2024

Signature [Handwritten Signature]

Print Name DAVID ROBB