RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Erica Schaeve	Erica Schaeve	1321 E. Elizabeth St	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Email Phone
2.	Caleb Sperberg	Caleb Sperberg	1312 E. Elizabeth St	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Email Phone
3.	Kari Brown	Kari Brown	910 S Prospect S	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Email Phone
4.	MARILYN C WOOD	Marilyn C Wood	920D PROSPECT ST	☐ Town ☐ Village ☒ City SHAWANO	4/16/'11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Michael I Pyne (name of circulator), (certify):

I reside at W6061 Blazing Star Dr. Appleton WI 54915 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 8.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Michael I. Pyne (signature of circulator)

Page No. # 3301

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	Jean Tetting	Jean Tetting	1619 Timberlan	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Emai Phon
2.	Patricia A. Gruetzmacher	Patricia A. Gruetzmacher	1475 E Elizabeth Apt 312 Shawano	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Emai Phon
3.	Donna J. Wagner	Donna J. Wagner	W4746 Christie Cr. Shawano	☐ Town ☐ Village ☒ City ~~Shawano~~ Washington	4/16/'11	Emai Phon
4.	Jeff Jaklich	Jeff Jaklich	W4705 Emily Ln. Shawano	☐ Town ☐ Village ☒ City ~~Shawano~~ Washington	4/16/'11	Ema Phor
5.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
6.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
7.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
8.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
9.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
10.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor

Certification of Circulator

I, Emily Kitchin (name of circulator), (certify):

I reside at 3416 S. 15 ST. Milwaukee, WI. 53215 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date) Emily Kitchin (signature of circulator)

Page No. #3202

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. CHARLES CHUMBLEY	Charles Chumbley	300 Prospect Circle Shawano, WI. 54166	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Email Phone
2. Kathleen Beary	Kathleen Beary	603 E. Center St. Shawano, WI. 54166	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Email Phone
3. Kathy Lamotte	Kathy Lamotte	230½ E. Division St Shawano	☐ Town ☐ Village ☒ City Shawano	4/16/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Elizabeth Laux (name of circulator) (certify):

I reside at 303 S. Walnut St. Appleton 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 16 / 2011 (date)

(signature of circulator)

Page No. #3203

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Jon Pozorski		1515 Vandenbroek Rd	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Emai Phon
2. Jenny Robenolt	Jenny Robenolt	1515 Vandenbroek Rd #82	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Emai Phon
3. Dana Berrens		1515 Vandenbroek Rd #4	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Emai Phon
4. Rebecca Berrens		1515 Vandenbroek Rd #4	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Emai Phon
5. Donald Hutchison		1575 Umberbrook Rd #11	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Emai Phon
6. Sherril Stutzman		1515 Vanden Broek Rd Little Chute WI 54140	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Emai Phon
7. BobbyJo Harter		1126 Garfield ave Little Chute, WI 54140	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Emai Phon
8.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
9.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
10.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon

Certification of Circulator

I, Karen L. Cleary (name of circulator), (certify):

I reside at 301 S. Mc Arthur Street Appleton WI 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 15 / 2011 (date) Karen L. Cleary (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	Janice Hemauer	Janice Hemauer	1515 Vandenbroek Little Chute, WI	☐ Town ☒ Village ☐ City Little Chute	4 /15/'11	Email Phone
2.	Pat Eslinger	Pat Eslinger	1515 Vanden Broek Little Chute	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Email Phone
3.	Barbara Bethke	Barbara Bethke	1515 Vanden Broek Rd #10 Little Chute, Wi.	☐ Town ☒ Village ☐ City Little Chute	4/15 / /'11	Email Phone
4.	Nicole M'Gowan	Nicole M'Gowan	1515 Vandenbroek Rd #14 Little Chute WI	☐ Town ☒ Village ☐ City Little Chute	4/15/'11	Email Phone
5.	BARB BEthke	Barb Bethke	52 Dutch Harbor Little Chute, WI	☐ Town ☒ Village ☐ City Little Chute	4-15 / /'11	Email Phone
6.	DAVID HARLAND	David Harland	53 DUTCH HARBOR EST LITTLE CHUTE 54140	☐ Town ☒ Village ☐ City LITTLE CHUTE	4/15/'11	Email Phone
7.	ALLEN OLP	Allen Olp	42 DUTCH HARBOR ESTATES LITTLE CHUTE 54140	☐ Town ☒ Village ☐ City LITTLE CHUTE	4/15 / /'11	Email Phone
8.	CHRIS Kappell	Chris Kappell	40 Dutch Harbor Little Chute WI	☐ Town ☒ Village ☐ City Little Chute	4-15 / /'11	Email Phone
9.	DONNA WRIGHT	Donna Wright	#39 Dutch Harbor Est. Little Chute 54140	☐ Town ☒ Village ☐ City Little Chute	4/15/11 / /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, PHILICIA ROBLES (name of circulator), (certify):

I reside at 1928 S LAWE ST APPLETON, WI 54915 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 15 / 2011 (date)

Philicia Robles (signature of circulator)

(P)

RECALL PETITION

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1. Robert S. Grewquist	Robert Grewquist	W7172 Path of the Bear Oneida WI 54155	☐ Town ☐ Village ☐ City Oneida	4/16/'11	
2. Jodell Crawford	Jodell Crawford	W7172 Path of the Bear Oneida WI 54155	☒ Town ☐ Village ☐ City Oneida	4/16/'11	
3. Shawn Sewell	Shawn Sewell	W7163 Path of the Bear Oneida, WI 54155	☒ Town ☐ Village ☐ City Oneida	4/16/'11	
4.			☐ Town ☐ Village ☐ City	/ /'11	
5.			☐ Town ☐ Village ☐ City	/ /'11	
6.			☐ Town ☐ Village ☐ City	/ /'11	
7.			☐ Town ☐ Village ☐ City	/ /'11	
8.			☐ Town ☐ Village ☐ City	/ /'11	
9.			☐ Town ☐ Village ☐ City	/ /'11	
10.			☐ Town ☐ Village ☐ City	/ /'11	

Certification of Circulator

I, Kay Heimerl (name of circulator), (certify):

I reside at 3417 N. Windward Lane Appleton WI 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Kay F. Heimerl (signature of circulator)

RECALL PETITION

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1.	Michael Graham	Michael Graham	W350 Cornelius Cir. Oneida, WI 54155	☒ Town ☐ Village ☐ City Oneida	4/16/'11
2.	Lynn Peltier	Lynn Peltier	W342 Cornelius Cir Oneida WI 54155	☒ Town ☐ Village ☐ City oneida	4/16/'11
3.	John Peltier	John Peltier	W342 Cornelius Cir Oneida WI 54155	☒ Town ☐ Village ☐ City Oneida	4/16/'11
4.	Teresa Cornelius	Teresa Cornelius	N7010 Cornelius Cir. Oneida WI 54155	☒ Town ☐ Village ☐ City Oneida	4/16/'11
5.	April Doxtator	April Doxtator	N6972 Cornelius Circle Oneida WI 54155	☒ Town ☐ Village ☐ City Oneida	4-16
6.	Eleanora Stevens	Eleanora Stevens	N6958 Cornelius Cir. Oneida WI 54155	☒ Town ☐ Village ☐ City Oneida	4/16/'11
7.	Barbara Silva	Barbara Silva	N6968 Cornelius Cir. Oneida WI 54155	☒ Town ☐ Village ☐ City Oneida	4-16-'11
8.	Savannah Chambers	Savannah Chambers	W312 Cornelius Cir Oneida WI 54155	☒ Town ☐ Village ☐ City oneida	4-16-'11
9.	Nicole Matchopatow	N. Matchopatow	2420 Bellwood Ln. Green Bay, WI 54304	☐ Town ☐ Village ☒ City Green Bay	4-16-'11
10.	RALPH Tucker	Ralph Tucker	W336 Cornelius Cir. Oneida, WI 54155	☒ Town ☐ Village ☐ City ONEIDA	4-16-'11

Certification of Circulator

I, PHILICIA ROBLES (name of circulator), (certify):

I reside at 1928 S LAWE ST APPLETON WI 54915 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4/16/2011 (date) _____ (signature of circulator)

Page No. #3207

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	Michael T Brickham	Michael T Brickham	2774 1A Viking Dr. Green Bay, Wis. 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4 /16/ '11	Ema Pho
2.	DAVID SAPP	David Sapp	2778 VIKING DR APT 1 GREEN BAY WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4 /16/ '11	Ema Pho
3.	Rogene GRAY	Rogene Gray	2760 Viking Dr Apt 3 Green Bay, Wisc, 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4 /16/ '11	Ema Pho
4.				☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
5.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
6.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
7.				☐ Town ☐ Village ☐ City	/ / '11	Em Ph
8.				☐ Town ☐ Village ☐ City	/ / '11	En Ph
9.				☐ Town ☐ Village ☐ City	/ / '11	Er Pl
10.				☐ Town ☐ Village ☐ City	/ / '11	E Pl

Certification of Circulator

I, Debbie Ward (name of circulator), (certify):

I reside at 2812 Viking Dr Apt 2a Green Bay Wi 54304 Village of Ashwaubenon (circulator's residence - including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

_____ / 4-16-11 / 2011 Debbie Ward
(date) (signature of circulator)

Page No. #308

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	Jenna Lazzeroni		2786 Viking Dr Apt 1A	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Email Phone
2.	Amyjo Kranz		2788 Viking Dr. Apt 3B	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Email Phone
3.	Mark Thomas		2788 Viking Dr. Apt 3B	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Email Phone
4.	Jim Pagoc		2744 Viking Dr Apt 3D	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11 ASP	Email Phone
5.	Chris Seking		2749 Viking DR Ap 1-B	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Email Phone
6.	Eric VanFrachen		2790 Viking DR #2C	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Anthony Polzin (name of circulator), (certify):

I reside at 1900 Morrow St Apt. 219 Green Bay. 54302 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a). Wis. Stats.

4 / 16 / 2011 (date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	Clint Krentz		2748 Viking Dr. Green Bay, WI 54304	☐ Town ☐ Village ☒ City Ashwaubenon	04/16/'11
2.	Tim Reader		2477 Ballweg Ln DePere WI 54115	☐ Town ☐ Village ☒ City DePere	04/16/'11
3.	Anthony Rivera		2748 Viking Dr Apt 3D Green Bay, WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11
4.	Kyle Kobrow		2748 Viking Dr. Apt 3D Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11
5.	Jose E. Garcia		2748 Viking Dr. Apt D Green Bay WI. 54304	☐ Town ☐ Village ☒ City Ashwaubenon	4/16/'11
6.	Carole M. Kwolick		2784 Veterans Dr Apt B Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11
7.	Paul Goetsch		2787 Viking Drive Ap 2B Green Bay Wis 54304	☐ Town ☒ Village ☒ City Ashwaubenon	4/16/'11
8.	Sandra Murrell		2787 Viking DR Apt 1B Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11
9.	Elizabeth Bartlett		2793 Viking Dr #2C Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11
10.				☐ Town ☐ Village ☐ City	/'11

Certification of Circulator

I, Jonah Lenss (name of circulator), (certify):

I reside at 4570 Bodoot Rd. Green Bay WI 54311 Town of Scott (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

(signature of circulator)

Page No. #3210

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	RALPH POWLESS	Ralph Powless	2772 VIKING Dr. APT 3B Green Bay 54304	☐ Town ☑ Village ☐ City ASHWAUBENON	4/16/'11	Ema Phor
2.	Michael Cocsnean	Michael Cocsnean	2772 Viking Dr Apt 3c Green bay WI 54304	☐ Town ☑ Village ☐ City Ashwaubenon	4/16/'11	Ema Phor
3.	Rudy Pokes	Rudy Pokes	2770 Viking Drive 3A Green Bay, WI 54304	☐ Town ☑ Village ☐ City Ashwaubenon	4/16/'11	Ema Phor
4.	John Miller	John Miller	2768 Viking Dr 2-D GreenBay, WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Ema Phor
5.	Penny Williams	Penny K Williams	2768 Viking Dr 1A Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	/'11 4-16-11	Ema Phor
6.	BERNIE HARRISON	Bernie Harrison	2770 VIKING DR 1B Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11 11	Ema Pho
7.	Priscilla Shegonee	Priscilla Shegonee	2766 Viking DR 2A GREEN Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Ema Pho
8.	Jeremiah Blajeski	Jeremiah Blajeski	2766 Viking Dr 1B Green Bay WI 54304	☐ Town ☑ Village ☐ City Ashwaubenon	4/16/'11	Ema Pho
9.	Kristina Porter	Kristina Porter	2750 Viking Dr 2C Green Bay, WI 54304	☐ Town ☑ Village ☐ City Ashwaubenon	4/16/'11	Em Pho
10.	Jennie Stalker	Jennie Stalker	2750 Viking Dr #7C Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/16/'11	Em Pho

Certification of Circulator

I, Jonah Lenss (name of circulator), (certify):

I reside at 4570 Badger Rd Green Bay WI 54311 Town of Scott (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

(signature of circulator)

Page No. # 3011

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Shannon Halsey	Shannon Halsey	430 Kaukauna St Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	04 / 14 / '11	Ema Phoi
2. CAROLE I. HAMILTON	Carole I. Hamilton	517 DESNOYER ST KAUKAUNA, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 14 / '11	Ema Phoi
3. Tom Reinholz	Tom Reinholz	32 DESNOYER ST KAUKAUNA WI 54130	☐ Town ☐ Village ☒ City KAUKAUNA	4 / 14 / '11	Ema Phoi
4. Raegan Vosters	Raegan Vosters	514 Desnoyer St Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 14 / '11	Ema Phoi
5. BEN BLOY	Ben Bloy	7 ARMSTRONG CT.	☐ Town ☐ Village ☒ City KAUKAUNA	4 / 14 / '11	Ema Phoi
6. Kaae Unhart	Kaae Unhart	7 Armstrong Ct. Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 14 / '11	Ema Phoi
7. JANE ST. JOHN	Jane St. John	230 maria St. Kaukauna, Wis.	☐ Town ☐ Village ☒ City KAUKAUNA	4 / 14 / '11	Ema Phoi
8. Jill Spietz	Jill Spietz	1324 Henry St. Kau. WI	☐ Town ☐ Village ☒ City Kaukauna	4 / 14 / '11	Ema Phoi
9. Paula Rieder	Paula Rieder	1829 Travis Ln Kauk. WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 14 / '11	Ema Phoi
10. Janice Schumacher	Janice Schumacher	1837 Travis Ln Kau WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 15 / '11	Ema Phoi

Certification of Circulator

I, Bernard Juday (name of circulator), (certify):

I reside at 728 South Maiden Lane Shawano (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4-15-2011 (date)

Bernard Juday (signature of circulator)

Page No. #3012

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Tony Kalies	Tony Kalies	3001 White Birch	☐ Town ☐ Village ☒ City Kaukauna	4/7/'11	Ema Pho
2.	Meghan Warner	Meghan Warner	2015 White Wolf Ln	☐ Town ☐ Village ☒ City Kaukauna	4/8/'11	Ema Pho
3.	Heather Malewski	Heather Malewski	316 Doty St	☐ Town ☐ Village ☒ City Kaukauna	4/12/'11	Ema Pho
4.	James Wilson	James Wilson	311 Doty St	☐ Town ☐ Village ☒ City Kaukauna	4/12/'11	Ema Pho
5.	DAN LEMMERS	Dan Lemmers	304 SARAH	☐ Town ☐ Village ☒ City KAUKAUNA	/'11 4/12	Ema Pho
6.	Scott Schroeder	Scott Schroeder	323 Sarah St	☐ Town ☐ Village ☒ City Kaukauna	4/12/'11	Ema Pho
7.	Donald Bollinger		226 Tallulah Ln	☐ Town ☒ Village ☐ City Kaukauna	4/13/'11	Ema Pho
8.	Tracy Kavanaugh Moes	Tracy Kavanaugh Moes	113 Taylor St.	☐ Town ☐ Village ☒ City Kaukauna	4/13/'11	Ema Pho
9.	Mary Ann	Mary Ann	212 Brothers St	☐ Town ☐ Village ☒ City Kaukauna	4/13/'11	Ema Pho
10.				☐ Town ☐ Village ☐ City	/'11	Ema Pho

Certification of Circulator

I, Bernard Juday (name of circulator), (certify):

I reside at 728 South Maiden Lane Shawano (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4-13 (date) / 2011

Bernard Juday (signature of circulator)

Page No. #3213

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Patricia Mueller	Patricia Mueller	231 E. Holmett Seymour, Wis. 54165	☐ Town ☐ Village ☒ City Seymour	4 / 10 / '11	Em Pho
2. Verna Walsh	Verna M Walsh	527 Fulton St Seymour, WI 54165	☐ Town ☐ Village ☒ City Seymour	4 / 10 / '11	Em Pho
3.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
4.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
5.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
6.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
7.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
8.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
9.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
10.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho

Certification of Circulator

I, Cheryl E. Christensen (name of circulator), (certify):

I reside at 988 Derby Lane, Neenah WI 54956. (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 10 / 2011 (date) Cheryl E Christensen (signature of circulator)

Page No. # 3214

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Richard Elmergreen	Richard Elmergreen	531 E. Hickory St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Pho
2.	Adam Elmergreen		531 E. Hickory St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Pho
3.	Connie Elmergreen	Connie Elmergreen	531 E Hickory Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Pho
4.	Carol Jossk	Carol Jossk	326 E High St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Pho
5.	Jenny Spencer	Jenny Spencer	307 E High St Seymour WI 54	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Pho
6.	Kate Kerwell		529 Ivory Seymour WI	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Pho
7.	Michael J Lamb	Michael J Lamb	636 Ivory Seymour WI	☐ Town ☐ Village ☒ City seymour	4/10/'11	Em Pho
8.	Amy Mueller	Amy Mueller	709 Ivory St Seymour WI	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Pho
9.	Heather Steffen	Heather Steffen	833 Ivory St. Seymour WI	☐ Town ☐ Village ☒ City seymour	4/10/'11	Em Pho
10.	Renee Zahn	Renee Zahn	746 Ivory St Seymour, WI	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Em Ph

Certification of Circulator

I, Cheryl E. Christensen (name of circulator), (certify):

I reside at 988 Derby Lane Neenah WI 54956 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 10 / 2011 (date)

Cheryl E Christensen (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Jane Matzke	Jane Matzke	114 Ontario St De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/16/'11	Em Phc
2.	Jackie Gafford	Jackie Gafford	132 S. Ontario St De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/16/'11	Em Phc
3.	Julie Pankratz	Julie Pankratz	124 S Huron St De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/16/'11	Em Phc
4.				☐ Town ☐ Village ☐ City	/ /'11	Em Phc
5.				☐ Town ☐ Village ☐ City	/ /'11	Em Phc
6.				☐ Town ☐ Village ☐ City	/ /'11	Em Phc
7.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
8.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
9.				☐ Town ☐ Village ☐ City	/ /'11	Em Phc
10.				☐ Town ☐ Village ☐ City	/ /'11	Em Phc

Certification of Circulator

I, Pamela Moran (name of circulator), (certify):

I reside at 2358 S Sycamore Rd Fitchburg WI 53711 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Pamela Mora (signature of circulator)

3216

Page No. # 1

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	Rita Van Straten	Rita Van Straten	441 N. Winnebago St De Pere Wis. 54115	☐ Town ☐ Village ☒ City De Pere, Wis	/ / '11 4-16-11
2.	Randean Kussow	Randean Kussow	121 N. Winnebago De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/16/'11
3.	Treasia Hendricks	Treasia Hendricks	1/2 S. Winnebago St Depere, WI 54115	☐ Town ☒ Village ☐ City Depere	4/16/'11
4.	Ashley Brueker	ash R	426 N. Washington Depere	☐ Town ☐ Village ☒ City Depere	4/16/'11
5.	Sharon Hehn	Sharon Hehn	426 N. Washington DePere	☐ Town ☐ Village ☒ City DePere	/ / '11 4-16-11
6.	[illegible]	[illegible]	115 N. Washington	☐ Town ☐ Village ☒ City DEPERE	4/16/'11
7.				☐ Town ☐ Village ☐ City	/ / '11
8.				☐ Town ☐ Village ☐ City	/ / '11
9.				☐ Town ☐ Village ☐ City	/ / '11
10.				☐ Town ☐ Village ☐ City	/ / '11

Certification of Circulator

I, Lois I. Bartels (name of circulator), (certify):

I reside at 4901 Holiday Dr Madison, WI 53711 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Lois I Bartels (signature of circulator)

Page No. #3217

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Brian F. Ratzburg	Brian F. Ratzburg	68 Dutch Harbor Estates	☐ Town ☑ Village Little Chute ☐ City	4/15/'11	Er Pl
2.	Jonathan Bougie		56 Dutch harbor Estates	☐ Town ☑ Village Little Chute ☐ City	4/15/'11	Er Pl
3.	Rick Bougie			☐ Town ☐ Village ☐ City	/ /'11	Er Pl
4.	Rick Bougie		38 Dutch Harbor	☐ Town ☑ Village Little Chute ☐ City	4/15/'11	Er Pl
5.	Dan Van Grinsven		47 Dutch Harbor Little Chute WI	☐ Town ☑ Village ☐ City Little Chute	4/15/'11	Er Pl
6.				☐ Town ☐ Village ☐ City	/ /'11	Er Pl
7.				☐ Town ☐ Village ☐ City	/ /'11	Er Pl
8.				☐ Town ☐ Village ☐ City	/ /'11	Er Pl
9.				☐ Town ☐ Village ☐ City	/ /'11	Er Pl
10.				☐ Town ☐ Village ☐ City	/ /'11	Er Pl

Certification of Circulator

I, Karen L. Cleary (name of circulator), (certify):

I reside at Karen L. Cleary 301 E. McArthur Street, Appleton, WI 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 8.12.13(3)(a), Wis. Stats.

4 / 15 / 2011 (date)

Karen L. Cleary (signature of circulator)

Page No. #3218

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Nancie Rozumalski	Nancie Rozumalski	1722 Sunnyside Lane DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	04/16/'11	Em Pho
2.	Amy Zwicky	Amy Zwicky	1705 Chicago St DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/16/'11	Em Pho
3.	Kathy Vandelwalle	Kathy Vandelwalle	1785 Corvallis Ct DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/16/'11	Em Pho
4.	Kristy Krueger	Kristy Krueger	1772 Camarillo Ct DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/16/'11	Em Pho
5.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
6.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
7.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
8.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
9.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
10.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho

Certification of Circulator

I, Julie A. Chase (name of circulator), (certify):

I reside at 422 N Baldwin St Madison, WI 53703 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 16 / 2011 (date)

Julie A. Chase (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	Kenneth Rothe	Kenneth Rothe	701 Cranberry	☐ Town ☐ Village ☐ City DePere	4/16/'11
2.	Rose Lotte	Rose Lotte	701 Cranberry	☐ Town ☐ Village ☐ City	/'11
3.				☐ Town ☐ Village ☐ City	/ /'11
4.				☐ Town ☐ Village ☐ City	/ /'11
5.				☐ Town ☐ Village ☐ City	/ /'11
6.				☐ Town ☐ Village ☐ City	/ /'11
7.				☐ Town ☐ Village ☐ City	/ /'11
8.				☐ Town ☐ Village ☐ City	/ /'11
9.				☐ Town ☐ Village ☐ City	/ /'11
10.				☐ Town ☐ Village ☐ City	/ /'11

Certification of Circulator

I, Lynn Wallace (name of circulator), (certify):

I reside at 5326 Coney Weston Place, Madison, WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4/16/2011 (date) Lynn Wallace (signature of circulator)

Page No. #3220

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	E P
1. Judy Ryan	Judy Ryan	841 N Clay St	☐ Town ☐ Village ☒ City Depere	/ / '11 4/16-11	
2.			☐ Town ☐ Village ☐ City	/ / '11	
3.			☐ Town ☐ Village ☐ City	/ / '11	
4.			☐ Town ☐ Village ☐ City	/ / '11	
5.			☐ Town ☐ Village ☐ City	/ / '11	
6.			☐ Town ☐ Village ☐ City	/ / '11	
7.			☐ Town ☐ Village ☐ City	/ / '11	
8.			☐ Town ☐ Village ☐ City	/ / '11	
9.			☐ Town ☐ Village ☐ City	/ / '11	
10.			☐ Town ☐ Village ☐ City	/ / '11	

Certification of Circulator

I, Gregory Gelembiuk (name of circulator), (certify):

I reside at 1207 Jenifer St Madison WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 16 / 2011 (date)

Gregory Gelembiuk (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Paul Kurowski	[signature]	512 [redacted] St	☐ Town ☐ Village ☒ City [illegible]	4/16 / '11	Er Ph
2.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
3.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
4.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
5.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
6.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
7.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
8.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
9.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph
10.			☐ Town ☐ Village ☐ City	/ / '11	Er Ph

Certification of Circulator

I, Hugh A. Powell (name of circulator), (certify):

I reside at 413 N. Midvale Blvd., Madison, WI 53705 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Hugh A. Powell (signature of circulator)

Page No. #3222

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Mary Jo Jansson	Mary Jo Jansson	213 Creekview Ln	☐ Town ☐ Village ☒ City De Pere	4/16/'11
2. Cindy M Koerner	Cindy M Koerner	1741 Sunnyside Ln	☐ Town ☐ Village ☒ City De Pere	4/16/'11
3. Ruth Bartuska Ruth Bartuska	Ruth Bartuska	1675 Colony Dr.	☐ Town ☐ Village ☒ City De Pere	4-16-'11
4. Kevin Donlon		1632 Colony Dr.	☐ Town ☐ Village ☒ City De Pere	4/16/'11
5.			☐ Town ☐ Village ☐ City	/'11
6.			☐ Town ☐ Village ☐ City	/'11
7.			☐ Town ☐ Village ☐ City	/'11
8.			☐ Town ☐ Village ☐ City	/'11
9.			☐ Town ☐ Village ☐ City	/'11
10.			☐ Town ☐ Village ☐ City	/'11

Certification of Circulator

I, Scott Clippinger (name of circulator), (certify):

I reside at 194 County Road BB, Township of Deerfield (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Scott D Clippinger (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES. WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Tina Neidl	Tina Neidl	837 Smits St DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/16/'11	Email Phone
2.	Robert Neidl	Robert Neidl	837 Smits St 54115	☐ Town ☐ Village ☒ City DePere	4/16/'11	Email Phone
3.	Derek Musa	Derek Musa	842 Smits Street De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/16/'11	Email Phone
4.	Janet Cortez		842 Smits Street De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/16/'11	Email Phone
5.	PATRICIA MOORE	Patricia Moore	1602 Ridgeway Dr De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/16/'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Michael Childers (name of circulator), (certify):

I reside at 509 N. Lake St Apt 506, Madison WI 53703 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a). Wis. Stats.

4 / 16 / 2011 (date)

Michael Childers (signature of circulator)

Page No. #3224

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Tim Martin	Tim Martin	206 N Erie St.	☐ Town ☐ Village ☒ City DePere	4 / 16 / '11	Email Phone
2. Marina Derfus	Marina Derfus	1024 S Erie St #7 De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4 / 16 / '11	Email Phone
3. Rene' Stenger	Rene Stenger	1218 Georgia St De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4 / 16 / '11	Email Phone
4. Lisa Sretter	Lisa Sretter	1216 Franklin St. De Pere WI 54115	☐ Town ☐ Village ☒ City Depere	4 / 16 / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Sherri Swartz (name of circulator), (certify):

I reside at 2402 Prairie Rd Madison, WI 53711 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Sherri Swartz (signature of circulator)

Page No. #3225

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Patricia Strebel	Patricia Strebel	1131 Red Wing Trl. De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	03/26/'11	Email Phone
2.	DALE STREBEL	Dale Strebel	1131 Redwing Trl DePere WI 54115	☐ Town ☐ Village ☒ City DEPERE	3/26/'11	Email Phone
3.	Joe Zehren	Joe Zehren	1132 Tamarack Trail DePere WI 54115	☐ Town ☐ Village ☒ City De Pere	3/26/'11	Email Phone
4.	PATRICIA NUTHALS	Patricia Nuthals	1514 TURTLE DOVE TRL DE PERE WI 54115	☐ Town ☐ Village ☒ City DE PERE	4/2/'11	Email Phone
5.	Lauren Lubinski	Lauren Lubinski	12100 Schewring Rd. #8 De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4 5 /'11	Email Phone
6.	Seri E Briggs	Seri E Briggs	1917 N Cross Creek Cir De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/5/'11	Email Phone
7.	David W. Kulhanek	David W. Kulhanek	1786 Lost Dauphin Rd DePere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/5/'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Sandra A. Price (name of circulator), (certify):

I reside at 2313 Talladega Ct. DePere, WI 54115 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Sandra A. Price (signature of circulator)

Page No. #3226

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Julie Martin	Julie Martin	1149 Red Wing Trl. DePere, WI. 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
2. Christy Aniol	Christy A Aniol	1137 Red Wing Trl DePere WI 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
3. Jim Aniol	Jim Aniol	1137 Red Wing Trail DePere WI 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
4. Laurie Schilawski	Laurie Schilawski	1114 Tanager Trail DePere WI 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
5. B. Wilmet	Bonita L Wilmet	1108 Tanager Trail DEPERE WI	☐ Town ☐ Village ☒ City DePere	3/19/11	Email Phone
6. Richard D Marcott	Richard D Marcott	1109 Tanager Trail DePere WI 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
7. Karen Marcott	Karen B Marcott	1109 Tanager Trail DePere WI 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
8. Marie Petraszko	Marie Petraszko	1143 Tanager TR DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
9. Sarah Landwehr		1508 Turtle Dove Tr DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	3/19/'11	Email Phone
10. Nancy M. Lubar	Nancy M. Lubar	1776 Biscayne Ct. DePere, WI. 54115	☐ Town ☐ Village ☒ City DePere	3/23/'11	Email Phone

Certification of Circulator

I, Sandra A. Price (name of circulator), (certify):

I reside at Sandra A. Price 2313 Talladega ct. DePere, WI 54115
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S. 12.13(3)(a), Wis. Stats.

4/16/2011 (date)

Sandra A. Price (signature of circulator)

Page No. #3227

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. STAN TADYCH		1045 Travis Lane	☐ Town ☐ Village ☑ City Kaukauna	4/15/'11	Email Phone
2. LISA JOHNSON		1825 Travis Ln	☐ Town ☐ Village ☑ City Kaukauna	4/15/'11	Email Phone
3. Ann Williams		801 Kristin Ct	☐ Town ☐ Village ☑ City Kaukauna	4/15/'11	Email Phone
4. Joe Tinkham		805 W Henry St.	☐ Town ☐ Village ☑ City Kaukauna	4/15/'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Bernard Jurday (name of circulator), (certify):

I reside at 728 South Maiden Lane (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4-15 / 2011 (date)

Bernard Jurday (signature of circulator)

Page No. # 3208

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Victor M Perabo	Victor M Perabo	817 S Washington St	☐ Town ☐ Village ☒ City Shawano	4/19/11	Ema Phor
2. Angela K Gast	Angela K Gast	1103 S. Franklin St	☐ Town ☐ Village ☒ City Shawano	4/10/11	Ema Phor
3. Robin R Hintz	Robin R Hintz	1125 Franklin St	☐ Town ☐ Village ☒ City Shawano	4/10/11	Ema Phor
4. Jeni Wolf	Jeni Wolf	1131 S. Franklin St	☐ Town ☐ Village ☒ City Shawano	4/10/11	Ema Phor
5. Connie Lambert	Connie Lambert	N3703 Shorewood Lane Clintonville	☒ Town ☐ Village ☐ City Pella	4/13/11	Ema Phor
6. Corey Webster		1211 S. Franklin St Shawano, WI	☐ Town ☐ Village ☒ City Shawano	4/10/11	Ema Phon
7. Carrie Webster	Carrie Webster	1211 S. Franklin St Shawano, WI 54166	☐ Town ☐ Village ☒ City Shawano	4/10/11	Ema Phon
8. Steve Steinbach	Steve Steinbach	1229 S Franklin Shawano Wi 54	☐ Town ☐ Village ☒ City Shawano	4/10/11	Emai Phon
9. Linda Steinbach	Linda Steinbach	1229 S. Franklin St Shawano, Wis 54166	☐ Town ☐ Village ☒ City Shawano	4/10/11	Emai Phon
10. Delores Denny	Delores Denny	1130 S Franklin St Shawano Wis	☐ Town ☐ Village ☒ City Shawano	4-10-11	Emai Phon

Certification of Circulator

I, ~~Peter~~ Bernard Juday (name of circulator), (certify):

I reside at 728 South Maiden Lane Shawano WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4-10 / 2011 (date)

Bernard Juday (signature of circulator)

Page No. #3229

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Carolyn Minten	Carolyn Minten	137 S. Webster DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4 / 16 '11	Email Phone
2.	Valerie E. Hill	Valerie E. Hill	1415 charles st DePere Wi 54115	☐ Town ☐ Village ☒ City DePere	4 / 16 '11	Email Phone
3.	James Kress	James Kress	435 Green Bay E. Pulaski WI	☐ Town ☐ Village ☐ City	4 / 16 '11	Email Phone
4.				☐ Town ☐ Village ☐ City	/ '11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ '11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ '11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ '11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ '11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ '11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ '11	Email Phone

Certification of Circulator

I, Karen Jaeger (name of circulator), (certify):

I reside at 69 Cherokee Ct # 201 Madison, WI 53704 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Karen Jaeger (signature of circulator)

3230 Page No. # 4

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Gregg Mattson	Gregg Mattson	428 Lincoln ST	☐ Town ☐ Village ☒ City Seymour	4 /10/'11	Email Phone
2. Jessie Mathera	Jessie Mathera	333 Lincoln St.	☐ Town ☐ Village ☒ City Seymour	4 /10/'11	Email Phone
3. Jeana Elmergreen	Jeana Elmergreen	131 W. Factory St	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Email Phone
4. Kevin Seymour	Kevin Seymour	121 W. Factory St	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Email Phone
5. Carmella Blahnik	Carmella Blahnik	310 Sally St	☐ Town ☐ Village ☒ City Seymour	/'11 4-10	Email Phone
6. John Blahnik	John Blahnik	310 Sally St	☐ Town ☐ Village ☒ City Seymour	/'11 4/10	Email Phone
7. Lowell Thomas	Lowell Thomas	225 W Factory St	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Email Phone
8. Roger Braun	Roger Braun	315 W Factory CT	☐ Town ☐ Village ☒ City Seymour	4/10/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Linda Terrones (name of circulator), (certify):

I reside at 510 Oak Forest LN Seymour WI (circulator's residence – including number, street and municipality) city

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

04 / 16 / 2011 (date)

Linda Terrones (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Todd Marquardt	Todd Marquardt	1030 Northwood Dr Seymour, WI 54165	☐ Town ☐ Village ☒ City Seymour	3/13/'11	Email Phone
2. Sarah A. Serwe	Sarah A. Serwe	W1152 County Rd. ZZ Kaukauna, WI 54130	☒ Town ☐ Village ☐ City Buchanan	3/20/'11	Email Phone
3. Hannah M. Serwe	Hannah M. Serwe	W1152 County Rd. ZZ Kaukauna, WI 54130	☒ Town ☐ Village ☐ City Buchanan	3/27/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Linda Terrones (name of circulator), (certify):

I reside at 510 Oak Forest Lane Seymour WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

04 / 16 / 2011 (date)

Linda Terrones (signature of circulator)

Page No. #3232

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Rick Kinney	Rick Kinney	661 Birch Dr. Hobart WI 54155	☐ Town ☒ Village ☐ City Hobart	4/6 /'11	Email Phone
2. CARY SMITS	Gary Smits	932 Golden Ln. Hobart Wis 54155	☐ Town ☒ Village ☐ City Hobart	4-6 /'11	Email Phone
3. Bonnie VanLaue	Bonnie VanLaue	2280 S. Overland Rd Hobart Wi 54115	☐ Town ☒ Village ☐ City Hobart	4/6/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, GEORGE DILLENBERG (name of circulator), (certify):

I reside at 4484 SEMINOLE TR GREENBAY, WI 54313 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Betsy L. Johnson	Betsy Johnson	2837 Jean Court Green Bay Wi	☐ Town ☒ Village ☐ City Ashwaubenon	4/15/'11	Email N Phone 92
2. DAVID L. JOHNSON	Dave Johnson	2837 JEAN COURT GREEN BAY, WI.	☐ Town ☒ Village ☐ City Ashwaubenon	4/15/'11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Betsy Johnson (name of circulator), (certify):

I reside at 2837 Jean Court Green Bay Wi 54313
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4/16/2011
(date)

Betsy Johnson
(signature of circulator)

Page No. # 2234

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Elizabeth A. Felion	Elizabeth A. Felion	1630 Zita St.	☐ Town ☐ Village ☑ City DePere	4/17/'11	Emai Phon
2. William J. WEIER	William J. Weier	601 Hodgen Ct	☐ Town ☐ Village ☑ City DePere	4/17/'11	Emai Phon
3. LAURIE L OTTO	Laurie L Otto	142 Quenette La	☐ Town ☐ Village ☑ City DePere	4/17/'11	Emai Phon
4. KEVIN P NICHOLS	Kevin P Nichols	1699 QUINNETTE CIR	☐ Town ☐ Village ☑ City DEPERE	~~4/19/'11~~ 4/17/'11 DK	Emai Phon
5.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
6.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
7.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
8.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
9.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
10.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon

Certification of Circulator

I, DAVID J. DEXHEIMER (name of circulator), (certify):

I reside at 5209 MIDMOOR RD. MONONA, WI 53716. (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

APRIL / 17 / 2011 (date) David J. Dexheimer (signature of circulator)

Page No. #3235

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Andrew Griesser	Andrew Griesser	1663 W. Marhill Ashwaubenon	☐ Town ☑ Village ☐ City Ashwaubenon	4/17/'11	Email 6 Phone
2. GERRY DIEDRICK	Gerry Diedrick	1587 W MARHILL ASHWAUBENON	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Email Phone
3. Amy Praedel	Amy Praedel	1500 W Paulson Rd Green Bay WI 54313	☐ Town ☒ Village ☐ City Aswaubenon	4/17/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Diane Pretontaine (name of circulator), (certify):

I reside at 5001 Caledonia Drive, New Franken WI 54229 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Diane Pretontaine (signature of circulator)

Page No. #3236

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	TRACY A. Ward	Tracy A. Ward	1560 Rustic Way	☐ Town ☒ Village ☐ City Ashwaubenon	4 / 17 '11	Em Pho
2.	Darin Ostrowski	Darin Ostrowski	1475 W. Marhill Rd	☐ Town ☒ Village ☐ City Ashwaubenon	4 / 17 / '11	Em Pho
3.	JIM OSTROWSKI	Jim Ostrowski	1475 W. MARHILL	☐ Town ☑ Village ☐ City ASHWAUBENON	4 / 17 / '11	Em Pho
4.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
5.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
6.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
7.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
8.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
9.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho
10.				☐ Town ☐ Village ☐ City	/ / '11	Em Pho

Certification of Circulator

I, Daniel Stevens (name of circulator), (certify):

I reside at 4909 Marvin Ave, Madison WI 53711 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Victoria Baxter		1490 Arrowdale Dr 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Ema Phor
2.	CLYDE TRUDEAU	Clyde Trudeau	1472 CAROLE LANE 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Ema Phor
3.	Jacqueline A. Larson	Jacqueline Larson	2661 B Brookdale Green Bay WI 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Ema Phor
4.	Andrew Stiehl		2688 Brookdale Ave Green Bay	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Ema Phor
5.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
6.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
7.				☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
8.				☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
9.				☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
10.				☐ Town ☐ Village ☐ City	/ /'11	Ema Pho

Certification of Circulator

I, Randy Stoecker (name of circulator), (certify):

I reside at 5214 Pepin Pl. Madison, WI 53705 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. BRIAN LINDOW		2764 NEWCASTLE CT	☐ Town ☒ Village ASHWAUBENON ☐ City	4 / 17 / '11	Email Phone
2.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Alfred Matano ALFRED MATANO, (certify):
(name of circulator)

I reside at 3745 Ross Street Madison, WI 53705-5225
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April 17 / 2011
(date)

Alfred Matano
(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Wendi Hess	Wendi Hess	2867 Castilian Ct Green Bay, WI 54313	☐ Town ☐ Village ☐ City Ashwaubenon	4 / 17 / '11	Emai Phon
2. Janet Johnson	Janet Johnson	2976 Foxford Ct Green Bay WI	☐ Town ☐ Village ☐ City Ashwaubenon	4 / 17 / '11	Emai Phon
3.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
4.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
5.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
6.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
7.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
8.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
9.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
10.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho

Certification of Circulator

I, Gregory Gelembiuk (name of circulator), (certify):

I reside at 1207 Jenifer St Madison WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 17 / 2011 (date)

Gregory Gelembiuk (signature of circulator)

Page No. #3240

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Ryan Manthei		2649 Seneca Court	☐ Town ☐ Village ☒ City Green Bay	4/17/'11	Email / Phone
2. Michelle Manthei		2649 Seneca Court	☐ Town ☐ Village ☒ City Green Bay	4/17/'11	Email / Phone
3. Sam McGhee		2649 Seneca Court	☐ Town ☐ Village ☒ City Green Bay	4/17/'11	Email / Phone
4. ~~Steve~~			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
5. Rebecca Lindner		2665 Sequoia Lane	☐ Town ☐ Village ☒ City Green Bay	4/17/'11	Email / Phone
6. Richard Luxton		2646 Sequoia Lane	☐ Town ☐ Village ☒ City Green Bay	4/17/'11	Email / Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone

Certification of Circulator

I, Sean Vermillion (name of circulator), (certify):

I reside at 888 St. Charles Drive Green Bay, WI. 54311 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Sean Vermillion (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	MK NEWTON - Mathews	M.K. Newton - Mathews	721 N. Broadway De Pere, WI 54115	☐ Town ☑ Village ☒ City De Pere	4 / 17 / '11	Email Phone
2.	John Bourguignon	John Bourguignon	420 Ridgeway Blvd De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4 / 17 / '11	Email Phone
3.	Jennie Bourguignon	Jennie Bourguignon	420 Ridgeway Blvd. DePere, Wi 54115	☐ Town ☐ Village ☒ City De Pere	4 / 17 / '11	Email Phone
4.	Patricia Tobin	Patricia Tobin	419 Fulton St. De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17 / / '11	Email Phone
5.	Forrest Mankowski	Forrest Mankowski	712 N. Wisconsin De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	/ / '11 4/17	Email Phone
6.	Pam Mankowski	Pam Mankowski	712 N. Wisconsin DePere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17 / '11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Henry Handschke (name of circulator), (certify):

I reside at 2022 Reinhard, Green Bay, WI 54303 / Howard (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Dan Johnson	Dan Johnson	725 Bellevue St	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
2. Vernon Hussong	Vernon Hussong	639 N Superior DePere	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
3. Susan Hanis	Susan M Hanis	640 N Huron St DePere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
4. RAY ROSINSKI	Ray Rosinski	DEPERE WI 54115 640 N HURON ST.	☐ Town ☐ Village ☒ City De Pere	4/17/'11 RR	Email Phone
5. Jo Wellens	Jo Wellens	DEPERE WI 54115 320 HURON	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Terrilyn Brunmeier (name of circulator), (certify):

I reside at 2744 Klee St Green Bay 54313 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 17 / 2011 (date) Terrilyn Brunmeier (signature of circulator)

Page No. #3243

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Shelly Sears	Shelly Sears	508 N. Michigan St De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Emai Phon
2. Judy Melotte	Judy Melotte	607 N. Superior St DE PERE, WIS. 54115	☐ Town ☐ Village ☐ City De Pere	4/17/'11	Emai Phon
3. Neil VandenLangenberg	Neil VandenLangenberg	820 Franklin Street DePere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Emai Phon
4. DeLeana VandenLangenberg	DeLeana VandenLangenberg	820 Franklin St. DePere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Ema Phor
5. Keli Scannell	Keli Scannell	1337 Franklin St DePere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Ema Phor
6. SUE HENDRICKS	Sue Hendricks	711 MORRIS ST DEPERE, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Ema Phor
7.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
8.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
9.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
10.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho

Certification of Circulator

I, Terrlyn Brunmeier (name of circulator), (certify):

I reside at ~~Town or City~~ 2741 Klee St Green Bay 54313 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 17 / 2011 (date) Terrlyn Brunmeier (signature of circulator)

Page No. #3244

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Brandon Dixon	Brandon Dixon	depere WI 54115 430 N Michigan st	☐ Town ☐ Village ☒ City Depere	4 / 17 / '11	Email Phone
2. Angela Reis	Angela Reis	430 N Michigan st depere wi 54115	☐ Town ☐ Village ☒ City Depere	4 / 17 / '11	Email Phone
3. Trevor Reis	Trevor Reis	430 N Michigan st depere wi 54115	☐ Town ☐ Village ☒ City Depere	4 / 17 / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Nancy Colford (name of circulator), (certify):

I reside at 1032 S Irwin AV, Green Bay, WI 54301 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a). Wis. Stats.

4 / 17 / 2011 (date) Nancy C. Colford (signature of circulator)

Page No. #3245

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	ELLA D. SAUER	Ella D. Sauer	2931 So Overland Rd Oneida, WI 54155	☐ Town ☐ Village ☐ City Hobart	04/17/'11	Emai Phon
2.	Patricia Beilke	Patricia Beilke	2931 S. Overland Rd Oneida Wis 54155	☐ Town ☐ Village ☐ City Hobart	4/17/'11	Emai Phon
3.	Brad Larson	Brad Lar	106 N. Michigan St #4 De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Emai Phon
4.	Heidi Cavender	Heidi Cavend	120 N Michigan St. De Pere WI 54115	☐ Town ☐ Village ☐ City De Pere	4/17/'11	Emai Phon
5.	NEVIN CAIN		120 N MICHIGAN ST APT 1 DEPERE WI 54115	☐ Town ☐ Village ☐ City De Pere	4/17/'11	Emai Phon
6.	SAM GROCHOWSK		117 N. Superior, WI 54115	☐ Town ☐ Village ☐ City De Pere	4/17/'11	Emai Phon
7.				☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
8.				☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
9.				☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
10.				☐ Town ☐ Village ☐ City	/ /'11	Emai Phon

Certification of Circulator

I, Sarah Scott (name of circulator), (certify):

I reside at 1021 S. Irwin Ave. Green Bay, WI 54301 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Sarah Scott (signature of circulator)

Page No. #3046

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Ledvina Gladys I.	Gladys I Ledvina	2691 Harmony Dr	☐ Town ☒ Village ☐ City Ashwaubenon	4 / 17 / '11	Email Phone
2. Anton Ledvina	Anton Ledvina	2691 Harmony Dr.	☐ Town ☒ Village ☐ City Ashwaubenon	/ / '11 4 17	Email Phone
3. Kari Schuster	Kari Schuster	2680 Harmony Dr.	☐ Town ☒ Village ☐ City Ashwaubenon	4 / 17 / '11	Email Phone
4. Denns Zibel		1360 Orchid Ln	☐ Town ☐ Village ☐ City Ash	4 / 17 / '11	Email Phone
5. ~~Jack Wiesmann~~	Jack		☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Robert J. Umberger (name of circulator), (certify):

I reside at 3314 Portage Road, Madison (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

17 / April / 2011 (date)

Robert J Umberger (signature of circulator)

Page No. #3247

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. SUSAN TIESLING	Susan Tiesling	1626 Lily Dr GREEN BAY, WI	☐ Town ☒ Village ☐ City ASHWAUBENON	4/18/'11	Email Phone
2. GREG TIESLING	G Tiesling	1626 LILY DR GREEN BAY, WI 54313	☐ Town ☒ Village ☐ City ASHWAUBENON	/'11 4/17	Email Phone
3. Shannon McGimsey	S McGimsey	2694 Violet Lane Green Bay WI 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Email S Phone
4. Lisa Bowen	Lisa Bowen	1669 Lily Dr Green Bay WI 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Email Phone
5. Joel Worman	Joel Worman	1635 Lily DR. Green Bay	☐ Town ☒ Village ☐ City Ashwaubenon	/'11 4/18/11	Email Phone
6.			☐ Town ☐ Village ☐ City	/'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Julia Urban (name of circulator), (certify):

I reside at [redacted] 5826 Highland Terrace Middleton (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

04 / 19 / 2011 (date)

[redacted] (signature of circulator)

Page No. #3248

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Theresa M Ecol	Theresa M Ecol	2695 Packerland DR	☐ Town ☑ Village ☐ City Ashwaubenon	4/17/'11	Email Phone
2. KATHRYN DIENES	Kathryn Dienes	2695 Packerland Dr Green Bay, WI 54313	☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
3. Nicole Miller	Nicole Miller	2703 Packerland Green Bay 54313	☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
4. Harland Ness	Harland Ness H.N.	2735 Packerland Green Bay 54313	☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
5.			☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
6.			☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
7.			☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
8.			☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
9.			☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone
10.			☐ Town ☑ Village ☐ City "	4/17/'11	Email Phone

Certification of Circulator

I, Maureen Frawley Maureen Frawley (name of circulator), (certify):

I reside at N2970 Corbe Ln Marinette WI 54143
(circulator's residence -- including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S:12.13(3)(a), Wis. Stats.

4 / 17 / 2011
(date)

Maureen Frawley
(signature of circulator)

Page No. #3249

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Randy Jones		2755 S. Packerland	☐ Town ☑ Village ☐ City Ashwaubenon	4 / 17 / '11	Em Pho
2.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
3.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
4.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
5.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
6.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
7.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
8.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
9.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho
10.			☐ Town ☐ Village ☐ City	/ / '11	Em Pho

Certification of Circulator

I, Julie Urban (name of circulator), (certify):

I reside at 5826 Highland Terrace Middleton (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

04 / 17 / 2011 (date)

(signature of circulator)

Page No. #350

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	Andrew Greve		1629 Paulson Rd	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
2.	Michelle Bloechl		1667 W. Paulson	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
3.	Lori Baker		1667 W Paulson Rd	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
4.	Shannon Klein		1671 W Paulson Rd	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
5.	Houa Vtech		W121 Crook Rd De Pere WI 54115	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
6.	Mai Thao	mai thao 1654 paulson Rd	1654 paulso Rd	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
7.	Sarah Morgan	Sarah Morgan	1646 W. Paulson Rd. Ashwaubenon	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
8.	Thomas Benu		1646 W. Paulson Rd Ashwaubenon, WI 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
9.				☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11
10.				☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11

Certification of Circulator

I, Maureen Frawley (name of circulator), (certify):

I reside at N2970 Cooke Ln Marinette, WI 54143 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Maureen Frawley (signature of circulator)

Page No. #3251

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jennifer Rentmeester		1571 Carole Lane	☐ Town ☐ Village ☒ City Ashwaubenon	4 / 17 / '11
2. Ronald J. Smith	Ronald J Smith	1581 ORCHARD LN ASHWAUBENON	☐ Town ☒ Village ☐ City Ashwaubenon	4 / 17 / '11
3.			☐ Town ☐ Village ☐ City	/ / '11
4.			☐ Town ☐ Village ☐ City	/ / '11
5.			☐ Town ☐ Village ☐ City	/ / '11
6.			☐ Town ☐ Village ☐ City	/ / '11
7.			☐ Town ☐ Village ☐ City	/ / '11
8.			☐ Town ☐ Village ☐ City	/ / '11
9.			☐ Town ☐ Village ☐ City	/ / '11
10.			☐ Town ☐ Village ☐ City	/ / '11

Certification of Circulator

I, PETER J. KENNEDY (name of circulator), (certify):

I reside at 3291 Ogden Rd - Green Bay (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Peter J. Kennedy (signature of circulator)

Page No. #352

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Ben Schauer		1921 Rainbow Ave Depere 54115	☐ Town ☐ Village ☒ City Depere	4/17/'11	Email Phone
2.	Mark Brock		1756 Rainbow Ave De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
3.	Andre Small		1756 rainbow Ave Depere wi 54115	☐ Town ☐ Village ☒ City Depere	4/17/'11	Email Phone
4.	Amy Blevins		225 Jan Lane Depere WI 54115	☐ Town ☐ Village ☒ City Depere	4/17/'11	Email Phone
5.	P Hyllis Dotterer	Phyllis Doleck	1840 Lost Dauphin 54115	☐ Town ☐ Village ☐ City De Pere	4-17-11	Email Phone
6.	Chloe Milakovich	Chloe Milakovich	305 Ballard St. DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
7.	Jason Milakovich		305 Ballard st DepereWI54115 -WI, 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
8.	Kimberly Kulhanek		1786 Lost Dauphin DePere	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
9.	William Kulhanek		1786 Lost Dauphin Rd De Pere, WI, 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
10.	George Schwechler		1780 Lost Dauphin Depere WI, 54115	☐ Town ☐ Village ☒ City Depere	4/17/'11	Email Phone

Certification of Circulator

I, JUDITH A HEIDNER (name of circulator) (certify):

I reside at 2971 DURHAM RD. GREEN BAY, WI 54311 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a). Wis. Stats.

04 / 17 / 2011 (date)

Judith A. Heidner (signature of circulator)

Page No # 3253

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. - Wendy	- Kohz	- 1762 Lost Dauphin - DePere WI 54115	☐ Town ☐ Village ☒ City - DePere	4 / 17 / '11	Email Phone
2.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, _____ (name of circulator), (certify):

I reside at JUDITH A HEIDNER 2491 DUNSMIR RD, GREEN BAY, WI 54311
(circulator's residence, including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date) _____ Judith A. Heidner (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Courtney Younger	Courtney Younger	439 N. St Bernard DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
2.	TABATHA SCHNABEL	Tabatha Schnabel	406 N ST BERNARD DR.	☐ Town ☐ Village ☒ City DEPERE	4/17/'11	Email Phone
3.	JAMES SOCHA	James A. Socha	441 S St Bernard DR	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
4.	Robert Gagnon	Robert Gagnon	429 So. St Bernard Dr	☐ Town ☐ Village ☒ City DEPERE	4/17/'11	Email Phone
5.				☐ Town ☐ Village ☐ City	/'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, RACHEL HARVIEUX (name of circulator), (certify):

I reside at ~~RACHEL HARVIEUX~~ 416 E Wilson St. Apt. 42 Madison, WI 53703 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date) Rachel A Harvieux (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Christopher A Button	Christopher A Button	314 S Erie St DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/13/'11	Email Phone
2.	Amanda S. Panko	Amanda S Panko	321 S Erie St DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
3.	Karen Borman	Karen A Borman	309 S. Ontario DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
4.	Lynn Gaus	Lynn K. Gaus	448 N Good Hope Rd DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
5.	John Gaus	John M. Gaus	448 N Good Hope Rd DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
6.	ALAN CORNELISSEN	Alan Cornelissen	429 N GOOD HOPE Rd DE PERE WI 54115	☐ Town ☐ Village ☒ City DEPERE	4/17/'11	Email Phone
7.	Rebecca Cornelissen	Rebecca Cornelissen	429 N Good Hope Rd DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
8.	JO-ELLEN RANDOLPH	Jo Ellen Randolph	425 N Good Hope Rd DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
9.	RICHARD J. KRINES	Richard J Krines	421 N. GOOD HOPE RD DEPERE WI 54115	☐ Town ☐ Village ☒ City DEPERE	4/17/'11	Email Phone
10.	Bonnie (Rozek) Rozek	Bonnie Rozek	1329 Fox Run Dr. DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone

Certification of Circulator

I, Rachel Harvieux (name of circulator), (certify):

I reside at 416 E Wilson St Apt. 42 Madison, WI 53703 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011
(date)

Rachel a H
(signature of circulator)

Page No. #3056

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	Shaun Martin		271 Nob Hill Ln	☐ Town ☐ Village ☒ City De Pere	4/17/'11
2.	Dennis Kondro		438 N. Fox Croft Dr	☐ Town ☐ Village ☒ City De Pere	4/17/'11
3.	MIKE GOLDEN		420 N FOX CROFT DR DE PERE	☐ Town ☐ Village ☒ City DE PERE	4/17/'11
4.	Debra Bursik		431 S. Good Hope Rd De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11
5.	Paul Bursik		431 S. Good Hope Rd DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11
6.	Pamela Federici		465 S. Good Hope Rd D	☐ Town ☐ Village ☒ City Depere	4/17/'11
7.	Tara Krause		477 S. Good Hope Rd	☐ Town ☐ Village ☒ City DePere	4/17/'11
8.	Heidi Lester		488 S. Good Hope Rd APT 2	☐ Town ☐ Village ☒ City DePere	4/17/'11
9.				☐ Town ☐ Village ☐ City	/'11
10.				☐ Town ☐ Village ☐ City	/'11

Certification of Circulator

I, JAMES GERKEN (name of circulator), (certify):

I reside at 1850 BELD ST. #13, MADISON, WI 53713 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

APRIL / 17 / 2011 (date)

James Gerken (signature of circulator)

Page No. #3757

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Ashley Sommers	Ashley Sommers	201 S Erie St De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
2.	Ashly Lloyd	Ashly Lloyd	220 S Superior St. DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
3.	Thomas Bockenhauer	Thomas Bockenhauer	202 S. Superior St. De Pere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
4.	Nancy Bockenhauer	Nancy Bockenhauer	202 So. Superior DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
5.	Barbara J Peters	Barbara J Peters	116 S Superior DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
6.	ANNE FR			☐ Town ☐ Village ☐ City	/'11	Email Phone
7.	Tracy Doxtator	Tracy Doxtator	1009 Coral St Apt 3 DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
8.	Bill Ayres	Bill Ayres	1015 Coral St, #2 DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
9.	Randy Timm SR	Randy Timm	1015 coral ST 4 DePere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone
10.	James Urban	James Urban	1019 Coral St #16 DePere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Email Phone

Certification of Circulator

I, Emily Quinn (name of circulator), (certify):

I reside at 820 E. Birch Ave, Whitefish Bay (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Emily Quinn (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Genaro R Sanchez		821 Bomier St Depere, WI 54115	☒ Town ☐ Village ☒ City DEPERE	4 / 17 / '11	Email Phone
2.	MARILYN A GERCZAK		817 Virginia Drive Depere	☐ Town ☐ Village ☒ City DEPERE	4/17/'11	Email Phone
3.	NICOLE YANG		726 VIRGINIA DRIVE	☐ Town ☐ Village ☒ City DEPERE	4/17/'11	Email Phone
4.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Gregory Gelembiuk (name of circulator), (certify):

I reside at 1207 Jenifer St Madison WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 17 / 2011 (date) Gregory Gelembiuk (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Elizabeth Julka	Elizabeth Julka	1025 Georgia Dr De Pere WI 54115	☐ Town ☐ Village ☑ City De Pere	4 / 17 / '11	Email Phone
2.	Mark H Julka	Mark Julka	1025 Georgia Dr De Pere WI 54115	☐ Town ☐ Village ☑ City De Pere	4 / 17 / '11	Email Phone
3.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Kathy L. Lefebvre (name of circulator), (certify):

I reside at 1731 East Shore Circle, Green Bay (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S. 12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date) Kathy L. Lefebvre (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1.	Amy Verkuilen	Amy Verkuilen	1008 Rolling Meadows Dr	☐ Town ☐ Village ☐ City Little Chute	4 /14/ '11	Email / Phone
2.	Nicole Otto	Nicole Otto	1021 Rolling Meadows Dr	☐ Town ☐ Village ☐ City Little Chute	4 /14/ '11	Email / Phone
3.	Kenneth Fronsee	Kenneth Fronsee	1818 Valley Lane	☐ Town ☐ Village ☐ City Little Chute	4 /15/ '11	Email / Phone
4.	Tina Hoefler	Tina Hoefler	1808 Valley Ln	☐ Town ☐ Village ☐ City Little Chute	4 /15/ '11	Email / Phone
5.	Brad Hoefler	Brad Hoefler	"	☐ Town ☐ Village ☐ City "	/ /'11 "	Email / Phone
6.	Kim Krackeberg	Kim Krackeberg	1708 Valley Lane	☐ Town ☐ Village ☐ City "	4 /15/ '11	Email / Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email / Phone

Certification of Circulator

I, Karen L. Cleary (name of circulator), (certify):

I reside at 301 E McArthur St. Appleton, WI 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 15 / 2011 (date)

Karen L Cleary (signature of circulator)

Page No. #3261

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	NEIL GEIGER		113 E 5th KAUKAUNA, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/14/'11	Email Phone
2.	Dixie Geiger		113 E. 5th St Kaukauna WI 54130	☐ Town ☐ Village ☐ City "	4/14/'11	Email Phone
3.	Matthew Delaney		105 W 5th St Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/14/'11	Email Phone
4.	Jennifer Cheistesen		462 Reaume Ave Kaukauna WI 54136	☐ Town ☐ Village ☐ City Kaukauna	4/14/'11	Email Phone
5.	Marcel Christensen		907 reaume ave kaukauna wi 54130	☐ Town ☐ Village ☒ City Kaukauna	/ /'11 4 14	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, David Robbins (name of circulator), (certify):

I reside at 111 Hidden Ridges Way - Combined Locks WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 14 / 2011 (date)

(signature of circulator)

Page No. # 3162

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1.	Brandi Robbins	Brandi L. Robbins	1000 Sunnydale Ln	☐ Town ☑ Village ☐ City Little Chute	4 / 14 / '11	Ema / Phor
2.	Stacy Hietpas	Stacy Hietpas	1018 Sunnydale Ln.	☐ Town ☑ Village ☐ City Little Chute	4 / 14 / '11	Ema / Phor
3.	Paul Whalley	Paul Whalley	937 Sunnydale Ln	☐ Town ☑ Village ☐ City Little Chute	4 / 14 / '11	Ema / Phor
4.	Dustin Kufahl	D. Kufahl	933 Sunnydale Ln	☐ Town ☐ Village ☐ City Little Chute	4 / 14 / '11	Ema / Phor
5.	BAZI Amboss	Bazi Amboss	900 Rolling Meadows	☐ Town ☑ Village ☐ City Little chute	/ / '11 4/14/11	Ema / Phor
6.	Bonnie Fink	Bonnie Fink	924 Rolling Meadows dr	☐ Town ☑ Village ☐ City Little Chute	4 / 14 / '11	Ema / Phor
7.	Vonnie Corbett	Vonnie Corbett	952 Rolling Meadows	☐ Town ☑ Village ☐ City Little Chute	4/14/'11	Ema / Phor
8.	Yvonne			☐ Town ☐ Village ☐ City	/ / '11	Ema / Phor
9.	Sara Pingel	Sara Pingel	1034 Rolling Meadows Dr. Lt	☐ Town ☑ Village ☐ City Little Chute	4 / 14 / '11	Ema / Phor
10.				☐ Town ☐ Village ☐ City	/ / '11	Ema / Phor

Certification of Circulator

I, Karen L. Cleary (name of circulator), (certify):

I reside at 301 E. McArthur St Appleton WI 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 15 / 2011 (date)

Karen L. Cleary (signature of circulator)

Page No. #3263

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1.	Thomas Heins	Thomas Heins	301 S. Maple St	☐ Town ☒ Village ☐ City Black Creek	4/16/'11	Ema Phor
2.	Barbara Wilson	Barb Wilson	302 E. Forest St	☐ Town ☒ Village ☐ City Black Creek	4/16/'11	Ema Phor
3.	James Stephani	James Stephani	304 South Elm St	☐ Town ☐ Village ☐ City Black Creek	4-16-/'11	Ema Phor
4.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
5.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
6.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
7.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
8.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
9.				☐ Town ☐ Village ☐ City	/ /'11	Em Phc
10.				☐ Town ☐ Village ☐ City	/ /'11	Em Phc

Certification of Circulator

I, Karen L. Cleary (name of circulator), (certify):

I reside at 301 E. McArthur St. Appleton, WI 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Karen L. Cleary (signature of circulator)

Page No. #3264

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Sherry Ozment	S. Ozment	106 E. Burdick St. Black Creek, WI 54106	☐ Town ☑ Village ☐ City Black Creek	4/16/'11	Ema Phor
2. Todd R St. John	Todd R St. John	106 S. Main St. Black Creek, WI 54106	☐ Town ☑ Village ☐ City Black Creek	4/16/'11	Ema Phor
3. Lisa St. John	Lisa St. John	106 S. Main St. Black Creek, WI	☐ Town ☑ Village ☐ City Black Creek	4/16/'11	Ema Phor
4. Erica Laabs	E Laabs	304 S Main St. Black Creek WI 54106	☐ Town ☑ Village ☐ City Black Creek	4/16/'11	Ema Phor
5. Chris Laabs	Chris Laabs	304 S. Main St. Black Creek WI 54106	☐ Town ☑ Village ☐ City Black Creek	4/16/'11	Ema Phor
6. Brooke Tank	Brooke Tank	301 S Main St Black Creek WI 54106	☐ Town ☑ Village ☐ City Black Creek	4/16/'11	Ema Phor
7. Gene Mueller	Gene F Mueller	203 S. Main St. Black Creek WI 54106	☐ Town ☑ Village ☐ City Black Creek	4/16/'11	Ema Phor
8.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon
9.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon
10.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon

Certification of Circulator

I, PATRICIA BROOKS (name of circulator), (certify):

I reside at 1910 N SUPERIOR STREET, APPLETON WI 54911 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 16 / 2011 (date)

Patricia K Brooks (signature of circulator)

Page No. #3265

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Michael Hauge	Michael Hauge	619 Woodside Dr.	☐ Town ☐ Village ☒ City Seymour	04 / 17 / '11	Emai Phon
2.	Christina Hauge	Christina Hauge	619 Woodside Dr.	☐ Town ☐ Village ☒ City Seymour	04 / 17 / '11	Emai Phon
3.	Jessica Schmoll	Jessica Schmoll	850 Woodside Dr	☐ Town ☐ Village ☒ City Seymour	4 / 17 / '11	Emai Phon
4.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
5.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
6.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
7.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
8.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
9.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
10.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor

Certification of Circulator

I, AN SHING MING (name of circulator), (certify):

I reside at 3379 HAWKEYE CT, SUAMICO (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011
(date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	Michael McCurdy	Michael McCurdy	505 Roger Ct.	☐ Town ☐ Village ☒ City Kaukauna	04/17/'11	Email Phone
2.	Kristy young	Kristy young	565 wildwood Dr.	☐ Town ☐ Village ☐ City Kaukauna	04/17/'11	Email Phone
3.	Greg Vande Hey	Greg Vande Hey	311 S. Railroad St.	☐ Town ☐ Village ☒ City Kimberly	4/17/'11	Email Phone
4.	Patti Vande Bosch	Patti VandeBosch	525 Wildwood St.	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Anita J Kress (name of circulator), (certify):

I reside at 1409 Rutledge St. Madison WI 53703 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 17 / 2011 (date)

Anita J Kress (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1.	Daniel Tracy		1025 Forest Edge Dr Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Ema Phoi
2.	Samantha Tracy	Samantha Tracy	1025 Forest Edge Dr Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Ema Phoi
3.	Abigail wright	abigailwright	11856 coenen Rd kaukauna, WI	☒ Town ☐ Village ☐ City Vandenbroek	4/17/'11	Ema ok Phoi
4.	LeAnn Langenhuizen	LeAnn Langenhuizen	1805 Glenview Ave Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Ema Phoi
5.	Mark Langenhuizen	Mark Langenhuizen	1805 Glenview Ave Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Ema Phoi
6.	Kim Vosters	Kim Vosters	1961 Glenview Ave Kaukauna, WI 54130	☐ Town ☐ Village ☐ City Kaukauna	4/17/'11	Ema Phoi
7.				☐ Town ☐ Village ☐ City	/'11	Ema Phoi
8.				☐ Town ☐ Village ☐ City	/'11	Ema Phoi
9.				☐ Town ☐ Village ☐ City	/'11	Ema Phoi
10.				☐ Town ☐ Village ☐ City	/'11	Ema Phoi

Certification of Circulator

I, Anita J Krohn (name of circulator), (certify):

I reside at 1709 Ruedebush St. Madison, WI 53703 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 17 / 2011 (date) Anita J Krohn (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	PAUL WOLF	Paul Wolf	1438 MAYFAIR ST Depere WI 54115	☐ Town ☐ Village ☒ City Depere	4 / 11 / '11	Email Phone
2.	DAVID BERNDT	Daryl A. Berndt	1679 REMINGTON RIDGE DEPERE, WI. 54115	☐ Town ☐ Village ☐ City Ledgeview	4/11/'11	Email Phone
3.	BETTY A BERNDT	Betty A Berndt	1679 REMINGTON RIDGE DEPERE, WI. 54115	☐ Town ☐ Village ☐ City Ledgeview	4/11/'11	Email Phone
4.	Gary Johnson	Gary Johnson	1336 Swan Ridge Jr. DePere Wis	☐ Town ☐ Village ☐ City Ledgeview	4 / 11 / '11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Kathy L. Lefebvre (name of circulator), (certify):

I reside at 1731 East Shore Circle, Green Bay (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 11 / 2011 (date) Kathy L. Lefebvre (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Kyle Kyzmacik		1136 Shadow Ln. Green Bay WI 5431-	☐ Town ☐ Village ☒ City Green Bay	4/17/'11	Email Phone
2. Gerald DeBeck	Gerald DeBeck	1565 Birchwood Dr. Green Bay, WI 54304	☐ Town ☐ Village ☒ City Green Bay	4 17 /'11	Email Phone
3. Tony Keller		2330 CANTER GB, WI 54304 N.	☐ Town ☐ Village ☒ City Green Bay Ashwaubenon	4/17/'11	Email Phone
4. DAVID L. GEYER	David L. Geyer	864 LANGLADE AV. G.B, WI 54304	☐ Town ☐ Village ☒ City GREEN BAY	4/17/11 /'11	Email Phone
5. Wanda L Geyer	Wanda L Geyer	864 Langlade Av Green Bay, WI 54304	☐ Town ☐ Village ☒ City Green Bay	4/17/20V /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Dennis Naidl (name of circulator), (certify):

I reside at 1441 Glen Road Green Bay WI 54313 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Dennis J Naidl (signature of circulator)

Page No. #3271

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Chelsea Chevrourre	Chelsea Chevrourre	3065 Crusade Lane Green Bay, WI 54313	☐ Town ☐ Village ☒ City Green Bay	4/17/'11	Email Phone
2.	Nicole Bray	Nicole Bray	646 Grant St DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
3.	Joe Brey	Joe Brey	646 Grant St DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email Phone
4.	Eric Pederson	Eric Pederson	1900 Siesta Ln Suamico, Wi 54341	☐ Town ☒ Village ☐ City Suamico	4/17/'11	Email Phone
5.	Debbie Brey	Debbie Brey	1252 Cornflower Ct DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/17/11	Email Phone
6.				☐ Town ☐ Village ☐ City	/'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Greg Tilkens (name of circulator), (certify):

I reside at 1206 Richardine Ct Green Bay WI 54304 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

(signature of circulator)

Page No. # 2272

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Tammy L. Smits	Tammy L Smits	139 Mueh1 St. Seymour Wi. 54165	☐ Town ☐ Village ☒ City Seymour	4/15/'11	Email Phone
2. Mary Clark	Mary Clark	116 E High St Seymour Wi 54165	☐ Town ☐ Village ☒ City Seymour	4/15/'11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Rodney Muenster (name of circulator), (certify):

I reside at 3528 Hillsboro Rough Appleton, WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 16 / 2011 (date)

(signature of circulator)

Page No. #373

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Keith Swett	Keith Swett	733 Woodside Dr. Seymour, WI 54165	☐ Town ☐ Village ☒ City	3/24/'11	Email Phone
2.	Jean Swett	Jean Swett	733 Woodside Dr Seymour, WI. 54165	☐ Town ☐ Village ☒ City	3/24/'11	Email Phone
3.	Laura Swett	Laura Swett	733 Woodside Dr. Seymour WI 54165	☐ Town ☐ Village ☒ City	3/24/11	Email Phone
4.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Christina Potter (name of circulator), (certify):

I reside at 824 Woodside Dr., Seymour (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

~~3~~ March / 24 / 2011 (date)

Christina M Potter (signature of circulator)

Page No. #3274

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Earl Krause	Earl Krause	W503 ST. Hwy 54 Oneida wis 54155	☒ Town ☐ Village ☐ City Oneida	3/2/'11	Email OL Phone
2. Joyce Krause	Joyce Krause	W503 St Hwy 54 Oneida, wi. 54155	☒ Town ☐ Village ☐ City Oneida	3/21/'11	Email Phone
3. Tom Wolsfeld	Tom Wolsfeld	757 Remington Dr Seymour Wi. 54165	☐ Town ☐ Village ☒ City Seymour	3/29/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Christina M. Potter (name of circulator), (certify):

I reside at 824 Woodside Dr., Seymour (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 29 / 2011 (date)

Christina M. Potter (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Josephine A Bowers	Josephine A. Bowers	N4198 OAK LN Freedom, WI 54130	☒ Town ☐ Village ☐ City Freedom	03/11/'11	Email Phone
2. VERNON J. BOWERS	Vernon J Bowers	N4198 OAK LN Freedom, WI 54130	☒ Town ☐ Village ☐ City Freedom	03/11/'11	Email Phone
3. Glenn G Bowers	Glenn Bowers	639 Benedict Dr Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	03/11/'11	Email Phone
4. Judy Bowers Judy Bowers	Judy Bowers	639 Benedict Dr. Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/11/'11	Email Phone
5. Kathy Brockman	Kathy Brockman	N3940 Conrad St Freedom, WI 54130	☒ Town ☐ Village ☐ City Freedom	3-14-11	Email Phone
6. DAVID WATTERS	David S	W3202 Lochbur Ln FREEDOM WI 54913	☒ Town ☐ Village ☐ City FREEDOM	3/14/'11	Email Phone
7. Brenda Watters	Brenda Watters	W3202 Lochbur Ln. Freedom WI 54913	☒ Town ☐ Village ☐ City Freedom	3/15/'11	Email Phone
8. Katherine Watters	Katherine Watters	W3202 Lochbur Ln Freedom WI 54913	☒ Town ☐ Village ☐ City Freedom	3/19/'11	Email Phone
9. Roger Watters	Roger Watters	W3202 LochburLN Freedom, WI 54913	☒ Town ☐ Village ☐ City Freedom	3/19/'11	Email Phone
10. Bob Froehlich	Bob Froehlich	W3191 Lochbur Ln Freedom, Wi 54913	☒ Town ☐ Village ☐ City Freedom	3/21/'11	Email Phone

Certification of Circulator

I, Christina M. Potter (name of circulator), (certify):

I reside at 824 Woodside Dr., Seymour (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 22 / 2011 (date) Christina M. Potter (signature of circulator)

Page No. # 3276

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Stacy Wagner	Stacy Wagner	450 Ivory St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/16/'11	Email Rob Phone 40
2. Ben Liebergen	B Sieb	509 Ivory St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/16/'11	Email Ben Phone
3. Elaine Fitz	Elaine Fitz	519 Lincoln St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/16/'11	Email Phone
4. Jen Thiel	Jen Thiel	416 Lincoln St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	4/16/'11	Email Phone
5. Roger Daffinson	Roger J Daff	616 Lincoln ST Seymour, WI. 54165	☐ Town ☐ Village ☒ City Seymour	4/16/'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Andrew F Horan (name of circulator), (certify):

I reside at W8603 Pheasant Run Hortonville (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 16 / 2011 (date)

Andrew F Horan (signature of circulator)

Page No. #3077

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Richard Lamers	Richard P. Lamers	1809 Thelen Ave Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	4/17/11	Email Phone
2.	Mary Lamers	Mary E. Lamers	1809 Thelen Ave Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Email Phone
3.	Bob Van Camp	Bob Van Camp	2005 Thelen Ave Kaukauna	☐ Town ☐ Village ☐ City Kaukauna	4/17/'11	Email Phone
4.	Nichol J Reth		2113 Thelen Kaukana	☐ Town ☐ Village ☐ City Kaukana	4/17/'11	Email Phone
5.	Casey Haen	Casey Haen	1909 Thelen Ave Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Judith A. Ghastin (name of circulator), (certify):

I reside at 5810 N. Meade St. Appleton WI 54913 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

04 / 17 / 2011 (date)

(signature of circulator)

Page No. #328

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. DAVID LINDOW	David Lindow	236 PROSPECT PLACE DEPERE, WI 54115	☐ Town ☐ Village ☒ City De Pere WI	03/06/'11	Email Phone
2. DAVID KUDICK	David Kudick	600 Birch St DEPERE WI 54115	☐ Town ☐ Village ☒ City De Pere WI	03/06/'11	Email Phone
3. Michele Hang	Michele L Yang	600 Birch St De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere WI	03/06/'11	Email Phone
4. Jill Gray	Jill Gray	1326 Scheuring Rd #2 DePere WI 54115	☐ Town ☐ Village ☒ City De Pere WI	03/07/'11	Email Phone
5. Dianne Lemke	Dianne Lemke	1313 East Dauphin Rd DePere, WI 54115	☐ Town ☐ Village ☒ City De Pere WI	3/11/'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Hannah Lindow (name of circulator), (certify):

I reside at 722 Swan Rd De Pere WI 54115 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011 (date)

Hannah Lindow (signature of circulator)

Page No. #3279

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Greg Sheier	Greg Sheier	708 Karl St Green Bay WI 54301	☐ Town ■ Village ☐ City Allouez	3/11/'11	Email Phone
2. Perry Sieber	Perry Sieber	305 Brookridge St. Green Bay WI 54301	☐ Town ☒ Village ☐ City Allouez	3/13/'11	Email Phone
3. Stacy Sieber	Stacy Sieber	305 Brookridge St Green Bay, WI 54301	☐ Town ☒ Village ☐ City Allouez	3/13/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Perry Sieber (name of circulator), (certify):

I reside at 305 Brookridge St. Allouez (circulator's residence - including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 14 / 2011 (date)

Perry Sieber (signature of circulator)

Page No. # 3280

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Keith Jenquin	Keith Jenquin	W 1542 Culbertson rd Seymour Wi 54165	☑ Town ☐ Village ☐ City Oneida	3 5 /'11	Email Phone
2. MaryAnn Jenquin	MaryAnn Jenquin	W1542 Culbertson Rd Seymour Wi 54165	☐ Town ☐ Village ☐ City ONEIDA	3 5 /'11	Email Phone
3. Connie Baumgart	Connie Baumgart	W1547 Culbertson Rd. Seymour WI 54165	☑ Town ☐ Village ☐ City Oneida	3/10/'11	Email Phone
4. JIM BAUMGART	Jim Baumgart	W1547 Culbertson Rd Seymour WI 54165	☑ Town ☐ Village ☐ City Oneida	3/10/'11	Email Phone
5. Dorothy Vanden Heuvel	Dorothy Vanden Heuvel	W1763 ~~State Hy 54~~ Seymour, Wis 54165	☐ Town ☐ Village ☐ City Oneida	3/13 /'11	Email Phone –
6. John W [illegible]	[illegible]	W 1396 Culbertson Rd Seymour Wi 54165	☐ Town ☐ Village ☐ City	/'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Perry Sieber (name of circulator), (certify):

I reside at ~~Perry Sieber~~ 305 Brookside St. Allouez (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 19 / 2011 (date)

Perry Sieber (signature of circulator)

Page No. # 3081

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. HELEN LENZ	Helen Lenz	701 JEFFERSON ST. E LITTLE CHUTE, WI 54130	☐ Town ☒ Village ☐ City LITTLE CHUTE	4/3/'11	Email Phone
2. Robert Sager	Robert Sager	1313 Sullivan Avenue Kaukauna, Wisconsin 54130	☐ Town ☐ Village ☒ City Kaukauna	4/3/'11	Email Phone
3. Janet Sager	Janet Sager	1313 Sullivan Ave Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/3/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Janet Sager (name of circulator), (certify):

I reside at 1313 Sullivan Ave Kaukauna, WI 54130 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

April / 4 / 2011 (date)

Janet Sager (signature of circulator)

3282

Page No. #20

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Jo Ann Faith	Jo Ann Faith	310 Alpine Dr. #2 Shawano, Wi. 54166	☐ Town ☐ Village ☒ City Shawano, Wis.	3/26/'11	Em Pho
2. Bill Faith	Bill Faith	310 Alpine Dr #2 Shawano, WI 54166	☐ Town ☐ Village ☒ City Shawano, WI	3/26/'11	Em Pho
3. Tiffany Wilson	Tiffany Wilson	N9103 County Rd O Clintonville WI 54929	☐ Town ☒ Village ☐ City Union WI	3/28/'11	Em Pho
4. Rebecca A. Johnson	Rebecca A. Johnson	W8638 Adams Beach Dr. Clintonville, WI 54929	☒ Town ☐ Village ☐ City Belle Plaine	3/28/'11	Em Pho
5.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
6.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
7.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
8.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
9.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
10.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho

Certification of Circulator

I, Rebecca A. Johnson (name of circulator), (certify):

I reside at W8638 Adams Beach Drive, Belle Plaine, Wi (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

04 / 05 / 2011 (date)

Rebecca A. Johnson (signature of circulator)

3083

Page No. #

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1.	JUNE ADEKUNLE	June Adekunle	N7242 Oakwood Dr. Shawano, WI 54166	☑ Town ☐ Village ☐ City Wescott	4/2/'11	Ema Pho
2.	Joan Marcell	Joan Marcell	15 Mulberry Ct Shawano WI 54166	☐ Town ☐ Village ☑ City Shawano	4/5/'11	Ema Pho
3.	Dean Marcel	D. Marcell	15 Mulberry CT Shawano WI.	☐ Town ☐ Village ☑ City Shawano	4-5-11	Ema Pho
4.	Brenda Mangnardo	B Mangnardo	318 W Richmond St Shawano WI	☐ Town ☐ Village ☑ City Shawano	4/5/'11	Ema Pho
5.	Deb Knickerbocker	Deborah Knickerbocker	418 W Eagle St Shawano WI 54166	☐ Town ☐ Village ☒ City Shawano	4/5/'11	Ema Pho
6.	Kevin Marquette	Kevin Marquette	916 E Randall St Shawano, WI 54166	☐ Town ☐ Village ☑ City Shawano	4/5/'11	Ema Pho
7.	Stephanie Becker	Stephanie Becker	307 Willow Wood Shawano WI	☐ Town ☐ Village ☑ City Shawano	4/5/'11	Ema Pho
8.	MATTHEW Gruch	Matt Gruch	708 S. Lincoln St. Shawano, Wis	☐ Town ☐ Village ☑ City Shawano	4/5/'11	Ema Pho
9.	FATEMA HUSAIN	Fatema Husain	1175 S Main st. Shawano	☐ Town ☐ Village ☑ City Shawano	4/5/'11	Ema Pho
10.	Rochelle Tourtillott	Rochelle Tourtillott	400 Mountain Bay Tr. Dr. #3 Shawano	☐ Town ☐ Village ☒ City Shawano	4/5/'11	Ema Pho

Certification of Circulator

I, Leone Schneidewend (name of circulator), (certify):

I reside at N4947 Range Line Rd, Herman, WI. (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S. 12.13(3)(a), Wis. Stats.

4/5/2011 (date)

Leone Schneidewend (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Joy Mandeik	Joy A Mandeik	117 Crestwood Court	☐ Town ☐ Village ☒ City Shawano	3 / 11 / '11	Email Phone
2. Margaret Escalante	Margaret Escalante	936 S. Main St	☐ Town ☐ Village ☒ City Shawano	3 / 11 / '11	Email Phone
3. Laura Gloede	Laura Gloede	201 E. Freeborn St	☐ Town ☒ Village ☐ City Cecil	3 / 11 / '11	Email Phone 715
4. Lawrence Gloede	Lawrence Gloede	201 E. Freeborn St.	☐ Town ☒ Village ☐ City Cecil	3 / 11 / '11	Email Phone 715
5. Rose Carmelo Skenadore	Rose Carmelo Skenadore	W5850 Cty Rd B	☐ Town ☐ Village ☒ City Shawano	3 / 11 / '11	Email Phone
6. Amy Menchaca	Amy Menchaca	N1220 Kenoka St. Gresham	☐ Town ☐ Village ☐ City Gresham	3 / 13 / '11	Email Phone
7. Katie Moeller	Katie Moeller	409 E Park St.	☐ Town ☒ Village ☐ City Bonduel	3 / 13 / '11	Email Phone
8. Robert Escalante	Robt Escalante	936 S main st Shawano Wi	☐ Town ☐ Village ☒ City Shawano	3 / 13 / '11	Email Phone
9. Jean Zaddack	Jean Zaddack	N7261 Box Elder Ln Shawano	☐ Town ☐ Village ☒ City Shawano	3 / 13 / '11	Email Phone
10. Alfonso Zaddack	Alfonso Zaddack	N7261 Box Elder R.	☐ Town ☐ Village ☒ City Shawano	3 / 13 / '11	Email Phone

Certification of Circulator

I, Joy A. Mandeik (name of circulator), (certify):

I reside at 117 Crestwood Ct. Shawano, WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 5 / 2011 (date)

Joy A Mandeik (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City or Village	DATE OF SIGNING	
1.	Jonathan Svejda	[signature]	333 [illegible] Dr	☐ Town ☑ Village ☐ City Allouez	4/16/'11	Email / Phone
2.	Amanda Luebke	[signature]	1534 Francis Ave, Green	☐ Town ☐ Village ☒ City Green Bay	4/16/'11	Email / Phone
3.	Julie Quigley	[signature]	3216 S. Superior Bay De Pere WI	☐ Town ☐ Village ☒ City De Pere	4/16/'11	Email / Phone
4.	Robert Hackl	Robert Hackl	1161 Hastings St.	☐ Town ☑ Village ☐ City Allouez	4/16/'11	Email / Phone
5.	Hank Zuidmulder	Hank Zuid	1171 Hastings St.	☐ Town ☑ Village ☐ City Allouez	4/16/'11	Email / Phone
6.	Michelle Bonkarzewski	Michelle Bonkarzewski	1293 Garland	☐ Town ☐ Village ☒ City Allouez	4/16/'11	Email / Phone
7.	Todd Dorschner	Todd A. Dorschner	1246 Garland St	☐ Town ☒ Village ☐ City Allouez	4/16/'11	Email / Phone
8.	Bertha Jauregui	Bertha Jauregui	1103 McCormick St.	☐ Town ☐ Village ☐ City Allouez	4/16/'11	Email / Phone
9.	Ron J. Hensberger	Ron Hensberger	1115 McCormick St.	☐ Town ☐ Village ☒ City G. Bay	4/16/'11	Email / Phone
10.				☐ Town ☐ Village ☐ City	4/16/'11	Email / Phone

Certification of Circulator

I, Kathleen Connor (name of circulator), (certify):

I reside at 820 E Frederick St Oshkosh WI 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Kathleen Connor (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Kevin D Lupke		153 Francis Ave Green Bay WI 54303	☐ Town ☐ Village ☒ City Green Bay ED	4/16/11	Email Phone
2.	Brian Peters		1289 GARLAND Green Bay WI 54301	☐ Town ☒ Village ☐ City Allouez ED	4/16/11 EP	Email Phone
3.	Ron Kaczen			☐ Town ☐ Village ☐ City	/ /11	Email Phone
4.	Michele Mahlke		1147 Garland St Green Bay, WI 54301	☐ Town ☒ Village ☐ City Allouez	4/16/11	Email Phone
5.	Christopher Leiser		1026 McCormick St Green Bay WI 54301	☐ Town ☒ Village Allouez ☐ City	4/16/11	Email Phone
6.	Julie Kauffman		1142 McCormick St Green Bay WI 54301	☐ Town ☒ Village ☐ City Allouez	4/16/11	Email Phone
7.	Ron Kauffman		1142 McCormick St Green Bay WI 54301	☐ Town ☒ Village ☐ City Allouez	4/16/11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /11	Email Phone

Certification of Circulator

I, Emily Denning (name of circulator), (certify):

I reside at 1005 Kensington Dr city of Appleton (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

(signature of circulator)

RECALL PETITION

Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Jon Hakala	JON HAKALA	1110 TERRY LN #25	☐ Town ☐ Village ☒ City DEPERE	4/16/'11	Email Phone
2.	RICHARD SLATER	Richard Slater	1110 TERRY LN LOT 29	☐ Town ☐ Village ☐ City DEPERE	4/16/'11	Email Phone
3.	Jessica Mueller	Jessica Mueller	1110 Terry ln. lot 21	☐ Town ☐ Village ☒ City DePere	4/16/'11	Email Phone
X 4.	GREG BLOOM	Greg Bloom	949 ANDERSON DR.	☐ Town ☒ Village ☐ City ASHWAUBENON	4/16/'11	Email Phone
X 5.	Sarah Hannon	Sarah Hannon	1192 D Scheuring Rd DePere WI	☐ Town ☐ Village ☒ City DePere	4/16/'11	Email Phone
X 6.	Katie Vanden Heuvel	Katie Vanden Heuvel	1021 N. Spencer St Apt 214	☐ Town ☐ Village ☒ City APPLETON	4/16/'11	Email Phone
7.	Carrie Rohr		1184 [illegible] Dr DePere WI 54115	☐ Town ☐ Village ☒ City DEPERE	4/16/'11	Email Phone
X 8.	ZACK Pineda	Zachary Pineda	918 Chicago Road Depere	☐ Town ☐ Village ☒ City Depere	4/16/'11	Email Phone
9.	Chris Ferris	Chris Ferris	913 Chicago Road DePere	☐ Town ☐ Village ☒ City DePere	4/16/'11	Email Phone
10.	ZOE LISON	Zoe Lison	1400 SILVERSTONE TRL	☐ Town ☐ Village ☒ City DEPERE	4/16/'11	Email Phone

Certification of Circulator

I, KOSH ST. CATHERINE (name of circulator), (certify):

I reside at 303 DILOAD ST, OSHKOSH WI, 54904 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. Each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this is punishable under S.12.13(3)(a), Wis. Stats.

16 / 2011 (date)

(signature of circulator)

3088

RECALL PETITION

ernment Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles
Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

D NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
X [illegible]	Emily E Maly	1975 candle Way	☐ Town ☐ Village ☒ City GREEN BAY	4/16/'11	Emai Phon
2. Carla Gruszynski	Carla Gruszynski	5262 Servais Rd	☒ Town ☐ Village ☐ City New Franken	4/16/'11	Emai Phon
3. David Paape	David Paape	972 Aldrin St	☐ Town ☐ Village ☒ City DePere	4/16/'11	Emai Phon
4.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
5.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
6.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
7.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
8.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
9.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
10.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon

Certification of Circulator

I, KASH ST. CYR THE MINE (name of circulator), (certify):

I reside at 303 BROAD ST. OSHKOSH WI. 54904 (circulator's residence – including number, street and municipality)

...lly circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. ...h person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this ...nishable under S.12.13(3)(a). Wis. Stats.

16 / 2011 (date)

[signature] (signature of circulator)

HHH1

3289

Page No. # 9

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Eric Grunewald	Eric Grunewald	205 W. Cedar St Bonduel, WI 54107	☐ Town ☐ Village ☐ City — Bonduel	4/16/'11	Email Phone
2. JASON WESENBERG		410 E. PARK Bonduel WI 54107	☐ Town ☐ Village ☐ City — Bonduel	4/16/'11	Email Phone
3. ERV LANGE	Erv Lange	3491 Glendale Ave Green Bay, Wis.	☐ Town ☐ Village ☐ City — Howard	4/16/'11	Email Phone
4. Jesse Bahr	Jesse Bahr	175 W. 7th Ave Appleton, WI	☐ Town ☐ Village ☐ City — Appleton	4/16/'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Helena Kirz (name of circulator), (certify):

I reside at 1317 Washington Ave. Oshkosh WI 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 15 / 2011 (date)

Helena Kirz (signature of circulator)

Page No. # 3290

RECALL PETITION

To Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Stephanie Farver	[signature]	357 W State St Bonduel, WI	☒ Town ☐ Village ☐ City Bonduel	4 / 16 / '11	Email Phone
2.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Joel R. Buehler (name of circulator), (certify):

I reside at 412 Laino St, Redgranite, WI. 54970 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Joel R. Buehler (signature of circulator)

3291 Page No. # X

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Tara Kraft-Mahnke	TKRaftMahnke	26 Thistle Down Ct. Appleton	☐ Town ☐ Village ☒ City	/ / '11	Email Phone
2.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Nicholas A. Sands (name of circulator), (certify):

I reside at 759 Vine Ave (Apt 4) Oshkosh WI 54901
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

9 / 16 / 2011
(date)

(signature of circulator)

Page No. # 3292

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Amy Hebzynski	S Hebzynski	1973 Mayflower St. Kaukauna, WI 54130	☒ Town ☐ Village ☐ City Kaukauna	4 /15/ '11	Email Phone
2. DUWAYNE GILCHRIST	D Gilchrist	N7163 CEDAR LANE Vandenbroek, WI	☒ Town ☐ Village ☐ City VANDENBROEK	4 /15/ '11	Email Phone
3. Kurt Brochtrup	Kurt Brochtrup	7965 Lovers Lane Greenleaf WI 54126	☒ Town ☐ Village ☐ City Holland	4 /16/ '11	Email Phone
4. Corey Frahm	Corey Frahm	W5772 Cty Rd S Black Creek, WI 54106	☒ Town ☐ Village ☐ City Center	4 /16/ '11	Email Phone
5. Sue Helms	Sue Helms	620 Walter St Kaukauna	☐ Town ☐ Village ☐ City Kaukauna	/ /'11	Email Phone
6. ~~Tyler~~ Tyler Fuhrer	Tyler Fuhrer	3300 Shamrock Dr Plover	☐ Town ☒ Village ☐ City Plover	4 /16/ '11	Email Phone
7. Zachary Kielbasa	Zachary Kielbasa	2010 White Clover Ln Plover	☐ Town ☒ Village ☐ City Plover	4 /16/ '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Jon Schroeder (name of circulator), (certify):

I reside at 1833 Jackson St. Oshkosh 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Jon Schroeder (signature of circulator)

Page No. # 393

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	NATHAN PRICE		N2821 McLABE RD KAUKAUNA WI 54130	☒ Town ☐ Village ☐ City KAUKAUNA	4/16/'11	Emai Phon
2.	SCOTT VANDELOO		818 BLUFF AVE LITTLE CHUTE, WI 54140	☐ Town ☒ Village ☐ City LITTLE CHUTE	4/16/'11	Emai Phon
3.	Vanessa Lambie		818 Bluff Ave. Little Chute, WI 54140	☒ Town ☒ Village ☐ City Little Chute	4/16/'11	Emai Phon
4.	STACY SIMS		1505½ CRAIG KAUK WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Emai Phon
5.	DON MORT		N7887 RIDGEVIEW CT	☐ Town ☒ Village ☐ City SHERWOOD	/'11 4-16-11	Emai Phon
6.	Kathy Nyman		W2318 Briarwood Dr Appleton WI 54915	☒ Town ☐ Village ☐ City Buchanan	4/16/'11	Emai Phon
7.	Julie Wurl		225 W 12th St #3 Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Emai Phon
8.	Rudy Heath		W 12th St #6 Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Emai Phon
9.	Shanika Roberts		225 W 12th St. Apt 7 Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Emai Phon
10.	Amber L. Zehren		214 W 12th St Apt 11 Kaukauna, WI, 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Emai Phon

Certification of Circulator

I, Troy Landy (name of circulator), (certify):

I reside at 1016A Jackson St. Oshkosh, WI 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

(signature of circulator)

Page No. #3294

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Karen B Tinkham	Karen B Tinkham	532 E McKinley St Appleton, WI 54915	☐ Town ☐ Village ☒ City Appleton	4/16/'11
2. Carol A. Sewall	Carol A. Sewall	[illegible] Little Chute, WI	☐ Town ☐ Village ☐ City Little Chute	4/16/'11
3. Nancy L.M. Shiver	Nancy Shiver	24 Woodmere Ct Appleton, WI	☐ Town ☐ Village ☒ City Appleton	4/16/'11
4. Jeremy Shiver	Jeremy Shiver	24 Woodmere Ct Appleton	☐ Town ☐ Village ☒ City Appleton	4/16/'11
5. Michelle Johnson	Michelle Johnson	312 E North Ave Little Chute	☐ Town ☒ Village ☐ City Little Chute	4/16/'11
6. Sherry Agen	Sherry Agen	924 Shamrock Ct. Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11
7. Donna Van Nuland	Donna Van Nuland	505 Grand Ave	☐ Town ☐ Village ☒ City Little Chute	4/16/'11
8. Cody Sewall	Cody Sewall	1729 Franklin St. Little Chute WI 54140	☐ Town ☒ Village ☐ City Little Chute	4/16/'11
9. Tim Austin	Tim Austin	N9643 Otte Ct Appleton, WI 54915	☐ Town ☐ Village ☒ City Appleton	4/16/'11
10. Rasma Rozite	Rasma Rozite	2705 W Main (54911) Little Chute, WI	☐ Town ☒ Village ☐ City Little Chute	4/16/'11

Certification of Circulator

I, MIKE PAWLAK (name of circulator), (certify):

I reside at 1833 JACKSON St. City of OSHKOSH
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011
(date)

(signature of circulator)

3295

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	E P
1. Steve Mole	Steve Mole	1709 Roosevelt St	☐ Town ☒ Village ☐ City Little Chute	4 /16/ '11	
2.			☐ Town ☐ Village ☐ City	/ / '11	
3.			☐ Town ☐ Village ☐ City	/ / '11	
4.			☐ Town ☐ Village ☐ City	/ / '11	
5.			☐ Town ☐ Village ☐ City	/ / '11	
6.			☐ Town ☐ Village ☐ City	/ / '11	
7.			☐ Town ☐ Village ☐ City	/ / '11	
8.			☐ Town ☐ Village ☐ City	/ / '11	
9.			☐ Town ☐ Village ☐ City	/ / '11	
10.			☐ Town ☐ Village ☐ City	/ / '11	

Certification of Circulator

I, MIKE PAWLAK (name of circulator), (certify):

I reside at 1835 JACKSON ST. City of OSHKOSH (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Mike Pawlak (signature of circulator)

3096

Page No. # 7

RECALL PETITION

...a Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles ...le XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

...MES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Paula Stanislawski		526 Susan Street Combined Locks	☐ Town ☒ Village ☐ City Combined Locks	4/16/'11
2. MARY Van Den Bloomen		116 Idlewild St Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna NWO	4/16/'11
3. Jerry DeGoey		1125 W. main st Little Chute wis.	☐ Town ☒ Village ☐ City Little Chute NWO	/'11 4-16--11
4. Mark Schwingle		121 Lincoln st Little Chute WI 54140	☐ Town ☒ Village ☐ City Little Chute	4/16/'11
5. Joey Kelly		222 N 6th St DePere, Wi 54115	☐ Town ☐ Village ☒ City DePere	/'11 4/16/11
6. PATRICIO BRUCE		121 A W. LINCOLN AVE LITTLE CHUTE WI 54140	☐ Town ☒ Village ☐ City LITTLE CHUTE	/'11 4/16/11
7. Pamela Boldt		900 Taft St Kaukauna, WI.	☐ Town ☐ Village ☒ City Kaukauna NWO	4/16/'11
8. [illegible]		N5511 St. Catherine St Hilbert WI	☒ Town ☐ Village ☐ City Hilbert	4/16/'11
9. BRUCE STRICK		607 Hawthorn ST Little Chute, WI	☐ Town ☐ Village ☒ City Little Chute	4/16/'11
10. Pamela Ruedinger		404 Park Lane Little Chute WI	☐ Town ☒ Village ☐ City Little Chute	4/16/'11

Certification of Circulator

I, Nately Irwin (name of circulator), (certify):

I reside at N4986 Cty. Rd. A Wild Rose WI 54984
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011
(date)

Nately Irwin
(signature of circulator)

Page No. #3097

RECALL PETITION

...n Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles ... pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	[illegible]	[illegible] Dixon	410 N Oneida St Appleton WI 54912	☐ Town ☐ Village ☒ City Appleton NMD	4/16/11
2.	Ben True	Ben True	1125 W. Main St. Little Chute, WI 54941	☐ Town ☒ Village ☐ City Little Chute NMD	4/16/11
3.	Debra Delongchamp	Debra Delongchamp	808 Madison Dr Little Chute, WI	☐ Town ☐ Village ☐ City Little Chute	4/16/11
4.	Manuel Ballesteros	Manuel Ballesteros	1607 N. Morrison St. Appleton WI 54911	☐ Town ☐ Village ☐ City Appleton NMD	4/16/11
5.	Patti Fenner	Patti Fenner	929 Bonheur Ct Neenah WI	☐ Town ☐ Village ☒ City Neenah	4-16-11
6.				☐ Town ☐ Village ☐ City	/ /11
7.				☐ Town ☐ Village ☐ City	/ /11
8.				☐ Town ☐ Village ☐ City	/ /11
9.				☐ Town ☐ Village ☐ City	/ /11
10.				☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Natalie Divine (name of circulator), (certify):

I reside at N4984 Cty. Rd. CA Wild Rose, WI. 54984 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 16 / 2011 (date)

Natalie Divine (signature of circulator)

Page No. #3298

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Kathleen Bahler	Kathleen Bahler	603 Beaupre St. Green Bay, WI 54301	☐ Town ☑ Village ☐ City Allouez	4/14/11	Em Pho
2. Milton DeVillers	Milton DeVillers	515 Beaupre ST.	☐ Town ☑ Village ☐ City Allouez	4/17/11	Em Pho
3. Helen A. DeVillers	Helen A. DeVillers	515 Beaupre Green Bay WI	☐ Town ☐ Village ☐ City Allouez	4/17/11	Em Pho
4. Rupert Serenko	Rupert P. Ser	339 Beaupre	☐ Town ☑ Village ☐ City Allouez	4/17/11	Em Pho
5. Pamela Van Straten	Pam Van Straten	W3116 Kortney Ln Seymour WI	☑ Town ☐ Village ☐ City Seymour	4/17/11	Em Pho
6. Suzanne Boyce	Suzanne Boyce	145 Beaupre	☐ Town ☑ Village ☐ City Allouez	4/17/11	Em Pho
7. Stephanie Roeser		209 Kalb Ave Green Bay WI 54301	☐ Town ☑ Village ☐ City Allouez	4/17/11	Em Pho
8. Mary Windey	Mary Windey	901 Kalb. 54301	☐ Town ☑ Village ☐ City Allouez	4/17/11	Em Pho
9. Barbara van den Busch	Barbara van den Busch	1614 Halsey St. 54301	☐ Town ☑ Village ☐ City Allouez	4/17/11	Em Pho
10. Roxanne Conard	Roxanne Conard	1644 Halsey 54301	☐ Town ☑ Village ☐ City Allouez	4/17/11	Em Pho

Certification of Circulator

I, KASIA ST. CATHERINE (name of circulator), (certify):

I reside at 703 DIVISION ST. OSHKOSH WI 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

04 / 17 / 2011
(date)

(signature of circulator)

3299

Page No. # X

RECALL PETITION

...isconsin Government Accountability Board: We, the undersigned qualified electors of the 2nd State Senate District of Wisconsin petition for the recall of State Senator Robert Cowles ...n office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Kathy Weber	Kathy Weber	2426 Vanden Bergh	☐ Town ☐ Village ☐ City Bellevue	4-17-'11
2. Rita Fanlon	Rita A Fanlon	1480 Ridge Oaks Dr	☐ Town ☐ Village ☐ City DePere	4/17/'11
3. Paula Schaefer	Paula Schaefer	1603 Shore Dr N &	☐ Town ☐ Village ☐ City Marinette	4/17/'11
4. Thomas D Bergel	Thomas D Bergel	4569 EDGEWATER BEACH GREEN BAY, WI 54311	☐ Town ☐ Village ☐ City GREEN BAY	4.17.'11
5. Tracy Legg		1018 Bluebird St DePere WI 54115	☐ Town ☐ Village ☐ City Depere	4/7/'11
6. Kurtis Reuiner	Kurtis Reuiner	826 15th Ave	☐ Town ☐ Village ☐ City GB	4/17/'11
7. Jade Reuiner	Jade Reuiner	826 15th Ave	☐ Town ☐ Village ☐ City GB	4/17/'11
8. Cody Jensen		1707 E TRACTOR	☐ Town ☐ Village ☐ City Kaukauna	4/17/'11
9. JAMES R SLATTERY	James R Slattery	1130 FAY COURT	☐ Town ☐ Village ☐ City DEPERE WI	4/17/11
10. Brian Rysewyk	Brian Rysewyk	823 Ash St Depere, WI 54115	☐ Town ☐ Village ☐ City Depere WI	4/17/'11

Certification of Circulator

I, Nataly Divine (name of circulator), (certify):

I reside at N14986 Cty. Rd. G Wild Rose, WI. 54984
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 17 / 2011
(date)

Nataly Divine
(signature of circulator)