	EGISTRATION	BEFORE COU	NTY BO	ARD	C	Tem N	leve
DATE: 9/18/25	N	Jame: NW	LR.	Der	+		200.00
Item #/Petition/CUP # or Subject:	N	Name: NW Nunicipality: D	CSO			ſ	
	Wish to Spea ☐ Registering in			Availab	le for Infor	mation C	nly
1. On this occasion, are you officially	representing an	organization or	a persor	other th	an yoursel	f?	
[If you checked "NO," <u>STOP;</u> you need no	ot complete the re	est of this form. If	you ched	cked "YES	□ YE S," go on to	the next of	XNO question.]
Name, address and telephone number of	each person or o	organization you a	are repres	senting:			
					1		N I
Comments:		1			e e		
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?							
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:	8	Signature					

Print Name _____

REGISTRATION BEFORE COUNTY BOARD Name: JACK DATE: 9-18-25 Municipality: Me farland 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-[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 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. 9-18-25

REGISTRATION BEFORE COUNTY BOARD Name: Mathew 1 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 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 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.]

Signature

Print Name

Date: _____

				Dlivia
alvahar	REGISTRATION BEFORE C	OUNTY BOARE		
DATE: 9/18/25	Name:	Ohn	Fan	farry
Item #/Petition/CUP # or Subject:	Municipality:		1 adison	J
Kes 146	-			
☐ Wish to Speak in Support☐ Registering in Support	₩ish to Speak in OppositionRegistering in Opposition		ailable for Informa	tion Only
On this occasion, are you officiall	v representing an organization	n or a nerson oth	er than vourself?	•
[If you checked "NO," <u>STOP</u> ; you need			\precent YES -	NO
				next question.j
Name, address and telephone number	of each person or organization y	ou are representi	ng:	
Comments:				
2. Are you being paid for your re	presentation or appearing in	ncidental to you	ur other paid duti	es for this
person or organization?[If you checked "NO" to the question				(NO)
If you checked "YES," continue to t			10 101111.	
3. Are you an elected official who	is appearing solely on beh	nalf of your office	ce or for your mu	nicipality or
other governmental body?			YES -	\NO /
[If you checked "YES," to the questi- this form. If you checked "NO," to the			this form except th	iat you must sign
4. Has or will the person or organ	nization volu represent spen	nd more than \$5	00 on county lob	hving activities
during the current reporting period	d?		YES	NO
(A reporting period is January to Jur	ie or from July to December.)			
5. Do you anticipate making more	than 2 contacts with Cour	nty Board super	visors other than	at public
hearings or meetings?(Do not count contacts with the Cou	nty Board supervisor who rec	resents the dist		□NO
[If you checked "NO," to questions 4 you do make more than 2 contacts a	and 5 above, <u>5 rop</u> , you nee at a later date, you must then	ed not complete contact the Cou	the rest of this for Inty Clerk's office t	m. However, it o file a form
indicating such activity. You must a the next question.]	lso sign this form. If you ched	cked "YES" to ei	ther question at th	is time, go on to
		Vir		
6. If "YES," do you understand the during the current reporting period	at if the person or organiza d. vou must file a financial	ition you repres disclosure stat	sent spends more ement with the co	than \$500
***************************************	•••••		YES -	NO
[If you checked "NO" please call the County Building, Madison, for more	information.]	go to the Clerk	s office at Hoom 1	U6A of the City-
	-	5		
Date: 9/18/25	Signature			
	Print Name	Oliv	ia Parr	J
			1 301 1	

REGISTRATION BEFORE COUNTY BOARD
DATE: 9/18/2025 Name: Katha Andrusz Item #/Petition/CUP # or Subject: Municipality: Stoughtn
Item #/Petition/CUP # or Subject: Municipality: Stoughtn
8050 wh 46
☐ Wish to Speak in Support
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:
reame, address and telephone number of each person of 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?
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?
(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: Signature

Print Name _____

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/CUP # or Subject: Wish to Speak in Opposition ☐ Wish to Speak in Support □ 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?..... (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: 9-18-25	Name: Alex Duck
Item #/Petition/CUP # or Subject:	Municipality: Dane CO.
□ Wish to Speak in Support □ Registering in Support □ Register	Speak in Opposition □ Available for Information Only
1. On this occasion, are you officially represent	ing an organization or a person other than yourself?
[If you checked "NO," <u>STOP</u> ; you need not complete	e the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of each pers	on or organization you are representing:
Comments:	
person or organization?	
this form. If you checked "NO," to the question	, go on to the next question.]
4. Has or will the person or organization you during the current reporting period?	u represent spend more than \$500 on county lobbying activities YES luly to December.)
hearings or meetings?	ntacts with County Board supervisors other than at public YES□NO supervisor who represents the district in which you reside.)
you do make more than 2 contacts at a later da	ve, <u>STOP</u> ; you need not complete the rest of this form. However, if the ten in the step is the step is form. If you checked "YES" to either question at this time, go on to
during the current reporting period, you must	erson or organization you represent spends more than \$500 st file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the County Cle County Building, Madison, for more information	erk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 9-18-25	Signature My Man
	Print Name Alex Dudek

REGISTRATION BEFORE COUNTY BOARD
DATE: 9/18/2025 Name: Derek Wallage
Item #/Petition/CUP # or Subject: Municipality:
after startly
☐ Wish to Speak in Support Wish to Speak in Opposition
□ Registering in Support
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:
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:

Print Name _

DATE: 04/18/25	Name: Niuits Pianzov Municipality: Madison
Item #/Petition/CUP # or Subject:	Municipality: Madison
	Wish to Speak in Opposition Registering in Opposition Available for Information Only
	presenting an organization or a person other than yourself?
[If you checked "NO," <u>STOP;</u> you need not	complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number of e	ach person or organization you are representing:
Comments:	
person or organization?	appearing solely on behalf of your office or for your municipality or
	STOP; you need not complete the rest of this form except that you must sign question, go on to the next question.]
during the current reporting period?	tion you represent spend more than \$500 on county lobbying activities
5. Do you anticipate making more th hearings or meetings?(Do not count contacts with the County	an 2 contacts with County Board supervisors other than at public YES 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,	if the person or organization you represent spends more than \$500 you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the Co County Building, Madison, for more info	
Date:	Signature Nikita Pika
	Print Name Nikita Plan

REGISTRATION BEFORE COUNTY BOARD DATE: 9-18-25 Item #/Petition/CUP # or Subject: Municipality: ☐ Wish to Speak in Support ☐ Wish to Speak in Opposition □ 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 guestion.] 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.] 4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities (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.1 Date: Signature ____

Print Name

DATE: 9 18 25	Name: Casey Kelley Municipality: Madison
Item #/Petition/CUP # or Subject:	Municipality: Madu 80 A
☐ Wish to Speak in Support☐ Registering in Support	☐ Wish to Speak 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	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 YES
other governmental body?[If you checked "YES," to the question	is appearing solely on behalf of your office or for your municipality or YES
4. Has or will the person or organ during the current reporting perio	ization you represent spend more than \$500 on county lobbying activities d?□YESNO
(A reporting period is January to Jun	e or from July to December.)
hearings or meetings?	e 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 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	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
Date: 9 18 25	Signature May Relly Print Name (9 Sey) Relley
	Print Name (9 Sey) Relley

o (o) / RE	GISTRATION BEFORE COUNT	Y BOARD S
DATE: 9/18/29	Name:	HEEN MOME
Item #/Petition/CUP # or Subject:	Municipality:	Mulison
	Wish to Speak in Opposition Registering in Opposition	☐ Available for Information Only
1. On this occasion, are you officially re		
[If you checked "NO," <u>STOP;</u> you need no	t complete the rest of this form. If y	ou checked "YES," go on to the next question.]
Name, address and telephone number of e	each person or organization you are	representing:
Comments:		
[If you checked "NO" to the question, <u>S</u> If you checked "YES," continue to the	STOP; you need not complete the next question.]	
other governmental body?	, <u>STOP;</u> you need not complete t	your office or for your municipality or
4. Has or will the person or organize during the current reporting period? (A reporting period is January to June of the current reporting period is January to	<i>?</i>	re than \$500 on county lobbying activities □YES□NO
5. Do you anticipate making more the hearings or meetings?		ard supervisors other than at public YES NO ts the district in which you reside.)
you do make more than 2 contacts at a	a later date, you must then conta	complete the rest of this form. However, if ct 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 disclo	ou represent spends more than \$500 sure statement with the county clerk?
[If you checked "NO" please call the Co County Building, Madison, for more info	ounty Clerk at 266-4121 or go to	the Clerk's office at Room 106A of the City-
Date: 9 (18/25	Signature MM	Type Menus
	Print Name	lagge / Nous

REGISTRO ANTE LA JUNTA DEL CONDADO

FECHA:	9/18/25	Nombre:	Riley 1	Veel
N.° de íte	em/Petición/N.º de CUP o Tema:	Municipalidad: _	Madis	w^
	Deseo intervenir a favor	— ☐ Deseo intervenir en c	ontra	☐ Disponible solo con fines
	Deseo registrarme a favor	Deseo registrarme en	contra	informativos
1. Ene	sta ocasión, ¿representa oficialme (Si marcó la opción "N Si marcó l	ente a una organización u NO", <u>DETÉNGASE</u> ; no debe la opción "SÍ", continúe con l	completar el res	sto del formulario.
Nombre,	dirección y número de teléfono de c	ada persona u organización	a la que está re	presentando:
COMENT	TARIOS:			
2. ¿Est	á recibiendo remuneración por su	representación o compar	ece como cons	ecuencia de sus otras
(Si marco	ones remuneradas con esta perso ó la opción "NO" como respuesta a la la opción "SÍ", continúe con la siguie	a pregunta, DETÉNGASE ; n		
	un funcionario electo que compar			1
(Si marcé	no del gobierno? ò la opción "Sĺ" como respuesta a la la opción "NO", continúe con la sigu	pregunta, DETÉNGASE ; no	debe completar	el resto del formulario.
4. ¿La բ del cond	persona u organización que repres ado durante el período de informe	senta ha gastado o gastara a actual?	á más de \$500 e	en actividades de cabildeo
(Un perío	do de informe tiene lugar desde ene	ero a junio o desde julio a dic	ciembre)	sí 🗖 no
5. ¿Ant	icipa que hará más de dos contac	tos con los supervisores d	de la Junta del (Condado que no tengan lugar
	ones o audiencias públicas? a en cuenta los contactos con el sup			ente el distrito en el que usted reside).
formulario del Conda	o la opción "NO" como respuesta a la o. Sin embargo, si no hizo más de 2 ado para presentar un formulario que ada pregunta en este momento, cont	contactos en una fecha pos e indique dicha actividad. Ta	terior, debe com ambién debe firm	no debe completar el resto del unicarse con la oficina del Secretario nar este formulario. Si marcó la opción
6. Si res más de \$	spondió "SÍ" a la pregunta 5, ¿con 500 durante el período de informe	nprende que si la persona e actual, usted debe presei	u organización ntar una declar	a la que usted representa gasta ación de su situación financiera
(Si marcć	ecretario del Condado? la opción "NO", llame al Secretario in Luther King Jr., Blvd., Room 106A	del Condado al 266-4121 o	diríjase a la ofici	
Fecha: _	10010	Firma: Nombre en letra de impren	ta: Liv	y Vear

/ / RE	GISTRATION BEFORE CO	DUNTY BOARD
DATE: 9/8/ZS	Name:	Robert Larson Mission WI
Item #/Petition/CUP # or Subject:	Municipality: _	Mrshim WI
☐ Wish to Speak in Support ☐☐ Registering in Support ☐	Wish to Speak in Opposition	on
On this occasion, are you officially reconstruction. [If you checked "NO," STOP; you need not Name, address and telephone number of expressions. STOP ST	complete the rest of this form.	□ YES□ NO If you checked "YES," go on to the next question.]
Comments:		
2. Are you being paid for your repreperson or organization?	STOP; you need not complet	cidental to your other paid duties for this YES NO te the rest of this form.
other governmental body?	STOP; you need not compl	alf of your office or for your municipality or YES NO blete the rest of this form except that you must sign question.]
4. Has or will the person or organizaduring the current reporting period? (A reporting period is January to June of		d more than \$500 on county lobbying activities □YES□NO
hearings or meetings?		ty Board supervisors other than at public YES NO resents the district in which you reside.)
you do make more than 2 contacts at a	later date, you must then co	d 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,	you must file a financial di	tion you represent spends more than \$500 disclosure statement with the county clerk?
[If you checked "NO" please call the Co County Building, Madison, for more info	ounty Clerk at 266-4121 or g	go to the Clerk's office at Room 106A of the City-
Date: 9/8/25	Signature Print Name	Brook Larson

, REGISTRATION BEFORE COUNTY BOARD
DATE: 9/18/25 Name: BEN RATLIFFE Municipality: DANE COUNTY
Item #/Petition/CUP # or Subject: Municipality: DANE COUNTY 2025 RES 146
 □ Wish to Speak in Support □ Registering in Support □ Wish to Speak 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:
AFSCME COUNCIL 32
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?
during the current reporting period, you must file a financial disclosure statement with the county clerk? YES [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: 9/18/

Signature

Print Name BEN RATUKKO

DATE: 9/18/25	_ Name:	AlexisTur	Ther
Item #/Petition/CUP # or Subject:	Municipa	ality: MAD 1500	
Res. 146		,	
	☐ Wish to Speak in Opp		
☐ Registering in Support	Registering in Oppos	ition	e for Information Only
1. On this occasion, are you officially i	representing an organiz	ation or a person other tha	n yourself?
[If you checked "NO," <u>STOP;</u> you need no	ot complete the rest of this	s form. If you checked "YES,	"go on to the next question.]
Name, address and telephone number of	each person or organizat	ion you are representing:	
Comments:			
2. Are you being paid for your repreperson or organization?	STOP; you need not co		□YES
	,	hobalf of your office or d	for vous soundain alter an
3. Are you an elected official who is other governmental body?			YESNO
[If you checked "YES," to the question this form. If you checked "NO," to the	, <u>STOP</u> ; you need not of question, go on to the	complete the rest of this for next question.]	rm except that you must sigr
4. Has or will the person or organiz	ation you represent s	pend more than \$500 on	county lobbying activities
during the current reporting period? (A reporting period is January to June	or from July to Decemb	oer.)	YES NO
5. Do you anticipate making more t hearings or meetings? (Do not count contacts with the County)			YES NO
[If you checked "NO," to questions 4 a	nd 5 above, <u>STOP;</u> yoı	u need not complete the re	st of this form. However, if
you do make more than 2 contacts at a indicating such activity. You must also the next question.]	a later date, you must t	hen contact the County Cle	erk's office to file a form
6. If "YES," do you understand that during the current reporting period,	if the person or orga you must file a finance	nization you represent sp	pends more than \$500 t with the county clerk?
[If you checked "NO" please call the Conty Building, Madison, for more inf	ounty Clerk at 266-412	1 or go to the Clerk's office	□YES□NO e at Room 106A of the City-
Date:	Signatur	e	
		ne	

REGISTRATION BEFORE COUNTY BOARD
DATE: 9/18/25 Name: Showa Herr
Item #/Petition/CUP # or Subject: Municipality:
Resolution 146
 □ Wish to Speak in Support □ Registering in Support □ Wish to Speak 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:
Comments:
2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
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: 918 25 Signature Dur 12 Hers

Print Name Shoua Herr

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 1. On this occasion, are you officially representing an organization or a person other than yourself? [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.] Name, address and telephone number of each person or organization you are representing: Comments: 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES ------ NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.] 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or other governmental body?...... [If you checked "YES," to the question, STOP; you need not complete the rest of this form except that you must sign this form. If you checked "NO," to the question, go on to the next question.] 4. Has or will the person or organization you represent spend more than \$500 on county lobbying activities (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: 9/18/25

Signature Lee Legy

DATE: 9/18/25	Name: Gretchen Lowe
Item #/Petition/CUP # or Subject:	Name: Greeney Lowe Municipality: Madison
146 Dean Care	-
☐ 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	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:
Gretchen Lowe	
205 Crystal Ln	
Maxison W1 53714	
Comments:	
2. Are you being paid for your repperson 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□YES□NO
[If you checked "YES," to the questic this form. If you checked "NO," to th	on, <u>STOP</u> ; you need not complete the rest of this form except that you must sign se question, go on to the next question.]
4. Has or will the person or organ	ization you represent spend more than \$500 on county lobbying activities d? YES□NO
(A reporting period is January to Jun	e or from July to December.)
hearings or meetings?	e than 2 contacts with County Board supervisors other than at public NO nty 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 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:	Signature <u>Hretchen Lowe</u> Print Name <u>Gretchen Lowe</u>
	Print Name Gretchen Lowe

alista	REGISTRATION BEFORE COUNTY BOARD
DATE: 9/18/2025	Name: Miguel McDonald Municipality: Madison (City)
item #/r etition/COF # of Subject.	Municipality: Madisoh (City)
<i>K3</i>	
☐ 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	lly 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:
0	
Comments:	
[If you checked "NO" to the question If you checked "YES," continue to it you checked "YES," continue to it other governmental body?	o is appearing solely on behalf of your office or for your municipality or YES
hearings or meetings?	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	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 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: 9/18/25	Signature May May May Print Name Miguel McDohal
	Print Name Miguel McDohald

DATE: 9/18/2-5 Name: 1	m mchhight Fitchburg
Item #/Petition/CUP # or Subject: Municipality:_	Fitchburg
 □ Wish to Speak in Support □ Registering in Support □ Wish to Speak in Opposition 	on Available for Information Only
On this occasion, are you officially representing an organization	
[If you checked "NO," <u>STOP</u> ; you need not complete the rest of this form.	□YES □NO If you checked "YES," go on to the next question.]
Name, address and telephone number of each person or organization yo	u are representing:
Comments:	
 Are you being paid for your representation or appearing incorperson or organization? [If you checked "NO" to the question, STOP; you need not completely you checked "YES," continue to the next question.] Are you an elected official who is appearing solely on behad other governmental body? [If you checked "YES," to the question, STOP; you need not completely you checked "YES," to the question, go on to the next of this form. If you checked "NO," to the question, go on to the next of the current reporting period? Has or will the person or organization you represent spend during the current reporting period? (A reporting period is January to June or from July to December.) Do you anticipate making more than 2 contacts with County to December. 	TYES
hearings or meetings? (Do not count contacts with the County Board supervisor who represent	esents the district in which you reside.)
[If you checked "NO," to questions 4 and 5 above, <u>STOP</u> ; you need you do make more than 2 contacts at a later date, you must then continuous indicating such activity. You must also sign this form. If you check the next question.]	ontact the County Clerk's office to file a form
6. If "YES," do you understand that if the person or organizati during the current reporting period, you must file a financial d	isclosure statement with the county clerk?
[If you checked "NO" please call the County Clerk at 266-4121 or g County Building, Madison, for more information.]	o to the Clerk's office at Room 106A of the City-
Date: 9/18/25 Signature _ C	im Mchnist

DATE: 9/18/25	Name:	Julia	Mcknight	
Item #/Petition/CUP # or Subject:	Municipa	ality:	Acknight Fitchburg	
□ Wish to Speak in Support□ Registering in Support	□ Wish to Speak in Op		☐ Available for Inf	ormation Only
1. On this occasion, are you officially				
[If you checked "NO," <u>STOP;</u> you need n	ot complete the rest of th	is form. If you	checked "YES," go on	YES □ NO to the next question.]
Name, address and telephone number of	f each person or organiza	ition you are re	epresenting:	
Comments:				
2. Are you being paid for your rep person or organization?	STOP; you need not come next question.] is appearing solely or n, STOP; you need not	omplete the r	rest of this form. our office or for you e rest of this form exc	YES ur municipality or YES ∰NO
4. Has or will the person or organi during the current reporting period (A reporting period is January to June	l?		than \$500 on count	ty lobbying activities YES∜NO
5. Do you anticipate making more hearings or meetings?(Do not count contacts with the Coun				YES XNO
[If you checked "NO," to questions 4 a you do make more than 2 contacts at indicating such activity. You must als the next question.]	a later date, you must	then contact	the County Clerk's o	ffice to file a form
6. If "YES," do you understand that during the current reporting period	l, you must file a finar	ncial disclos	ure statement with	the county clerk?
[If you checked "NO" please call the (County Building, Madison, for more in	County Clerk at 266-412			
Date: 9/18/25	Signa tu Print Na	re JA	ANCEN.	======================================

1	REGISTRATION BEFORE COUNTY	
DATE: 9/18/25	Name: Miciam	Morales
Item #/Petition/CUP # or Subject:	Municipality: Mad	lison
	_	
☐ 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	ly representing an organization or a pe	erson other than yourself?
		checked "YES," go on to the next question.]
	of each person or organization you are re	
Comments:		
person or organization?	n, <u>STOP;</u> you need not complete the i	al to your other paid duties for this NO rest of this form.
other governmental body?		our office or for your municipality or YES MO e rest of this form except that you must sign n.]
4. Has or will the person or organduring the current reporting period (A reporting period is January to Jun	od?	than \$500 on county lobbying activities □YESNO
hearings or meetings?	e than 2 contacts with County Boar nty Board supervisor who represents	d supervisors other than at public the district in which you reside
[If you checked "NO," to questions a you do make more than 2 contacts a	and 5 above, <u>STOP;</u> you need not ca at a later date, you must then contact	omplete the rest of this form. However, if the County Clerk's office to file a form ES" to either question at this time, go on to
6. If "YES," do you understand the during the current reporting period	nat if the person or organization you	u represent spends more than \$500 ure/statement with the county clerk?
		7 1 1/
County Building, Madison, for more	information.]	er Clerk's Unice at Room 106A of the City-
Date: 9/18/28	Signature	
	Print Name	m Moreles
	1 11.10	- I faren -

DATE: 9/18/25	Name: Sacob Martinez
Item #/Petition/CUP # or Subject:	Name: Sacob Martinez Municipality: Edgertor WI
☐ 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? ······□YES
	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:	
O. Ave very being a sid for a second	
2. Are you being paid for your rep person or organization?	resentation or appearing incidental to your other paid duties for this ∑NO
[If you checked "NO" to the question, If you checked "YES," continue to th	STOP; you need not complete the rest of this form.
	•
other governmental body?	is appearing solely on behalf of your office or for your municipality or □YES
[If you checked "YES," to the questio	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.]
Has or will the person or organi during the current reporting period	ization you represent spend more than \$500 on county lobbying activities di?□YES
(A reporting period is January to June	e 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 Coun	ty Board supervisor who represents the district in which you reside.)
	and 5 above, STOP; you need not complete the rest of this form. However, if
you do make more than 2 contacts a	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
the next question.]	so sign this form. If you checked TES to either question at this time, go on to
6. If "YES," do you understand tha	at if the person or organization you represent spends more than \$500
during the current reporting period	d, you must file a financial disclosure statement with the county clerk?
[If you checked "NO" please call the (County Building, Madison, for more in	County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the Citynformation.]
Date: 9/18 (25	Signature Jul Mos
	Signature Jacob Martinez

REGISTRO ANTE LA JUNTA DEL CONDADO

FECHA: 9/18/25	Nombre: Andres Velasco chav
N.º de ítem/Petición/N.º de CUP o Tema:	Municipalidad:
Deseo intervenir a favor	☐ Deseo intervenir en contra ☐ Disponible solo con fines informativos
☐ Deseo registrarme a favor	☐ Deseo registrarme en contra
(Si marcó la opción	mente a una organización u a otra persona que no sea usted? Sí NO "MO", <u>DETÉNGASE</u> ; no debe completar el resto del formulario. só la opción "Sĺ", continúe con la siguiente pregunta).
Nombre, dirección y número de teléfono de	e cada persona u organización a la que está representando:
COMENTARIOS:	
obligaciones remuneradas con esta per	su representación o comparece como consecuencia de sus otras sona u organización?
3. ¿Es un funcionario electo que comp	parece solamente en nombre de su oficina o para su municipalidad u otro
	la pregunta, <u>DETÉNGASE</u> ; no debe completar el resto del formulario. iguiente pregunta).
4. ¿La persona u organización que rep del condado durante el período de infor	resenta ha gastado o gastará más de \$500 en actividades de cabildeo me actual?
(Un período de informe tiene lugar desde e	enero a junio o desde julio a diciembre)
5. ¿Anticipa que hará más de dos cont	tactos con los supervisores de la Junta del Condado que no tengan lugar
en reuniones o audiencias públicas? (No tenga en cuenta los contactos con el s	supervisor de la Junta del Condado que represente el distrito en el que usted reside).
formulario. Sin embargo, si no hizo más de	a las preguntas 4 y 5 anteriores, <u>DETÉNGASE</u> ; no debe completar el resto del e 2 contactos en una fecha posterior, debe comunicarse con la oficina del Secretario que indique dicha actividad. También debe firmar este formulario. Si marcó la opción ontinúe con la siguiente pregunta].
	comprende que si la persona u organización a la que usted representa gasta me actual, usted debe presentar una declaración de su situación financiera
ante el Secretario del Condado?	sí ∠⊠ no
(Si marcó la opción "NO", llame al Secreta 210 Martin Luther King Jr., Blvd., Room 10	rio del Condado al 266-4121 o diríjase a la oficina del Secretario en
Fecha: 0 / 18 / 9 S	Firma:
	Nombre en letra de imprenta: Ava (2) VI 0800

Chavez

REGISTRATION BEFORE COUNTY BOARD					
DATE: 18 Sept. 2025 Name: JASON BUNICE					
Item #/Petition/CUP # or Subject: Municipality: MAD ISON 2025 RES 146					
 □ Wish to Speak in Support □ Registering in Support □ Wish to Speak in Opposition □ Available for Information Only 					
1. On this occasion, are you officially representing an organization or a person other than yourself? ———————————————————————————————————					
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: 18 Sept. 2025 Signature					
Print Name					

DATE:	18	SEPT	25	_	Name:	EZIK	Ar	Primpos	
Item #/Pe	etition/C	UP # or S	Subject:		Municipality:	Tous	of	Primpos	;c
□ Wish to	Speak ering in	in Suppo Support	ort	□ Wish to Sp Registerin	peak in Opposig in Opposition	tion	□ Ava	ilable for Inforn	nation Only
1. On this	s occasi	on. are vo	/ ou officially	representing	an organizatio	n or a pers	on othe	r than vourself	2
[If you che	cked "N	O," <u>STOP</u> ;	you need r	not complete th	e rest of this for	m. If you ch	necked "	□ YE \$ YES," go on to t	the next question.]
					or organization				,
Commen	ts:								
If you che If you che If you che 3. Are you other gove [If you che	r organ ecked " ecked " ou an el vernme ecked "	vization? NO" to the YES," condense of the tool of th	e question, ntinue to th ficial who y?	s STOP; you release next question is appearing on, STOP; you	need not comp on.] solely on be	half of you	of this	s form. e or for your n □YE	uties for this S
during th	e curre	nt report	ing period	1?	epresent sper to December.		an \$50	0 on county lo	obbying activities S□NO
hearings	or mee	tings?						risors other th	S □NO
you do m	ake mo such a	re than 2 ctivity. Yo	contacts a	t a later date,	you must then	contact th	e Coun	ty Clerk's office	form. However, if e to file a form this time, go on to
6. If "YE during th	S," do y e curre	ou unde	ing period	d, you must f	ile a financial	disclosur	e state		county clerk?
			se call the						S□ NO on 106A of the City-
Date:	85	6PT	25		Signature _		K		
	·				Print Name _	EF	IF"	ANOTE	Sa

REGISTRO ANTE LA JUNTA DEL CONDADO

FECHA:	9-18-2025	Nombre:	Noemi	Mendoza			
N.º de ít	em/Petición/N.º de CUP o Tema:	Municipalidad:					
3	Resolution 146						
	Deseo intervenir a favor	☐ Deseo intervenir en cont	ra 🗆	Disponible solo con fine	es		
	Deseo registrarme a favor	Deseo registrarme en co	ontra	informativos			
1. En esta ocasión, ¿representa oficialmente a una organización u a otra persona que no sea usted? Sí NO (Si marcó la opción "NO", <u>DETÉNGASE</u> ; no debe completar el resto del formulario. Si marcó la opción "SÍ", continúe con la siguiente pregunta).							
Nombre, dirección y número de teléfono de cada persona u organización a la que está representando:							
COMEN	TARIOS:						
2. ¿Est	tá recibiendo remuneración por su	representación o comparece	e como consecu	iencia de sus otras			
(Si marc Si marcó	ones remuneradas con esta person ó la opción "NO" como respuesta a la ó la opción "SÍ", continúe con la siguie un funcionario electo que compare	a pregunta, <u>DETÉNGASE;</u> no c ente pregunta).	lebe completar e	l resto del formulario.			
organisı (Si marc	mo del gobierno?ó la opción "SÍ" como respuesta a la jó la opción "NO", continúe con la sigui	pregunta, DETÉNGASE ; no de					
	persona u organización que repres dado durante el período de informe		nás de \$500 en a	actividades de cabildeo)		
	odo de informe tiene lugar desde ene		mbre)		sí 🖾 no		
5. ¿An	ticipa que hará más de dos contac	tos con los supervisores de	la Junta del Cor	ndado que no tengan lu	ıgar		
	iones o audiencias públicas? a en cuenta los contactos con el supe				sí D NO ed reside).		
formular del Cond	ó la opción "NO" como respuesta a la io. Sin embargo, si no hizo más de 2 dado para presentar un formulario que ada pregunta en este momento, cont	contactos en una fecha poster e indique dicha actividad. Tami	ior, debe comuni bién debe firmar	carse con la oficina del S	Secretario		
6. Si respondió "SÍ" a la pregunta 5, ¿comprende que si la persona u organización a la que usted representa gasta más de \$500 durante el período de informe actual, usted debe presentar una declaración de su situación financiera							
(Si marc 210 Mar	Secretario del Condado?ó la opción "NO", llame al Secretario tin Luther King Jr., Blvd., Room 106A	del Condado al 266-4121 o dir	íjase a la oficina		sí □ no		
Fecha:	09-18-2015	Firma:	REGULA	, P .			
	1	Nombre en letra de imprenta) 1	Joemi Mendo	20		



REGISTRATION BEFORE COUNTY BOARD						
DATE: 9 18 2025 REGISTRATION BEFORE COUNTY BOARD Name: JULIA GREENLEM						
DATE: 9 18 2025 Item #/Petition/CUP # or Subject: #3 RESOUTION - 146 Name: JMUIA-GREENUEM- Municipality: MMISON						
 □ Wish to Speak in Support □ Registering in Support □ Wish to Speak 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:						
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: 9/18/2025 Signature TULIT GREENLETTE						
Print Name) TULIT GREENLEY						

Print Name

REGISTRATION BEFORE COUNTY BOARD Item #/Petition/CUP # or Subject: solution ☐ Wish to Speak in Support ■ Wish to Speak in Opposition □ Registering in Support Registering in Opposition □ Available for Information Only 1. On this occasion, are you officially representing an organization or a person other than yourself? [If you checked "NO," STOP; you need not complete the rest of this form. If you checked "YES," go on to the next question.] Name, address and telephone number of each person or organization you are representing: Comments: 2. Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization? YES ------ NO [If you checked "NO" to the question, STOP; you need not complete the rest of this form. If you checked "YES," continue to the next question.] 3. Are you an elected official who is appearing solely on behalf of your office or for your municipality or [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 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-

Date: 9/19/25

County Building, Madison, for more information.]

Signature

DATE: 9/18/25 Name: Heidi Van Landinghan
Item #/Petition/CUP # or Subject: Municipality: Madisco
 □ Wish to Speak in Support □ Registering in Support □ Registering in Opposition □ Available for Information Only
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:
Comments:
 Are you being paid for your representation or appearing incidental to your other paid duties for this person or organization?
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: 9/18/25 Signature Hadi Van Landinghom

DATE: 09 19 2025	Name:
Item #/Petition/CUP # or Subject:	Municipality: Out of County
2025 RES-146	
□ 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 n	ot complete the rest of this form. If you checked "YES," go on to the next question.]
Name, address and telephone number o	each person or organization you are representing:
Comments:	
2. Are you being paid for your rep	resentation 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 th	
	s appearing solely on behalf of your office or for your municipality or□YES□NO
[If you checked "YES," to the questio	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.]
	zation you represent spend more than \$500 on county lobbying activities
during the current reporting period (A reporting period is January to June	?
5. Do vou anticipate making more	than 2 contacts with County Board supervisors other than at public
hearings or meetings?	Type VO ty Board supervisor who represents the district in which you reside.)
*	
	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
indicating such activity. You must als the next question.]	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, you must file a financial disclosure statement with the county clerk?
	□ YES□ NO County Clerk at 266-4121 or go to the Clerk's office at Room 106A of the City-
County Building, Madison, for more in	
Date: 09 18 2025	Signature
Date. up (10) De L')	Drint Name Tifffing VAMA

REGISTRO ANTE LA JUNTA DEL CONDADO Nombre: N.º de ítem/Petición/N.º de CUP o Tema: Municipalidad: Deseo intervenir a favor Deseo intervenir en contra Disponible solo con fines informativos ☐ Deseo registrarme a favor Deseo registrarme en contra 1. En esta ocasión, ¿representa oficialmente a una organización u a otra persona que no sea usted? 🔲 SÍ 🔼 NO (Si marcó la opción "NO", **DETÉNGASE**; no debe completar el resto del formulario. Si marcó la opción "SÍ", continúe con la siguiente pregunta). Nombre, dirección y número de teléfono de cada persona u organización a la que está representando: **COMENTARIOS:** 2. ¿Está recibiendo remuneración por su representación o comparece como consecuencia de sus otras (Si marcó la opción "NO" como respuesta a la pregunta, DETÉNGASE; no debe completar el resto del formulario. Si marcó la opción "Sí", continúe con la siguiente pregunta). 3. ¿Es un funcionario electo que comparece solamente en nombre de su oficina o para su municipalidad u otro (Si marcó la opción "SÍ" como respuesta a la pregunta, **DETÉNGASE**; no debe completar el resto del formulario. Si marcó la opción "NO", continúe con la siguiente pregunta). 4. ¿La persona u organización que representa ha gastado o gastará más de \$500 en actividades de cabildeo del condado durante el período de informe actual? (Un período de informe tiene lugar desde enero a junio o desde julio a diciembre). 5. ¿Anticipa que hará más de dos contactos con los supervisores de la Junta del Condado que no tengan lugar (No tenga en cuenta los contactos con el supervisor de la Junta del Condado que represente el distrito en el que usted reside). [Si marcó la opción "NO" como respuesta a las preguntas 4 y 5 anteriores, **DETÉNGASE**; no debe completar el resto del formulario. Sin embargo, si no hizo más de 2 contactos en una fecha posterior, debe comunicarse con la oficina del Secretario del Condado para presentar un formulario que indique dicha actividad. También debe firmar este formulario. Si marcó la opción "SÍ" en cada pregunta en este momento, continúe con la siguiente pregunta]. 6. Si respondió "SÍ" a la pregunta 5, ¿comprende que si la persona u organización a la que usted representa gasta más de \$500 durante el período de informe actual, usted debe presentar una declaración de su situación financiera

REGISTRATION BEFORE COUNTY BOARD Name: Jacob Niesen Municipality: Madison Item #/Petition/CUP # or Subject: 2025 Res 146 □ Wish to Speak in Support
 □ 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 (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?□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.] 9/12/2025 Signature