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. Margie Bartels	Margie Bartels	708 George St Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
2. Bruce Bartels	Bruce R Bartels	" "	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
3. Ashten Supns	Ashten Supns	" "	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
4. Alvin Szardowitz	Alvin Szardowitz	112 Lamplighter Dr. Apt 3 Kaukauna, WI.	☐ Town ☐ Village ☒ City Kaukauna (PW)	4/18/'11	Email Phone
5. Chris Leick	[illegible]	112 Lamplighter Dr #4	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
6. Cory Kazik	Cory Kazik	112 Lamplighter Dr. #5	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
7. Joyce Newcomer	Joyce Newcomer	132 Lamplighter Dr. #2	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
8. Lyndsey Toppins	Lyndsey Toppins	140 Lamplighter Dr. #11	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
9. Brittany Willbrandt	Brittany Willbrandt	140 Lamplighter Dr. #8	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Paul Borofka-Webb (name of circulator), (certify):

I reside at 709 Bartosh lane River Falls 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 / 18 / 2011
(date)

[signature]
(signature of circulator)

Page No. #3401

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. [illegible]	[illegible]	[illegible]	☐ Town ☒ Village ☐ City Black Creek	4/18/'11	Email / Phone
2. Ryan Sticha	Ryan Sticha	110 S Main St Lot #14	☐ Town ☒ Village ☐ City Black Creek	4/18/'11	Email / Phone
3. Christine Lashley	Christine Lashley	W7594 Windsong Ct. Shiocton, WI	☐ Town ☒ Village ☐ City Shiocton	4/18/'11	Email / Phone
4. Gerald D. Lashley	[illegible]	W7594 Windsong Ct Shiocton WI.	☐ Town ☒ Village ☐ City Shiocton	4/18/'11	Email / Phone
5. Maryann Pooler	Marg A. Pooler	W7575 Brian Dr (JK) Shiocton, Wi	☐ Town ☒ Village ☐ City Shiocton (JK)	4/18/'11	Email / Phone
6. Courtney Mastey	Courtney M. Mastey	W7682 State Rd 54 Shiocton, WI 54170	☐ Town ☒ Village ☐ City Shiocton (JK)	4/18/'11	Email / Phone
7. Cary Miller	Cary Miller	104 Sycmor Black Creek, WI 54106	☐ Town ☒ Village ☐ City Black Creek	4/18/'11	Email / Phone
8. Tammy Lemmens	Tammy Lemmens	504 Burdick St Apt 2 Black Creek	☐ Town ☒ Village ☐ City Black Creek	4/18/'11	Email / Phone
9. HYLLIS SCHMIDT	Phyllis Schmidt	508 E. Burdick St.	☐ Town ☐ Village ☐ City Black Creek	4-18-11	Email / Phone
10. Kim Fuller	Kim Fuller	663 W. Factory St Seymour	☐ Town ☐ Village ☐ City Seymour	4/18/'11	Email / Phone

Certification of Circulator

I, Jay Kariesch (name of circulator), (certify):

I reside at W7418 ~~[illegible]~~ US Hwy 10, Ellsworth Village (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 / 18 / 2011 (date) — (signature of circulator)

Page No. #3402

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. Regina D. Herkwitz	Regina D Herkwitz	1004 N. Main St Seymour, WI 54165	☐ Town ☐ Village ☒ City Seymour	04/18/'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, Maxwell B. Taylor (name of circulator), (certify):

I reside at 2229 N. 70th St, Wauwatosa, 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 / 18 / 2011 (date)

MB Taylor (signature of circulator)

Page No. #3403

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 10th State Senate District of Wisconsin petition for the recall of State Senator Sheila Harsdorf 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. [illegible] Scott	[illegible]	[illegible] St Black Creek WI	☐ Town ☒ Village ☐ City Black Creek (MT)	4/18/'11	Email Phone
2. Andrew McGin	[illegible]	[illegible] St Black Creek WI	☐ Town ☒ Village ☐ City Black Creek (MT)	4/18/'11	Email Phone
3. ROBIN BAXTER	[illegible]	W7580 WINDSONG CT SHIOCTON, WI 54170	☐ Town ☒ Village ☐ City SHIOCTON	4/18/'11	Email Phone
4. Judy Dombrowski	Judy Dombrowski	N5667 LACROIX St. Shiocton, WI 54170	☐ Town ☒ Village ☐ City Shiocton	4/18/'11	Email Phone
5. Ronald N Barker	Ronald N Barker	N5667 LACROIX ST SHIOCTON WI 54170	☐ Town ☐ Village ☐ City Shiocton (MT)	4/18/'11 (MT)	Email Phone
6. Amanda Gomm	Amanda Gomm	W7548 Brian Dr. Shiocton WI 54170	☐ Town ☒ Village ☐ City Shiocton	4/18/'11	Email Phone
7. Jeff Doucette	Jeff Doucette	W7682 Hwy 54 Shiocton, WI 54170	☐ Town ☒ Village ☐ City Shiocton	4/18/'11	Email Phone
8. Gloria Kruese	Gloria Kruese	104 Sycamore Black Creek	☐ Town ☐ Village ☐ City Black Creek	4/18/'11	Email Phone
9. Ney, Erin A	[illegible]	104 Sycamore Dr #5 Black Creek, WI 54106	☐ Town ☐ Village ☐ City Black Creek	18 APR '11	Email Phone
10. [illegible] Dimmick	Janet Dimmick	512 Bronson Rd Seymour	☐ Town ☒ Village ☐ City Seymour	4/18/'11	Email Phone

Certification of Circulator

I, Maxwell B. Taylor (name of circulator), (certify):

I reside at 222 N. 20th St Wauwatosa 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 / 18 / 2011 (date)

MB Taylor (signature of circulator)

Page No. # 3404

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 Brown	[signature]	W6748 Curt Black Rd Shawano wi 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
2. Tim Breitrick	[signature]	W6848 Curt Black Shawano WI 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
3. Kanssa Quaheim	Kanssa Quaheim	W6884 Curt Black Rd Shawano WI 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
4. Anthony Pastran	Anthony Pastran	N6596 Old Lake Shawano, WI 54166	☒ Town ☐ Village ☐ City Wescott (AJN)	4-18/'11	Email Phone
5. JAMES BRANDT	James D. Brandt	N6620 OLD LAKE RD. SHAWANO WI. 54166	☒ Town ☐ Village ☐ City Wescott	/ /'11 4-18	Email Phone
6. George Gleesing	George Gleesing	N6415 OAK RIDGE CT. SHAWANO W. 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
7. CHRISTINE GLEESING	Christine Gleesing	N6415 OAK Ridge CT Shawano, WI. 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
8. MARY DONOGAN HABER	[signature]		☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9. ELIZABETH DONOVAN	Elizabeth Donovan	N64050 AK RD CT SHAWANO WI	☐ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
10. John Busch	John Busch	Shawano WI N6431 Old lake Rd	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone

Certification of Circulator

I, Avery J. Newman (name of circulator), (certify):

I reside at 709 Bartosh Lane River Falls, WI 54022
(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 / 18 / 2011 (date)

Avery J. Newman (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. John Polan	John Polan	445 N. Humphrey Circle Apt 16 (AJN)	☐ Town ☐ Village ☒ City Shawano (AJN)	4/18/'11	Email / Phone
2. GRACE SWONGER	Grace Swonger	463 N Humphrey Circle (AJN) Shawano, WI 54166	☐ Town ☐ Village ☒ City Shawano	4/18/'11	Email / Phone
3. Eileen Skalitzky	Eileen Skalitzky	N5479 Mark Ave. Shawano, WI	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email / Phone
4. Clarissa Buhlitz	Clarissa Buhlitz	Shawano WI N5999 Mark Ave	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email / Phone
5. Virginia V Clark	Virginia V Clark	N6019 Mark Ave Shawano, WI 54166	☒ Town ☐ Village ☐ City Wescott	4/18/11	Email / Phone
6. Lorie Benak	Lorie Benak	N 6019 Mark Ave Shawano WIS 54166	☒ Town ☐ Village ☐ City WESCOTT	4/18/2011	Email / Phone
7. Joseph Fiala	Joseph Fiala	N6343 Lake Dr Shawano, WI 54166	☒ Town ☐ Village ☐ City Wescott	4/18/11	Email / Phone
8. PATRICIA DIETRICH	Patricia Dietrich	N6361 Lake Dr Shawano WI	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email / Phone
9. Jason Sporiski	Jason Sporiski	N6475 Lake Dr, Shawano WI 54166	☒ Town ☐ Village ☐ City Wescott (AJN)	4/18/'11	Email / Phone
10. Rose Rabuni	Rose Rabuni	N6199 Lake Dr Shawano WI 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email / Phone

Certification of Circulator

I, Avery J. Newman (name of circulator), (certify):

I reside at 709 Bartosh Lane River Falls, WI 54022 (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 / 18 / 2011 (date)

Avery J. Newman (signature of circulator)

Page No. # 3406

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. Steven Mueller	Steven Mueller	N6316 old lake Rd Shawano WI 54166	☒ Town ☐ Village ☐ City Wescott (AJN) Westscott	4/18/'11 (AJN)	Emai Phon
2. Renee DeBauche	Renee DeBauche	N6316 old lake Rd Shawano WI 54166	☒ Town ☐ Village ☐ City Wescott (AJN) Westscott	4/18/'11	Emai Phon
3.			☐ Town ☐ Village ☐ City	/ / '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, Avery J. Newman (name of circulator), (certify):

I reside at 709 Bartosh Lane River Falls, WI 54022 (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 / 18 / 2011 (date)

Avery J. Newman (signature of circulator)

Page No. #3407

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. Kathy Waupoose	[signature]	N6168 Lake Dr Shawano	☒ Town ☐ Village ☐ City Wescott ~~Shawano~~ (AO)	4/18/'11	Email Phone
2. Denise Buettner	Denise Buettner	W6763 Curt Black Shawano	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
3. Christopher Maulson	[signature]	W6791 Curt Black Shawano	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
4. Khris Gumieny	[signature]	W6714 Curt Black Shawan	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
5. Earl Stein	[signature]	N6550 old Lake Rd Shawno	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
6. Linda Radomski	Linda Radomski	N6448 Oak Ridge Shawano	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
7. [illegible]	[signature]	N6440 old Lake Road Shawno	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
8. Jeff Anker	[signature]	N6368 old lake rd Shawno	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
9. Bev Brown	Bev Brown	N6360 Old Lake Rd Shawano, WI 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

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

I reside at N3204 Hwy 54 Black River Falls
(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 / 18 / 2011
(date)

[signature]
(signature of circulator)

Page No. #3408

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. JOAN WOODS	Joan Woods	445 North Humphrey Circle Apt #2 Shawano	☐ Town ☐ Village ☒ City Shawano	4/18/'11	Email / Phone
2. GLEN WARRINGTON	Glen Warrington	445 North Humphrey Cir #1 Shawano, WI. 54166	☐ Town ☐ Village ☒ City Shawano	4/18/'11	Email / Phone
3. George Smiley	George Smiley	5931 Mork Ct. Shawano, WI. 54166	☒ Town (23) ☐ Village ☐ City Westcott	4/18/'11	Email / Phone
4. Ty Raddant	Ty Raddant	N6916 Mark Ave Shawano, WI 54166	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email / Phone
5. Lawrence J Coon	Lawrence J Coon	N6344 Lake Drive Shawano, WI 54166	☒ Town ☐ Village ☐ City Wescot	4/18/'11	Email / Phone
6. Nick Parsons	Nick Parsons	N6316 Lake Drive Shawano, WI 54166	☒ Town ☐ Village ☐ City Wescot	4/18/'11	Email / Phone
7. Dustin Rydzewski	Dustin Rydzewski	N6394 Lake Drive Shawano	☒ Town ☐ Village ☐ City Wescot	4/18/'11	Email / Phone
8. Karla Stascak	Karla Stascak	N6476 Lake Drive Shawano	☒ Town ☐ Village ☐ City Wescott	4/18/'11	Email / Phone
9. Erik Colón	Erik Colón	N6180 LAKE DRIVE Shawano	☒ Town ☐ Village ☐ City wescott	4/18/'11	Email / Phone
10. Shelie Colón	Shelie Colón	N6180 Lake Drive Shawano	☒ Town ☐ Village ☐ City wescott	4/18/'11	Email / Phone

Certification of Circulator

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

I reside at 43204 Hwy 54 Black River Falls (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 / 18 / 2011 (date)

(signature of circulator)

Page No. #3409

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. LINDA CAVAZOS	Linda Cavazos	319 E FIRST STREET	☐ Town ☐ Village ☒ City Gillett	4/18/'11	Email Phone
2. ORLIN SKINKIS	Orlin Skinkis	319 S Green Bay AVE	☐ Town ☐ Village ☒ City Gillett	4/18/'11	Email Phone
3. Cassie Skinkis	Cassie Skinkis	319 S Green Bay Ave	☐ Town ☐ Village ☒ City Gillett	4/18/'11	Email Phone
4. DAN BIRR	Dan Birr	319 S GREEN BAY AVE	☐ Town ☐ Village ☐ City GILLETT	4/18/'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. James P. Haggerty (name of circulator), (certify):

I reside at 430 Union St. Eau Claire, 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 / 18 / 2011 (date)

James P. Haggerty (signature of circulator)

Page No. #341D

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 M Paitl	Kathleen M. Paitl	9565 Holt Pk Rd Suring WI 54174	☒ Town ☐ Village ☐ City Spruce	4/18/'11	Email Phone
2.	Arelis Poquette	Arel Poquette	8293 Cty Rd Gillett WI 54124	☒ Town ☐ Village ☐ City Maple Valley	4/18/'11	Email Phone
3.	Louis Eggebrecht	Louis Eggebrecht	7430 Trail Rd Gillett Wi	☐ Town ☐ Village ☒ City Gillett (JPN)	4/18/'11	Email Phone
4.	Julie Burns	Julie Burns	104 Franklin Apt 121 Oconto Falls WI	☐ Town ☐ Village ☒ City Oconto Falls (JPN)	4/18/'11	Email Phone
5.	Selina Stallfus	Selina Stallfus	N9600 Chesters Rd Crivitz WI 54114	☒ Town ☐ Village ☐ City Crivitz	4-18 / '11	Email Phone
6.	Deb Bin	Deb Bin	537 Green Bay Ave Oconto Falls. WI	☐ Town ☐ Village ☒ City Oconto Falls	4-18/'11	Email Phone
7.	Lorie Denny	Lorie Denny	207 Park Ave Oconto Falls WI	☐ Town ☐ Village ☐ City Oconto Falls	4/18/'11	Email Phone
8.	Casey Grams	Casey Grams	311 Cherry Ave Oconto Falls WI	☐ Town ☐ Village ☐ City Oconto Falls	4/18/'11	Email Phone
9.	Chr Bowers	[illegible]	ABram WI 3387 Bretmer Rd	☐ Town ☐ Village ☐ City ABrams	4/18/'11	Email Phone
10.	Warren Hoffert	Warren Hoffert	211 Sheridan St Oconto Falls	☐ Town ☐ Village ☒ City Oconto Falls (JPN)	4/18/'11	Email Phone

Certification of Circulator

I, James P. Haggerty (name of circulator), (certify):

I reside at 430 Union St. Eau Claire, 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 / 18 / 2011 (date)

James P. Haggerty (signature of circulator)

Page No. #3411

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. Roger D. Dietrich	Roger D. Dietrich	N2351 State Hy 55	☐ Town ☐ Village ☐ City Van Den Broek	4-18-11	Ema Phon
2. Linda L. Dietrich	Linda L. Dietrich	N2351 State Hy 55	☒ Town ☐ Village ☐ City Van Den Broek	/ / '11 4-18-11	Ema Phon
3. Amanda Tanner	Amanda Tanner	416 W. 6th St	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Ema Phon
4.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
5.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
6.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
7.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
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, AN SHANG 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 / 18 / 2011 (date)

(signature of circulator)

Page No. #3412

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. DUANE ARRICK	Duane Arrick	P.O Box 676 S. Richmond Gillett, WI 54124	☐ Town ☐ Village ☒ City Gillett	4/15/'11	Email / Phone
2. Violet Ausloos	Vi Ausloos	7716 Cty B Oconto Falls 54154	☒ Town ☐ Village ☐ City Spruce	4/18/'11	Email / Phone
3. Marguerite Fieck	Marguerite Fieck	8348 Wahl Lane Oconto Falls WI 54154	☒ Town ☐ Village ☐ City Morgan	4/18/'11	Email / Phone
4. Wilbur Fieck	Wilbur T. Fieck	8348 WAHL LN OCONTO FALLS WI 54154	☒ Town ☐ Village ☐ City MORGAN	4/18/'11	Email / Phone
5. CAROL Counard	Carol Counard	7591 Cty E OCONTO FALLS WI. 54154	☒ Town ☐ Village ☐ City MORGAN	4/18/'11	Email / Phone
6. ROGER ANDERSON	Roger Anderson	350 S. CHESTNUT AV. OCONTO FALLS 54154	☐ Town ☐ Village ☒ City OCONTO FALLS	/ /'11 4/18/11	Email / Phone
7. SONIA F SMET	Sonia F. Smet	10519 Parkway Rd Brazeau, WI 54161	☒ Town ☐ Village ☐ City Brazeau	4/18/'11	Email / Phone
8. Nannette Foral	N.M. Foral	525 N. Chestnut Ave #5 Oconto Falls, WI 54154	☐ Town ☐ Village ☒ City Oconto Falls	4/18/'11	Email / Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone

Certification of Circulator

I, Danny B. Cole (name of circulator), (certify):

I reside at 5107 Sampson Rd. Abrams WI. 54101 Town Abrams (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 / 18 / 2011 (date) Danny B. Cole (signature of circulator)

Page No. #3913

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. Gerald VanHandel	Gerald VanHandel	1015 DePOT ST Little Chute WI 54140	☐ Town ☒ Village ☐ City Little Chute	4/13/'11	Emai Phon
2. Jeffrey Lex McDonald	Jeff McDonald	612 South Main St Oconto Falls WI 54154	☐ Town ☐ Village ☒ City Oconto Falls	4/16/'11	Emai Phon
3. ROBERT M ETZNAR	Robert Metzner	8310 HYW 22 Oconto Falls WI 54154	☒ Town ☐ Village ☐ City Oconto Falls	4/16/'11	Emai Phon
4. Andy DeQuaine	[illegible]	3216 Falk RD Abrams WI 54101	☒ Town ☐ Village ☐ City ABRAMS	4/17/'11	Emai Phon
5. Stacy Dequaine	Stacy Dequaine	3216 Falk Rd. Abram WI 54101	☒ Town ☐ Village ☐ City Abram	4/17/'11	Emai Phon
6. Janet Bauche	Janet Bauche	124 Hillside Apt #3 Oconto Falls, 54154	☐ Town ☐ Village ☐ City Oconto Falls	4/18/'11	Emai Phon
7. CLARE Bergstrom	Clare Bergstrom	8699 HWY 22 W Oconto FALLS WI 54154	☒ Town ☐ Village ☐ City Oconto Falls	4/18/'11	Emai Phon
8. DEBRA LOLLY	Debra Lolly	146 N MAIN Oconto Falls WI 54154	☐ Town ☐ Village ☒ City Oconto Falls	4/18/'11	Emai Phon
9. Gay Izdepski	Gay Izdepski	107 N Farm Rd #119 PO BOX 174 Oconto Falls WI 54154	☐ Town ☐ Village ☒ City Oconto Falls	04/18/'11	Emai Phon
10. ~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	☐ Town ☐ Village ☐ City	/ /'11	Emai Phon

Certification of Circulator

I, Danny B. Cole (name of circulator), (certify):

I reside at 5167 Sampson Rd. Abrams WI. 54101 Town Abrams (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 / 18 / 2011 (date) Danny B. Cole (signature of circulator)

Page No. #3414

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 Jahnke	Richard Jahnke	288 S. Oakland Ave Oconto Falls WI 54154	☐ Town ☐ Village ☒ City Oconto Falls	3/9/'11 ~~3/9~~	Email Phone
2. Eileen Jahnke	Eileen Jahnke	167 Mond Ave Oconto Falls WI	☐ Town ☐ Village ☒ City Oconto Falls	3/9/'11	Email Phone
3. Heidi Schindel	Heidi Schindel	5365 Elm Lawn Rd Oconto Falls WI	☒ Town ☐ Village ☐ City Oconto Falls	3/9/'11	Email Phone
4. Brooke Schindel	Brooke Schindel	5365 Elm Lawn Rd Oconto Falls WI	☒ Town ☐ Village ☐ City Oconto Falls	3/9/'11	Email Phone
5. Christopher Siolka	Christopher Siolka	118 W. Highland Dr Oconto Falls WI	☒ Town ☐ Village ☐ City Oconto Falls	3/9/'11	Email Phone
6. Travis Schindel	Travis Schindel	118 S. Chestnut Av Oconto Falls WI	☐ Town ☐ Village ☒ City Oconto Falls	3/13/'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 Schindel (name of circulator), (certify):

I reside at 5365 Elm Lawn Road Oconto Falls, WI 54154 City of Oconto Falls
(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 / 15 / 2011 (date)

Robert Schindel (signature of circulator)

Page No. #3415

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. BRENT SCHROEDER	Brent Schroeder	949 MYRTLE LANE	☐ Town ☒ Village ☐ City ASHWAUBENON	4/18/'11	Ema Phon
2.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
3.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
4.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
5.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
6.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
7.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
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, Emily Kitchin (name of circulator), (certify):

I reside at 3446 S. 13 ST Milwaukee (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/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 / 18 / 2011 (date)

Emily Kitchin (signature of circulator)

Page No. #3416

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. J. Jeffrey Tischler	J Jeffrey Tischler	1002 Green Ridge Drive Green Bay, WI	☐ Town ☐ Village ☒ City Green Bay	03 / 28 / '11	Em Pho
2. June E. Stern	June E. Stern	2164 CTY. RD. U Green Bay Wis 54313	☒ Town ☐ Village ☐ City Pittsfield	3 / 31 / '11	Em Pho
3. JIM STERN	Jim Stern	2164 Cty U Green Bay, WI 54313	☑ Town ☐ Village ☐ City PITTSFIELD	3 / 31 / '11	Em Pho
4. Sue Tischler	Sue Tischler	1002 Green Ridge Dr. Green BAY, WI 54313	☐ Town ☐ Village ☒ City GREEN BAY	3 / 31 / '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, ROBERT SAUER (name of circulator), (certify):

I reside at 2930 SANDIA DR 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.

April / 18 / 2011 (date)

Robert Sauer (signature of circulator)

Page No. #2417

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. Ronda Strenski	Ronda Strenski	2885 Lost Horizon Green Bay	☐ Town ☐ Village ☒ City GREEN BAY	3/13/'11	Email Phone
2. Kimberly Wagner	Kimberly Wagner	2431 LaRue Lane Green Bay	☐ Town ☒ Village ☐ City Ashwaubenon	3/29/'11	Email Phone
3. BEVERLY TRAST	Beverly Trast	1176 Orlando Dr Green Bay	☐ Town ☒ Village ☐ City ASHWAUBENON	3/29/'11	Email Phone
4. Jerilyn Kelly	Jerilyn Kelly	1522 Buffalo St Green Bay	☐ Town ☒ Village ☐ City Ashwaubenon	3/29/'11	Email Phone
5. SUE Engstrom	Sue Engstrom	1225 Shepherds Path Green BAY, WI 54313	☐ Town ☐ Village ☒ City Green BAY	/ /'11 4 8	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, JON BECKMAN (name of circulator), (certify):

I reside at 3025 CACTUS CT, GREENBAY 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.

4/18/2011 (date)

Jon Beckman (signature of circulator)

Page No. #3418

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. Jenny M. Roush	Jenny M. Roush	220 Cornelius Martin Ct. DePere 54115	☐ Town ☐ Village ☒ City Depere	4/2/'11	Email Phone
2. Kelly Bucher	Kelly Bucher	757 S. 9th St DePere, WI 54115	☐ Town ☐ Village ☒ City Depere	4/4/'11	Email Phone
3. ZACH ROUSH	Z-/	220 CORNELLIUS MARTIN CT DEPERE, WI 54115	☐ Town ☐ Village ☒ City Depere	4/4/'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, Sarah Polson (name of circulator), (certify):

I reside at 141 Gwynn St. 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 / 18 / 2011 (date)

Sarah G. Polson (signature of circulator)

Page No. #3419

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. Denny Ingvad	Denny Ingvad	305 W 17th St Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	3/26/'11	Em Pho
2. Wayne Pike	Wayne Pike	301 W. 17th ST KAUKAUNA	☐ Town ☐ Village ☒ City KAUKAUNA	3/26/'11	Em Pho
3. Justin Brandt	Justin Brandt	401 W 17th St. Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/26/'11	Em Pho
4. Hazel Haen	Hazel Haen	303 W Henry St Kaukauna 54130	☐ Town ☐ Village ☒ City Kaukauna	3-27-11	Em Pho
5. Katie Kessler	Kat Kessler	301 W. Henry Kaukauna 54130	☐ Town ☐ Village ☒ City Kaukauna	3/27/11	Em Pho
6. Andrew Motylak	[illegible]	301 W Henry St Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Em Pho
7. Bernard Nelson	Bernard Nelson	221 W Henry St Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Em Pho
8. Beverly Bangart	Beverly Bangart	1704 Main Ave Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Em Pho
9. Jeff Gassner	[illegible]	1616 Main Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Em Pho
10. Kevin Voet	Kevin Voet	1616 MAIN KAUKAUNA	☐ Town ☐ Village ☒ City KAUKAUNA	3/27/'11	Em Pho

Certification of Circulator

I, Jayson Nelson (name of circulator), (certify):

I reside at N350 Breezewood Dr 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.

March / 30 / 2011 (date)

(signature of circulator)

Page No. #3120

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. Clarice Christopherson	Clarice Christopherson	208 W. 17th St Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Email / Phone
2. Kao Xiong	[illegible]	300 W. 17th St, Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Email / Phone
3. Ronald Wenninger	Ronald Wenninger	1724 Glenview Ave Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Email / Phone
4. Jean Wenninger	Jean Wenninger	1724 Glenview Ave Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/27/'11	Email / Phone
5. Dawn Stone	Dawn Stone	103 W. Henry St Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	/ /'11 3 27	Email / Phone
6. WARREN KOHNS	Warren Kohns	1715 Main ave Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	/ /'11 3 27	Email / Phone
7. William D Kavajecz	[illegible]	1701 Main Ave Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	/ /'11 3 27	Email / Phone
8. DAVE SCHMITT	[illegible]	1611 MAIN KAU. WI 54130	☐ Town ☐ Village ☒ City Kaukauna	/ /'11 3 27	Email / Phone
9. Jeff Meisenhelder	Jeff Meisenhelder	155 Grant St Kau, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/4/'11	Email / Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone

Certification of Circulator

I, JAYSON Nelson (name of circulator), (certify):

I reside at 1330 Breezewood Dr 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 / 04 / 2011 (date)

[illegible] (signature of circulator)

Page No. #3421

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. Ann Van Den Elzen	Ann Van Den Elzen	1015 Helena Ave De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4 / 18 / '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, Francine Cook (name of circulator), (certify):

I reside at 3416 Park Ridge Ave 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 / 18 / 2011 (date)

Francine Cook (signature of circulator)

Page No. #3422

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. CONSTANCE HASSETT	Constance Hassett	938 Hickory de pere, WI 54115	☐ Town ☐ Village ☑ City Depere	4 /14/'11	Emai Phon
2. David Poister	David Poister	867 W. St Francis Road DePere, WI	☐ Town ☐ Village ☑ City DePere	4 /14/'11	Emai Phon
3. ELAINE HOLLOWAY	Elaine Holloway	842 E. St. Matthew DePere, wi	☐ Town ☐ Village ☑ City Depere	4/14/11 / /'11	Ema Phon
4. Cyndie Rice	Cyndie Rice	223 E. 9th St Kaukauna WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4 /16/'11	Ema Phor
5. MaryKay Rice	MaryKay Rice	223 E. 9th St Kaukauna WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4 /16 / /'11	Ema Phor
6. Bobbye Bolton	Bobbye Bolton	914 Quinney Ave Kaukauna WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Phor
7. EUGENE JENKINS	Eugene Jenkins	916 METOXEN AVE KAUKAUNA 54130	☐ Town ☐ Village ☑ City KAUKAUNA	4/16/'11	Ema Phor
8. Jeanna Rice	Jeanna M. Rice	908 Metoxen Ave Kaukauna 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Phor
9. JOHN LONG	John Long	904 METOXEN AVE KAUKAUNA	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Phor
10. Carolyn Harvey	Carolyn Harvey	900 Metoxen Ave. Kaukauna, WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4-16/'11	Ema Phor

Certification of Circulator

I, Jerald R Jakl (name of circulator), (certify):

I reside at 13926 Hickory Grove Road Marbel WI 54227 (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 / 18 / 2011 (date)

Jerald R Jakl (signature of circulator)

Page No. #3423

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. Eva Nettekoven	Eva Nettekoven	313 E 9th St Kaukauna WI	☐ Town ☐ Village ☑ City Kaukauna	4 / 17 / '11	Email Phone
2. Michelle Corbeille	Michelle Corbeille	911 Metoxen Ave Kaukauna, WI 54130	☐ Town ☐ Village ☑ City Kaukauna	/ / '11 4 / 17	Email Phone
3. Patrick Jenkins	Pat Jenkins	916 Metoxen Ave Kaukauna, WI 54130	☐ Town ☐ Village ☑ City Kaukauna	/ / '11 4/17	Email Phone
4. Amanda Martaus	Amanda Martaus	811 Spring st. Kaukauna Wi 54130	☐ Town ☐ Village ☑ City Kaukauna	/ / '11 4 / 17	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, Jerald R JAKL (name of circulator), (certify):

I reside at 13926 Hickory Grove Road Marbel WI 54227 (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 / 18 / 2011 (date)

Jerald R Jakl (signature of circulator)

Page No. #3424

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. Renee LaGaisse	Renee L LaGaisse	811 1/2 Spring St. Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Ema Phor
2. Michelle Katz	Michelle Katz	821 Spring St Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Ema Phor
3. Keith Zieht	Keith Zieht	1208 W Humox St Kaukauna 54130	☐ Town ☐ Village ☒ City Kau	4/16/'11	Ema Phor
4. Anne Van Heuklen	Anne Van Heuklen	1301 Henry St Kaukauna 54130	☐ Town ☐ Village ☒ City Kau	4/16/'11	Ema Phor
5. Colleen Kobs	Colleen M Kobs	1317 Buchanan K	☐ Town ☒ Village ☐ City Kaukauna	4/16/'11 4-16-11	Ema Phor
6. ~~Charles~~	~~Charles~~		☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
7. CHARLIE Smith	Charlie Smith	1330 Buchan Rd Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4/16/'11	Ema Phor
8. Abby Smith	Abby Smith	807 Desnoyer St Kaukauna WI 54130	☐ Town ☐ Village ☐ City Kaukauna	4/16/'11	Ema Phor
9. MARY LEE SMITH	Mary Lee Smith	1330 Buchanan R Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Ema Phor
10. Aaron Kobs	Aaron Kobs	1317 Buchanan Rd Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Ema Phor

Certification of Circulator

I, Jerald R. Jakl, (certify):
(name of circulator)

I reside at 13926 Hickory Grove Road Maribel WI 54227
(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 / 18 / 2011
(date)

Jerald R Jakl
(signature of circulator)

Page No. #3125

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. Doug Smith	Douglas M Smith	1330 Buchanan Rd Kaukauna WI	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
2. Jim Van Stiphout	Jim Van [illegible]	1300 Buchanan Rd Kaukauna	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
3. Phyllis Steil	Phyllis Steil	1100 Buchanan Rd Kaukauna	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
4. Jim Steil	Jim Steil	1100 Buchanan Rd Kaukauna 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
5. Jacqueline Loose	Jacqueline Loose	1076 Buchanan Rd Kaukauna 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
6. Michelle Pohlman	Michelle Pohlman	991 Buchanan Rd Kaukauna WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
7. Dylan Kitzman	Dylan Kitzman	1609 blue bird Ln Kaukauna 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
8. Craig Coffey	Craig Coffey	1308 Bluebird Ct Kaukauna WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
9. Scott Basgard	[illegible]	1325 BLUEBIRD CT KAUKAUNA WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4/16/'11	Ema Pho
10. Josh Dorphal	Josh Dorphal	1324 Bluebird ct Kaukauna WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4/17/'11	Ema Pho

Certification of Circulator

I, Jerald R. Jakh, (certify):
(name of circulator)

I reside at 13926 Hickory Grove Road Maribel, WI 54227
(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 / 18 / 2011
(date)

Jerald R. Jakh
(signature of circulator)

Page No. #3426

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. WAYNE CARLE	Wayne Carle	840 WILLIAM CHARLES CT APT 6	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
2. Tom Penegor	Tom Penegor	840 William Charles ct. #3 Green Bay	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
3. Leah Hess	Leah K Hess	840 William Charles Ct #3 Green Bay, WI	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
4. Jean Barnes	Jean A Barnes	840 Wm Charles Ct #3 Green Bay Wi	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
5. Margaret Byers ~~Margaret Byers~~	Margaret Byers	824 William Charles #3 Green Bay, WI	☐ Town ☒ Village ☐ City Ashwaubenon	/ /'11 4-18-'11	Ema Pho
6. Kyle Mader	K Mader	817 William Charles Green Bay WI	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
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, Beth Gridley (name of circulator), (certify):

I reside at 807 Colonial Avenue, 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 / 18 / 2011
(date)

Beth Gridley
(signature of circulator)

Page No. #3427

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. DARREN FLEMING SR.	Darren L Fleming	2111 CARSTENSEN LN	☐ Town ☒ Village ☐ City Ashwaubenon	4-18-11	Ema Pho
2. Darren Fleming JR.	Darren Fleming	2111 carstensen Ln.	☐ Town ☒ Village ☐ City Ashwaubenon	4-18-11	Ema Pho
3. Julian Rodriguez	[illegible]	2108 Carstensen Apt B LN	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
4. Tamara S Blake	Tamara S Blake	2108 Carstensen Lyf	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
5. Heidi D. Sylvan	Heidi D. Sylvan	1316 Alice Dr. #L. Green Bay, WI 54304	☐ Town ☒ Village ☒ City Ashwaubenon	4/18/'11	Ema Pho
6. MARCUS WILLIAMS	[illegible]	1319 MORRIS AVE APT #7 GREEN BAY, WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
7. Krysta Selbig	Krysta Selbig	1319 Morris Ave #7 Green Bay WI 54304	☐ Town ☒ Village ☒ City Ashwaubenon	4/18/'11	Ema Pho
8. Merlinda Johannie	[illegible]	1319 Morris Ave #7 Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
9. Traci Schanardore	[illegible]	2131 S. Oneida St. Green Bay, WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho
10. Tameka Baker	Tameka Baker	850 Morris A	☐ Town ☒ Village ☐ City Ashwaubenon	4/18/'11	Ema Pho

Certification of Circulator

I, Beth Gridley (name of circulator), (certify):

I reside at 807 Colonial Ave, 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 / 18 / 2011 (date)

Beth Gridley (signature of circulator)

Page No. #3428

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. Judith DuBois	Judy DuBois	2609 Indian Hill Dr Green Bay, WI 54313	☐ Town ☐ Village ☒ City Green Bay	4 / 9 / '11	Ema Phon
2. Tracey Mayo	Tracey L Mayo	2689 Indian Hill Dr Green Bay WI 54313	☐ Town ☐ Village ☒ City Green Bay	4 / 9 / '11	Ema Phon
3. Kathryn Kuronski	[illegible]	2633 Shady Park GB, WI 54313	☐ Town ☐ Village ☒ City GB	4 / 9 / '11	Ema Phon
4. William Baker	[illegible]	2596 Tullman Lane G Bay WI 54313	☐ Town ☐ Village ☐ City G B	4 / 9 / '11	Ema Phon
5. Jason Jaworski	[illegible]	2564 N. Tullman Ln Green Bay, WI 54313	☐ Town ☐ Village ☒ City Green Bay	/ / '11 4-9	Ema Phon
6. Linda Miller	Linda Miller	2579 N. Tullman GB WI 54303	☐ Town ☐ Village ☐ City Green Bay	4 / 9 / '11	Ema Pho
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, Allison E. Shaw (name of circulator), (certify):

I reside at 467 N. 5th Place, Sturgeon Bay, WI 54235
(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 / 09 / 2011
(date)

Allison E Shaw
(signature of circulator)

Page No. #3429

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 Leidel	David Leidel	954 Pennings Ave	☐ Town ☐ Village ☐ City Depere	/ / '11 4-18-11	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, EVAN KORSHAVN (name of circulator), (certify):

I reside at 3732 Libal 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 / 16 / 2011 (date)

E Korsh (signature of circulator)

Page No. #3430

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. ELIZABETH SCHROEDER	Elizabeth Schroeder	1044 VERONICA LN	☐ Town ☐ Village ☒ City DEPERE	4 / 18 / '11	Er Ph
2. Mary J. Miller	Mary J. Miller	939 Lee Ave	☐ Town ☐ Village ☒ City DePere	4 / 18 / '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, Sara E Ramaker (name of circulator), (certify):

I reside at 2545 Oakwood Ave 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 / 18 / 2011 (date)

Sara E Ramaker (signature of circulator)

Page No. #3131

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 Plog	Richard J Plog	1110 WOLTWOOD Dr.	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Ema Phor
2. AVA SOHANI-ABID	Ava S Abid	1291 CARMEN Ct.	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Ema Phor
3.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
4.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
5.			☐ Town ☐ Village ☐ City	/ /'11	Ema 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, Emily Kitchin (name of circulator), (certify):

I reside at 3446 S. 15 ST Milwaukee (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 / 18 / 2011 (date) Emily Kitchin (signature of circulator)

Page No. #3432

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. Yvette Grossbier	Yvette Grossbier	952 ST Joseph ST DePere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Em Pho
2. CARMA JEAN HANSEN Carma Jean Hansen	Carma Jean Hansen	577 St. MARY'S st DE PERE, Wis	☐ Town ☐ Village ☒ City DE PERE, WIS	4-18'11	Em Pho
3. Patty Davis	Patty Davis	801 St. Mary St. DePere, WI. 54115	☐ Town ☐ Village ☒ City DEPERE, WI	4/18/'11	Em Pho
4. Robert C Davis	Robert C Davis	801 St Mary's ST DePere WI	☐ Town ☐ Village ☒ City DEPERE, WI	4/18/'11	Em Pho
5. June Ashford	June Ashford	1304 Loweds DePere WI 54115	☐ Town ☐ Village ☒ City DePere WI	/'11 4/18	Em Pho
6. Kathleen Soncrant	K Soncrant	1120 Aldrin ST De Pere WI 54115	☐ Town ☐ Village ☒ City DePere WI	4/18/'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, 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 8.12.13(3)(a), Wis. Stats.

04 / 18 / 2011 (date)

Judith A. Heidner (signature of circulator)

Page No. #3433

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. Sarah Fullmer	Sarah Fullmer	430 Suburban Dr. DePere WI 54115	☐ Town ☐ Village ☒ City	04/18/'11	Em Pho
2. Lisa Elsner	Lisa Elsner	692 Suburban Dr DePere, WI 54115	☐ Town ☐ Village ☒ City	04/18/'11	Em Pho
3. Melanie Reince	Melanie Reince	1021 Helena St DePere WI 54115	☐ Town ☐ Village ☒ City	4/18/'11	Em Pho
4. Dave VanDenElzen	Dave VanDenElzen	1015 Helena ST DePere WIS 54115	☐ Town ☐ Village ☒ City	4/18/'11	Em Pho
5. Kathleen VanDenElzen	Kathleen VanDenElzen	1015 Helena DePere, WI 54115	☐ Town ☐ Village ☒ City	/ /'11 4 18	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, Melanie Lasee (name of circulator), (certify):

I reside at 830 Spring Hills Ct, DePere, 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 / 18 / 2011 (date)

Melanie Lasee (signature of circulator)

Page No. #3434

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. Kari Klemme	[signature]	5853 Oak Orchard Rd. Abrams, WI 54101	☒ Town ☐ Village ☐ City Abrams	3/15/'11	Ema Pho
2. Vickie Magee	[signature]	7446 Springside Coleman, WI 54112	☒ Town ☐ Village ☐ City Brazeau	3/15/'11	Ema Pho
3. Shelly Meisner	Shelly Meisner	1917 Andraya Lane DePere, WI 54115	☒ Town ☐ Village ☐ City Lawrence	3/17/'11	Ema Pho
4. Kayla Walechka	Kayla Walechka	233 S. Main St. Oconto Falls, WI 54154	☐ Town ☐ Village ☑ City Oconto Falls	3/17/'11	Ema Pho
5.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
6.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
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, Neil Klemme (name of circulator), (certify):

I reside at 5853 Oak Orchard Rd. Town of Abrams (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.

March / 26 / 2011 (date)

[signature] (signature of circulator)

Page No. #3435

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. Lindsay L. Jentz	Lindsay L. Jentz	W6435 Quarry Road Appleton, WI 54913	☒ Town ☐ Village ☐ City Ellington	03/16/'11	Email jer Phone (9
2. John W Griesbach	John W Griesbach	W7260 Grandview Rd Hortonville WI 54944	☒ Town ☐ Village ☐ City Ellington	3/19/'11	Email jnb Phone 9
3. JULIE J. GRIESBACH	Julie Griesbach	W7260 GRANDVIEW RD HORTONVILLE, WI 54944	☒ Town ☐ Village ☐ City ELLINGTON	3/19/'11	Email JNB Phone 92
4. Ranjeeta	Ranjeeta	W6435 Quarry Rd Appleton, WI 54913	☒ Town ☐ Village ☐ City Ellington	3/27/'11	Email pmj Phone (9
5. Mark Jentz	Mark Jentz	6435 Quarry Rd Appleton WI 54913	☒ Town ☐ Village ☐ City Ellington	3 27 / '11	Email mj Phone 9
6. LARRY SCHROEDER	Larry Schroeder	W6640 Wege RD Hortonville WI 54944	☒ Town ☐ Village ☐ City Ellington	3 07 / '11	Email schr Phone 920-
7. NANCY SCHROEDER	Nancy Schroeder	W6640 Wege Rd Hortonville WI 54944	☒ Town ☐ Village ☐ City ELLINGTON	3/29 / '11	Email Schroed Phone 920-
8. Phyllis Manning	Phyllis Manning	1340 GENEVA RD #21 MENASHA, WI 54952	☐ Town ☐ Village ☒ City MENASHA	4/02/'11	Email Phone ~~920~~
9. Pat Pohlman	Pat Pohlman	1340 Geneva Rd #21 Menasha, WI 54952	☐ Town ☐ Village ☒ City Menasha	4/2/'11	Email n/a Phone
10. Heidi Mauritz	Heidi Mauritz	W4571 Ferry St New London WI 54961	☒ Town ☐ Village ☐ City Mukwa	4/12/'11	Email Phone 920

Certification of Circulator

I, Chris M. Jentz (name of circulator), (certify):

I reside at 1101 Allison Dr. Neenah, WI 54956 Town of Menasha (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)

Chris M Jentz (signature of circulator)

Page No. # 3436

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 L. Tate	Jennifer L Tate	N8699 Cty Rd XX Bear Creek, WI 54922	☒ Town ☐ Village ☐ City	3 /23/ '11	Em Pho
2. Scott D. Tate	Scott D. Tate	N8699 Cty Rd XX Bear Creek, WI 54922	☒ Town ☐ Village ☐ City	3 /23/ '11	Em Pho
3. Debra Paul	Debra Paul	N8765 Cty XX Bear Creek WI 54922	☒ Town ☐ Village ☐ City	3 /24/ '11	Em Pho
4. Garry Paul	Garry Paul	N8765 CTY XX Bear Creek WI	☒ Town ☐ Village ☐ City	3 /24/ '11	Em Pho
5. Brent Dilge	Brent Dilge	N8765 Cty XX 54922 Bear Creek, WI 54922	☒ Town ☐ Village ☐ City	4 /2/ '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, Wendy S. Sperberg (name of circulator), (certify):

I reside at W10538 Valley View, Shawano, WI 54166 (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) Wendy S. Sperberg (signature of circulator)

Page No. #3457

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 firs no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. DAVID R. PELOW	David R. Pelow	112 W. CEDAR ST.	☐ Town ☐ Village ☒ City GILLETT, WI	3/16/'11	Email DAVID Phone
2. Kathleen L Pelow	Kathleen L Pelow	112 W. Cedar St	☐ Town ☐ Village ☒ City Gillett, WI	3/16/'11	Email Phone
3. Dawn. R. Giese	Dawn R. Giese	28 Cherry Ct	☐ Town ☐ Village ☒ City Shawano, WI	3/19/'11	Email Phone
4. April Black	April Black	N5837 Lalle Dr	☒ Town ☐ Village ☐ City Wescott ~~Shawano~~	3/22/'11	Email Phone
5. Rachelle Karls	Rachelle Karls	5785 Hwy 22 W.	☒ Town ☐ Village ☐ City Gillett	4/2/'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, DAVID R. PELOW (name of circulator), (certify):

I reside at 112 W. CEDAR ST., GILLETT, WI 54124 (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)

David R. Pelow (signature of circulator)

Page No. #3428

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. John Deffering	John Deffering	42 E Quincy St New London WI	☒ Town ☐ Village ☐ City	03/26/'11	Email Phone
2. Kelly Collum			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
3. KELLY COLLUM	Kelly Collum	667 FAIRVIEW DE PERE, WI	☒ Town ☐ Village ☐ City De Pere	3/30/'11	Email Phone
4. GARY BAZILE	Gary Bazile	Centerville	☒ Town ☐ Village ☐ City	4/1/'11	Email Phone
5. JANICE DEFFERING	Janice Deffering	N6657 State RD 187 Shiocton, 54170	☐ Town ☒ Village ☐ City Shiocton	/ /'11 5/4/11	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, Becky Rickel (name of circulator), (certify):

I reside at W8781 Old 54 RD Shiocton WI 54170 (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 / April / 2011 (date)

Becky Rickel (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. Becky Rickel	Becky Rickel	W8781 Old 54 RD Shiocton W 54170	☒ Town ☐ Village ☐ City Liberty	03/08/'11	Email Phone
2. Kerry L Adams	Kerry L Adams	W7706 Railroad Shiocton, WI 54170	☐ Town ☒ Village ☐ City Shiocton	03/08/'11	Email Phone
3. Jody Fredrick	Jody Fredrick	N7004 LaMarche Rd. Shiocton, WI. 54170	☒ Town ☐ Village ☐ City Bovina	03/09/'11	Email Phone
4. John J. Johnson	John J. Johnson	N6198 Stone Bridge Rd Shiocton WI 54170	☒ Town ☐ Village ☐ City Bovina	03/14/'11	Email Phone
5. Karen R. Johnson	Karen R. Johnson	N6198 Stone Bridge Rd. Shiocton, WI 54170	☒ Town ☐ Village ☐ City Bovina	03/14/'11	Email Phone
6. Victor Wawiorka Jr.	Victor Wawiorka	N5760 St. Hwy. 187 Shiocton WI 54170	☐ Town ☒ Village ☐ City Shiocton	03/15/'11	Email Phone
7. VICTOR WAWIORKA Jr. Victor Wawiorka	Victor Wawiorka	N5761 Hwy 76 Shiocton WI 54170	☐ Town ☒ Village ☐ City SHIOCTON	3/15/'11	Email Phone
8. VIRGINIA WAWIORKA	Virginia Wawiorka	N5761 Hwy 76 Shiocton WI 54170	☐ Town ☒ Village ☐ City SHIOCTON	3/15/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Becky Rickel (certify):
(name of circulator)

I reside at W8781 Old 54 RD Shiocton WI 54170
(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) Becky Rickel (signature of circulator)

Page No. #440

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. John Lammers	John Lammers	W8502 Old 54 Rd Shiocton, Wi 54170	☐ Town ☐ Village ☒ City Shiocton	3/15/'11	Email JU Phone
2. WANDA Lammers	Wanda Lammers	W 8502 OLD 54 Rd	☐ Town ☐ Village ☒ City SHiocton	3 15/'11	Email Phone
3. KEVIN J. KEUNE	Kevin J. Keune	W8787 OLD 54 ROAD SHIOCTON, WI 54170	☒ Town ☐ Village ☐ City LIBERTY	3 17/'11	Email PLAN Phone 92
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, Becky Rickel (name of circulator), (certify):

I reside at W8787 Old 54 RD Shiocton WI 54170 (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 / March / 2011 (date)

Becky Rickel (signature of circulator)

Page No. #344

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. Tammy Free	Tammy Free	N5464 State Rd 76	☐ Town ☒ Village ☐ City Shiocton	3/31/'11	Email / Phone
2. Tom Knorr	Tom Knorr	N5644 STATE RD 187	☐ Town ☒ Village ☐ City SHIOCTON	3 31/'11	Email / Phone
3. EARL CONRADT	Earl Conradt	W7738 STATE Rd 54	☐ Town ☒ Village ☐ City Shiocton	4/1/'11	Email / Phone
4. Nancy Brownson Nancy Brownson	Nancy Brownson	W7739 Pine St.	☐ Town ☒ Village ☐ City Shiocton	4/8/'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, Becky Rickel (name of circulator), (certify).

I reside at W8787 Old 54 RD Shiocton WI 54170
(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.

11 / April / 2011 (date)

Becky Rickel (signature of circulator)

Page No. #3442

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. Bernard Marcinkowski	Bernard Marcinkowski	532 Martin DePere	☐ Town ☐ Village ☑ City DePere	4/17/'11	Ema Pho
2. Carol Marcinkowski Carol Marcinkowski	Carol Marcinkowski	532 Martin, DePere	☐ Town ☐ Village ☑ City DePere	4/17/'11	Ema Pho
3. VERN LINDSLEY	Vern Lindsley	309 S 6th St	☐ Town ☐ Village ☑ City DePere WIS	4/17/'11	Ema Pho
4. MARY LOU LINDSLEY	Mary Lou Lindsley	309 S. 6th St.	☐ Town ☐ Village ☑ City DePere, WIS	4/17/'11	Ema Pho
5.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
6.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
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, MICHAEL T BORK (name of circulator), (certify):

I reside at 538 MARTIN ST 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.

04 / 18 / 2011 (date)

Michael T Bork (signature of circulator)

Page No. # 343

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 C STREBEL	Michael C Strebel	9342 N Kelly Lake Rd Suring, WI. 54174	☑ Town ☐ Village ☐ City Brazeau	/ / '11 4/17/11	Emai Phon
2. Judith A Strebel	Judith A Strebel	9342 N Kelly Lake Rd Suring, Wi 54174	☑ Town ☐ Village ☐ City Brazeau	/ / '11 4 17 11	Emai Phon
3. RONALD LAMBRECHT	Ronald Lambrecht	224 S. Harding Av. Gillett, WI. 54124	☐ Town ☐ Village ☑ City GILLETT	4 / 18 / '11	Ema Phor
4.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
5.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor
6.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
7.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
8.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
9.			☐ Town ☐ Village ☐ City	/ / '11	Em Phc
10.			☐ Town ☐ Village ☐ City	/ / '11	Em Phc

Certification of Circulator

I, Kathryn Taylor (name of circulator), (certify):

I reside at 201 S Park St Suring WI 54174
(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)

Kathryn Taylor (signature of circulator)

Page No. #444

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. William Finger	William Finger	1101 Pilgrim Way #15 Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	03/10/'11	Email Phone
2. Brian Vinson	[illegible]	53 Brookside St	☐ Town ☒ Village ☐ City Allouez	04/19/'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, Tony Vanderbloemen (name of circulator), (certify):

I reside at 2121 Newberry Ave Green Bay 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 / 19 / 2011 (date) Tony Vanderbloemen (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. Heather Blue	Heather Blue	1410 Crystal Lake Cir #6 Green Bay 54311	☐ Town ☐ Village ☐ City Bellevue	4 / 17 / '11	Ema Pho
2. Carly Schneider	Carly Schneider	1179 Trailwood Drive De Pere, WI 54115	☐ Town ☐ Village ☑ City De Pere	4 / 17 / '11	Ema Ca Pho
3.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
4.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
5.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
6.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
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, Beth Kirchman (name of circulator), (certify):

I reside at 714 S Michigan St DePere (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)

Beth Kirchman (signature of circulator)

Page No. #346

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. Daniel A Wiese	[illegible]	2121 Ironwood Dr	☐ Town ☐ Village ☒ City Green Bay	4 /16 /'11	Ema Pho
2. Amy Briggs	Amy Briggs	1126 Roland Lane #1	☐ Town ☐ Village ☒ City Green Bay	4 /16 /'11	Ema Pho
3. Samia Ali	[illegible]	1135 Moraine Way #8	☐ Town ☐ Village ☐ City Green Bay	04 /16 /'11	Ema Pho
4. Melissa Blom	Melissa Blom	W 3164 Shady Rd Seymour WI 54165	☒ Town ☐ Village ☐ City Maple Grove	4 /16 /'11	Ema Pho
5. Margaret A Towers	Margaret A Towers	2535 Golden Eagle Dr Green Bay WI	☐ Town ☒ Village ☐ City Howard.	4 16 / /'11	Ema Pho
6. Marc Fry	Marc Fry	1234 Rolla Lane Green Bay WI	☐ Town ☒ Village ☐ City Howard	4 /16 /'11	Ema Pho
7. JO N LEE	[illegible]	2543 TERRACE #N GREEN BAY, WI 54313	☐ Town ☒ Village ☐ City HOWARD	4/16 /'11	Ema Pho
8. Dawn Fry	Dawn Fry	1234 Rolla Ln. Green Bay, WI 54313	☐ Town ☒ Village ☐ City Howard	4 /16 /'11	Ema Pho
9. Kelly V. Schweda	Kelly Schweda	1320 Packerland Dr 15 Green Bay WI 54304	☐ Town ☐ Village ☒ City Green Bay	4 /19 /'11	Ema Pho
10.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho

Certification of Circulator

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

I reside at 2167 Southpoint Rd 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 / 19 / 2011 (date)

Sarah Oberneder (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. Rachael Bain	[illegible]	2198 Crary street	☐ Town ☒ Village ☐ City Ashwaubenon	4 / 19 / '11	Emai Phon
2. Bill Heesaker	Bill Heesaker	1146 Scheuring Rd	☐ Town ☐ Village ☒ City Depere	4 / 19 / '11	Emai Phon
3.			☐ Town ☐ Village ☐ City	/ / '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, Larry R Peters (name of circulator), (certify):

I reside at 1115 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.

04 / 19 / 2011 (date) Larry R Peters (signature of circulator)

Page No. # 348

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. Darlene Sorcic	Darlene Sorcic	461 Green Bay St #B Bonduel, WI 54107	☐ Town ☒ Village ☐ City Bonduel	4/16/'11	Ema Phor
2. CARL SORCIC	Carl Sorcic	461 GREENBAY ST #B BONDUVEL WIS 54107	☐ Town ☒ Village ☐ City Bonduel	4/16/'11	Ema Phor
3. TIMOTHY KEOHANE	Timothy Keohane	619 S. HAMLIN ST SHAWANO, WI 54166	☐ Town ☐ Village ☒ City Shawano	4-16-'11	Ema Phor
4. Sharon L. Baker	Sharon L. Baker	619 S. Hamlin Shawano, Wis. 54166	☐ Town ☐ Village ☒ City Shawano	4-16-'11	Ema Phor
5. Ann Hartleben	Ann Hartleben	119 Southview Crt Shawano, Wis. 54166	☐ Town ☐ Village ☒ City Shawano	/ /'11 4-16-11	Ema Phor
6. GLORY BUSSIAN	Glory Bussian	1111 Knoke St GRESHAM, WI 54128 1111 KNOKE ST. GRESHAM, WI 54128	☐ Town ☒ Village ☐ City Gresham	4/16/'11	Ema Pho 2
7. GERALD BUSSIAN	Gerald ~~Gerald~~ Bussian	1111 KNOKE GRESHAM, WIS 54128	☐ Town ☒ Village ☐ City Gresham	4/16/2011	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, Anne Ahrens (name of circulator), (certify):

I reside at 1420 S. Memorial 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 S.12.13(3)(a), Wis. Stats.

4 / 19 / 2011 (date) Anne Ahrens (signature of circulator)

Page No. # 349

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. PETER J CANZONERI	Peter J. Canzoneri	1480 ~~CEDA~~ CHICAGO ST	☐ Town ☐ Village ☒ City DE PERE WI 54115	4 / 17 / '11	Emai Phon
2.			☐ Town ☐ Village ☐ City	/ / '11	Emai Phon
3.			☐ Town ☐ Village ☒ City	/ / '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, Sharon Lambert Rademacher (name of circulator), (certify):

I reside at 2629 Sequoia Ln., Green Bay, WI 54313 (City of 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 / 19 / 2011 (date)

Sharon Lambert Rademacher (signature of circulator)

Page No. #3450

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. FRANK A. WOOD	Frank A. Wood	2130 25 Lost Dauphin Rd.	☐ Town ☐ Village ☒ City DePere	4/17/'11	Email / Phone
2. Pat Schoenwald	[signature]	1369 Circle Dr	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Email / Phone
3. Kris Hucek	Kris M. Hucek	1319 Oak Crest Dr.	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Email / Phone
4. Diane Mitchell	Diane Mitchell	1330 Ken Dr.	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Email / Phone
5. Tom Bradley	T.E. Bradley	1338 Ken Dr	☐ Town ☐ Village ☐ City Ashwaubenon	/ /'11 4.17	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 Rohde (name of circulator), (certify):

I reside at 2130 5N Lost Dauphin Rd. 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 / 17 / 2011 (date) Kathy Rohde (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. Timmy Monroe	Tammy Monroe	619 N Winnebago St De Pere	☐ Town ☐ Village ☑ City De Pere	4/18/'11	En Ph
2.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
3.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
4.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
5.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
6.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
7.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
8.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
9.			☐ Town ☐ Village ☐ City	/ / '11	En Ph
10.			☐ Town ☐ Village ☐ City	/ / '11	En Ph

Certification of Circulator

I, Dave Schmidt (name of circulator), (certify):

I reside at 6728 County T Whitelaw, WI 54247 Town of Franklin (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 / 19 / 2011 (date) (signature of circulator)

Page No. # 3452

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. [illegible]	[illegible]	1405	☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
2. GARY NIESEN	Gary Niesen	1405 Hendricks	☐ Town ☐ Village ☒ City Kaukauna	4/2/'11	Ema Pho
3. Stephanie Niesen	Stephanie Niesen	1405 Hendricks	☐ Town ☐ Village ☒ City Kaukauna	4/2/'11	Ema Pho
4. ROBERT KOHLOFF	[illegible]	1400 HENDRICKS AVE	☐ Town ☐ Village ☒ City KAUKAUNA	4/2/'11	Ema Pho
5. Stacy Hayden	Stacy Hayden	105 W 15th St	☐ Town ☐ Village ☒ City Kaukauna	/ /'11 4/2	Em Pho
6. Bill Kessler	William N. Kessler	116 W. 15 St	☐ Town ☐ Village ☒ City Kaukauna	4/2/'11	Em Pho
7. JACK DANIELS	Jack Daniels	112 W. 15 St.	☐ Town ☐ Village ☒ City Kaukauna	4/2/'11	Em Pho
8. James Busse	James Busse	1417 Crooks Ave	☐ Town ☐ Village ☒ City Kaukauna	4/2/'11	Em Pho
9. [illegible]	[illegible]	[illegible]	☐ Town ☐ Village ☐ City	/ /'11	Em Ph
10. Denise Vandevoort	Denise A. Vandevoort	1209 Crooks Av	☐ Town ☐ Village ☒ City Kaukauna	4/2/'11	Em Ph

Certification of Circulator

I, Richard L Smith (name of circulator), (certify)

I reside at 1215 W. Taylor St. 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.

4 / 2 / 2011 (date) [signature] (signature of circulator)

3453 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.

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. Sally Childs	Sally Childs	508 N Friedrich St Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 16 '11	Email Phone
2. Tracy Phelan	Tracy Phelan	1636 Frances St Apt 2 Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 16 / '11	Email Phone
3. Wendy Peterman	Wendy Peterman	521 Gertrude St Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 16 / '11	Email Phone
4. Cody Vaut	[illegible]	524 Gertrude St Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	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, RYAN Ferguson (name of circulator), (certify):

I reside at 2138 Olde Country Circle 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 / 16 / 2011 (date) (signature of circulator)

Page No. #454

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. Nancy VanDynHoven	Nancy Van Dyn Hoven	540 Willow Dr Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Ema Pho
2. Garret VanDrasek	Garret VanDr	564 Willow Drive Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Ema Pho
3. Sue VanVreede	Sue VanVreede	1509 Country Lane Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Ema Pho
4. Brian VanVreede	Brian VanVreede	1509 Country Lane Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Ema Pho
5. Tom Brick	Tom Brick	704 W Henry St Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Ema Pho
6. Cindy Brick	Cindy Brick	704 W Henry St Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Ema Pho
7. MARIANNE CLARK	Marianne Clark	1701 FIELDCREST DR KAUKAUNA	☐ Town ☐ Village ☒ City Kaukauna	4/20/'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, Diane Graves (name of circulator), (certify):

I reside at N513 Sonny Ct., 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.

4/20/11 / 2011 (date)

Diane Graves (signature of circulator)

Page No. # 3455

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. Mary Eisenreich	[signature]	2606 He-Nis-Ra Ln. Green Bay WI 54304	☐ Town ☐ Village ☒ City Green Bay	4/20/'11	Em Pho
2. Norman Stephenson	Norman Stephenson	2642 He Nis Ra Ln Green Bay WI 54304	☐ Town ☐ Village ☒ City Green Bay	4/20/'11	Em Pho
3. Rebecca Krisko	Rebecca L Krisko	2725 He Nis Ra Ln Green Bay WI 54304	☐ Town ☐ Village ☒ City Green Bay	4/20/'11	Em Pho
4. Kim DeStercke	[signature]	2605 West Point Rd Green Bay, WI 54304	☐ Town ☐ Village ☒ City Green Bay	4/20/'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, THOMAS A JAGIELO (name of circulator), (certify):

I reside at 1733 SUNNYSIDE LANE 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.

APRIL / 20 / 2011 (date) Thomas A Jagielo (signature of circulator)

Page No. #3456

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. Allison Fronsee	A Fronsee	1001 S. 7th St De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4 / 20 / '11	Ema Pho
2. LARRY Voight	[signature]	980 S. Seventh DePere Wis 54115	☐ Town ☐ Village ☒ City DePere	4 / 20 / '11	Ema Pho
3. Barbara A. Baumberger	B A Baumberger	926 S. 7th St DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4 / 20 / '11	Em Pho
4. Ryan Kuhn	[signature]	821 Helena ST	☐ Town ☐ Village ☒ City DePere	4 / 20 / '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, 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 / 20 / 2011 (date) [signature] (signature of circulator)

Page No. #3457

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. Tom Calaway	Tom J. Calaway	1007 Westwood Drive DePere, WI. 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Em Ph
2. Brenda Kelly	Brenda Kelly	1035 Stordeur Drive Green Bay 54313	☐ Town ☒ Village ☐ City Howard	4/20/'11	Em Ph
3. Robert Fiet	[illegible]	1018 Westwood Depere 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Em Ph
4. INGE KUSSOW	Inge Kussow	812 WESTWOOD DR DE PERE WI. 54115	☐ Town ☐ Village ☒ City DEPERE	4-20-11	Em Ph
5. Beverly Berken	Beverly Berken	1223 Monterey Tr De Pere DePere	☐ Town ☐ Village ☐ City DePere	4-20-11	Em Ph
6. Molly Carlson	[illegible]	1217 Monterey Tr DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Em Ph
7. Bob Berken	Bob Berken	1223 Monterey DePere 54115	☐ Town ☐ Village ☒ City DePere	4-20-11	Em Ph
8.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
9.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
10.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph

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.

04/20/11 (date) / 2011

Judith A. Heidner (signature of circulator)

Page No. #3458

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.

PRINT 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. Julie Rathe	Julie Rathe	1201 Hastings Green Bay WI 54301	☐ Town ☒ Village ☐ City Allouez	4/20/'11	En Ph
2. Jenny Nowak	Jnowak	1218 Driftwood 54115	☐ Town ☐ Village ☒ City Depere	4/20/'11	En Ph
3. Tim Hummel	Tim Hummel	1215 S. 7th St. Depere WI 54115	☐ Town ☐ Village ☒ City Depere	4/20/'11	En Ph
4. TRACY WAINRIGHT	Tracy D. Wainright	1221 6th St	☐ Town ☐ Village ☐ City DEPERE	4/20/'11	En Ph
5. Miranda Wahl	Miranda Wahl	1221 S. 6th st Depere WI	☐ Town ☐ Village ☐ City Depere	4/20/'11	En Ph
6. Ashanta Garcia	Ashanta Garcia	1221 S 6th St Depere WI 54115	☐ Town ☐ Village ☒ City Depere	4/20/'11	En Ph
7. May Calaway	Mary D. Calaway	1345 S 7th Depere WI 54115	☐ Town ☐ Village ☐ City De Pere	4-20/'11	En Ph
8. BETTY LEROY	Betty LeRoy	1254 S 7th St.	☐ Town ☐ Village ☒ City De Pere	4/20/'11	En Ph
9.			☐ Town ☐ Village ☐ City	/'11	En Ph
10.			☐ Town ☐ Village ☐ City	/'11	En Ph

PRINT

Certification of Circulator

I, EVAN KORSHAVN (name of circulator), (certify):

I reside at 3732 LEBAL 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 / 20 / 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. Dolores Schuh	DOLORES SCHUH	144 Garfield Kaukauna, WI	☐ Town ☐ Village ☒ City Kaukauna	4 / 20 '11	Ema Phor
2. [illegible]	Donnie Thomas	136 Hight st Kaukana WI	☐ Town ☐ Village ☒ City Kaukauna	4 / 20 '11	Ema Phor
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 Phor
10.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phor

Certification of Circulator

I, Tom Jadin (name of circulator), (certify):

I reside at 3207 Scarlet Oak Ln 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.

04 / 20 / 2011 (date)

Tom Jadin (signature of circulator)

Page No. # 34100

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. Scott Cook	Scott R Cook	2010 Terry Ln DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Ema Pho
2. Becky Cook	Becky A. Cook	2010 Terry Ln DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Ema Pho
3. Shawn Kaczrowski	Shawn Kaczrowski	2052 Terry Ln DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Ema Pho
4. Melinda Salm	Melinda Salm	2063 Terry Ln. DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Ema Pho
5. Nancy Matsen	Nancy Matsen	1150 Stevens St. DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Ema Pho
6.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
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, Dan Peterson, (certify):
(name of circulator)

I reside at 1925 Renaissance Ct 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 / 20 / 2011
(date)

Dan Pete
(signature of circulator)

Page No. #3461

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. Charlotte Skenandore	Charlotte Skenandore	2352 Cedar Ridge Green Bay WI 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4 /20/'11	Em Phc
2. Rudolph H. Ward	Rudolph H. Ward	2354 Cedar Ridge Green Bay WI 54313	☐ Town ☒ Village ☐ City Ashwaubenon	4 20/'11	Em Phc
3. George Parise	George Parise	2394 Center Ln Apt E Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4/20/'11	Em Phc
4. Sherry Wiesner	Sherry Wiesner	2410-B Center Lane G.B. WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4 20/'11	Em Phc
5. Barry Kevin	Barry Kevin	2412 'B' Center Lane Green Bay WI 54304	☐ Town ☒ Village ☐ City Ashwaubenon	4 20/'11	Em Phc
6.			☐ Town ☐ Village ☐ City	/ /'11	Em Phc
7.			☐ Town ☐ Village ☐ City	/ /'11	Em Phc
8.			☐ Town ☐ Village ☐ City	/ /'11	Em Phc
9.			☐ Town ☐ Village ☐ City	/ /'11	Em Phc
10.			☐ Town ☐ Village ☐ City	/ /'11	Em Phc

Certification of Circulator

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

I reside at 4570 Bodart 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 / 20 / 2011 (date)

(signature of circulator)

Page No. #2-62

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. Elizabeth O'Meara	Elizabeth O'Meara	1710 Patriot Way DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/18/'11	Em Ph
2. Daveylynne Schoolris	[illegible]	1714 Patriot Way De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Em Ph
3. Deborah Ehlinger	Deborah Ehlinger	1709 Reverre Tr. Depere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Em Ph
4. Linda Deprey	Linda Deprey	1732 76th Pl DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/18/'11	Em Ph
5. Crystal Klug	Crystal Klug	1737 76th Place DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/18/'11	Em Ph
6. Clinton Skenadore	[illegible]	935 Aliskwet Ct ONEIDA 54155	☐ Town ☒ Village ☐ City ONEIDA	4/18/'11	Em Ph
7.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
8.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
9.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
10.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph

Certification of Circulator

I, RICHARD J DALEY (name of circulator), (certify):

I reside at 3301 S CLAY ST ALLOUEZ 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.

APRIL / 20 / 2011 (date)

Richard J Daley (signature of circulator)

Page No. # 3403

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. Charlotte Zerbe	Charlotte Zerbe	W6265 Quarry Rd Appleton, WI	☒ Town ☐ Village ☐ City Ellington	4/17/11	E P
2. Lori Kuether	Lori Kuether	1825 Travis Lane Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 20 '11	E P
3. David Diedrich	David Diedrich	1836 Travis Lane Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 20 '11	E P
4. Laura Martinez	[illegible]	1900 Joshua St. Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 20 '11	E P
5. Jane Schmidt	Jane Schmidt	1833 Travis Lane Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4-20-11	E P
6.			☐ Town ☐ Village ☐ City	/ / '11	E P
7.			☐ Town ☐ Village ☐ City	/ / '11	E P
8.			☐ Town ☐ Village ☐ City	/ / '11	E P
9.			☐ Town ☐ Village ☐ City	/ / '11	E P
10.			☐ Town ☐ Village ☐ City	/ / '11	E P

Certification of Circulator

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

I reside at 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 S.12.13(3)(a), Wis. Stats.

4 / 20 / 2011
(date)

Karen L. Cleary
(signature of circulator)

Page No. #34A

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. Esther M. Huiting	Esther M. Huiting	4505 Creek Valley Lane Oneida, WI 54155	☐ Town ☑ Village ☐ City Hobart	4 / 20 / '11	E P
2. Richard T Huiting	Richard T. Huiting	#505 Creek Valley Lane Oneida, WI 54155	☐ Town ☑ Village ☐ City Hobart	4 / 20 / '11	E P
3.			☐ Town ☐ Village ☐ City	/ / '11	E P
4.			☐ Town ☐ Village ☐ City	/ / '11	E P
5.			☐ Town ☐ Village ☐ City	/ / '11	E P
6.			☐ Town ☐ Village ☐ City	/ / '11	E P
7.			☐ Town ☐ Village ☐ City	/ / '11	E P
8.			☐ Town ☐ Village ☐ City	/ / '11	E P
9.			☐ Town ☐ Village ☐ City	/ / '11	E P
10.			☐ Town ☐ Village ☐ City	/ / '11	E P

Certification of Circulator

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

I reside at 3446 S. 15 St. Milwaukee (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 / 20 / 2011 (date) Emily Kitchin (signature of circulator)

Page No. #3465

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. Mick Berg	Mick Berg	100 ½ W 4th St Kaukauna, WI. 54130	☐ Town ☑ Village ☐ City Kaukauna	4 /20/'11	Em Pho
2. Matt Wallace	Matt Wallace	653 Fern St Kaukauna	☐ Town ☐ Village ☐ City Kaukauna	4 /20/'11	Em Pho
3. Michael Evers	Michael Evers	651 Fern St Kaukauna	☐ Town ☐ Village ☐ City Kaukauna	4/20/'11	Em Pho
4. Anthony St. John	Anthony St. John	661 Fern St	☐ Town ☐ Village ☐ City Kaukauna	4 /20/'11	Em Pho
5. Chris McMorrow	Chris McMorrow	603 Joyce St Kaukauna	☐ Town ☐ Village ☑ City Kaukauna	4/20/'11	Em Pho
6. Donald Payton	Donald Payton	613 Joyce St. Kaukauna, WI	☐ Town ☐ Village ☑ City Kaukauna	4 /20/'11	Em Pho
7. Lindsey Stilfies	Lindsey Stilfies	711 Walter St. Kaukauna WI	☐ Town ☐ Village ☑ City Kaukauna	4 /20/'11	Em Pho
8. Christine Wetzel	Christine Wetzel	603 Gertrude St Kaukauna 54130	☐ Town ☐ Village ☑ City Kaukauna	4 /20/'11	Em Pho
9.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
10.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho

Certification of Circulator

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

I reside at 111 Hidden Ridges Way Combined Locks WI 54113 (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 / 20 / 2011 (date)

David T. Robbins (signature of circulator)

Page No. # 3466

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. Don Forgethe Jr	[illegible]	1126 Stevens St DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone
2. Randy Vogels	[illegible]	1951 Terry Ln DePere WI 54115.	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone
3. Debbie Vogels	Debbie Vogels	1951 Terry Ln. DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone
4. Cheryl Otten	Cheryl Otten	1952 Terry ln DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone
5. DALE WILLIAMS	Dale Williams	1946 TERRY LN. DEPERE, WI 54115	☐ Town ☐ Village ☒ City DEPERE	04/20/2011	Email Phone
6. KIMBERLY WILLIAMS	K Williams	1946 TERRY LN. DEPERE, WI 54115	☐ Town ☐ Village ☒ City DEPERE	04/20/2011	Email Phone
7. Michelle Schilawski	[illegible]	1964 Terry Ln De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/20/'11	Email Phone
8. Christine VandeHei-Sanders	[illegible]	1982 Terry Lane DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone
9. RANDY SANDERS	[illegible]	1982 Terry Lane DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone
10. EUGENE KRIEHN	Eugene Kriehn	1990 TERRY LN DEPERE WIS. 54115	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone

Certification of Circulator

I, Dan Peterson (name of circulator), (certify):

I reside at 1925 Renaissance Ct 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 / 20 / 2011 (date) [illegible] (signature of circulator)

Page No. #3467

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. DOLORES HURST	Dolores Hurst	212 W. 19th	☐ Town ☐ Village ☐ City Kaukauna	4-16-11	Emai Phon
2. Susan Rothlesberger	Susan Rothlesberger	1512 Sullivan Ave	☐ Town ☐ Village ☐ City Kaukauna	4/16/11	Emai Phon
3. Peter Nelson	[illegible]	1408 Sullivan Ave	☐ Town ☐ Village ☐ City Kaukauna	4/16/11	Emai Phon
4. James Hartlaw	[illegible]	910 Eden Ave	☐ Town ☐ Village ☑ City Kaukauna	4/17/11	Emai Phon
5. Trudy Vollmer	Trudy Vollmer	423 W. 8th St.	☐ Town ☐ Village ☐ City Kaukauna	4/17/11	Emai Phon
6. Laura VanDomden	Laura VanDomden	908 Eden Ave	☐ Town ☐ Village ☑ City Kaukauna	4/17/11	Emai Phon
7. Barbara Phelan	Barbara Phelan	617 W 10th St	☐ Town ☐ Village ☐ City Kaukauna	4/18/11	Emai Phon
8. JOHN PHELAN		617 W 10TH ST	☐ Town ☐ Village ☑ City KAUKAUNA	4/18/11	Emai Phon
9. JO VAN SCHYNDEL	Jo Van Schyndel	515 W 10th ST	☐ Town ☐ Village ☑ City KAUKAUNA	4/18/11	Emai Phon
10. Christina Perez	Christina Perez	703 W. 2nd St APT B	☐ Town ☐ Village ☐ City Kaukauna	4-18/11	Emai Phon

Certification of Circulator

I, Theodore M. Brown (name of circulator), (certify):

I reside at 1201 E. Wisconsin Little Chute 54140 (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.

4/18/2011 (date) Theodore M. Brown (signature of circulator)

Page No. 3468

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. Geoff Edwards	[illegible]	107 1/2 E 2nd St #5	☐ Town ☐ Village ☒ City Kaukauna	4/10/'11	Email Phone
2. SUSAN BERGERON	Susan Bergeron	1105 Desnoyer St	☐ Town ☐ Village ☒ City Kaukauna	4/10/'11	Email Phone
3. JUDITH ROST	Judith Rost	1209 Desnoyer	☐ Town ☐ Village ☒ City Kaukauna	4/10/'11	Email Phone
4. Richard Kremer	Richard Kremer	1209 Desnoyer	☐ Town ☐ Village ☒ City Kaukauna	4/10/'11	Email Phone
5. Wendy Kanka	[illegible]	1112 Desnoyer	☐ Town ☐ Village ☒ City Kaukauna	4/10/'11	Email Phone
6. JEROME NACHTWEY	Jerome Nachtwey	205 W. DIVISION	☐ Town ☐ Village ☒ City KAUKAUNA	4/17/'11	Email Phone
7. JoAnn Nachtwey	JoAnn Nachtwey	205 W Division St	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Email Phone
8. Kevin Otredae	Kevin Otredae	206 W. Division St	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Email Phone
9. Mark Vandevoort	Mark Vandevoort	601 Kaukauna ST	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Email Phone
10. DANA GEROW	Dana Gerow	234 TAYLOR St	☐ Town ☐ Village ☒ City Kaukauna	4/17/'11	Email Phone

Certification of Circulator

I, James R Bowman (name of circulator), (certify):

I reside at 701 Canterbury 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 S.12.13(3)(a), Wis. Stats.

4 / 18 / 2011 (date)

James R Bowman (signature of circulator)

Page No. # 2A(8)

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. Renee Wypiszinski	Renee Wypiszinski	201 Park St	☐ Town ☐ Village ☒ City Kaukauna	4 /10 /'11	Email Phone
2. Shelley Zierler	Shelley Zierler	801 Blackwell St.	☐ Town ☐ Village ☒ City Kaukauna	4 /10 /'11	Email Phone
3. Kay Verboomen	Kay L. Verboomen	807 Blackwell St	☐ Town ☐ Village ☒ City Kaukauna	4 /10 /'11	Email Phone
4. Mike VanRiper	Michael VanRiper	(Blackwell St) 819 Blackwell	☐ Town ☐ Village ☒ City (Kaukauna) Kaukauna	4 /10 /'11	Email Phone
5. Kathy Carnot	Kathy Carnot	712 Blackwell St	☐ Town ☐ Village ☒ City Kaukauna	4/10/11	Email Phone
6. Margaret Veldman	Margaret Veldman	(Desnoyer St) 505 Desnoyer St.	☐ Town ☐ Village ☒ City Kaukauna	4-10-11	Email Phone
7. LEROY VANENKEVORT	Leroy VanEnkevort	709 Desnoyer	☐ Town ☐ Village ☒ City Kaukauna	4 /10 /'11	Email Phone
8. Kyle Derus	Kyle Derus	710 DeSnoyer	☐ Town ☐ Village ☒ City Kaukauna	4/10/'11	Email Phone
9. Don Mohr	Don Mohr	113 W. Division	☐ Town ☐ Village ☒ City Kaukauna	4 /10 /'11	Email Phone
10. Debra Rockel	Debra Rockel	1101 Lawe St. Kaukauna	☐ Town ☐ Village ☒ City → Kaukauna	4 /10 /'11	Email Phone

Certification of Circulator

I, James R Bowman (name of circulator), (certify):

I reside at 701 Canterbury 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 S.12.13(3)(a), Wis. Stats.

4 / 18 / 2011 (date)

James R Bowman (signature of circulator)

Page No. #3470

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. BILL KENNEDY	[illegible]	146 WOODLAND COURT	☐ Town ☐ Village ☒ City KAUKAUNA	4/17/'11	Email Phone
2. Dan Vandenloop	[illegible]	(317 W. 13th St.) 317 W 13TH ST	☐ Town ☐ Village ☒ City KAUKAUNA	4-17 / / '11	Email Phone
3. Xiong Mona Vang	[illegible]	1424 Theka AVE	☐ Town ☐ Village ☒ City Kaukauna	4/17 / / '11	Email Phone
4. Dana Rosen	Dana Rosen	1313 Kenneth Avenue	☐ Town ☐ Village ☒ City Kaukauna	4/17 / / '11	Email Phone
5. (Kevin Fassbender) Kevin Fassbender	Kevin Fassbender	1405 Kenneth Ave	☐ Town ☐ Village ☒ City Kaukauna	4-17 / / '11	Email Phone
6. ABBI FASSBENDER	ABBI FASSBENDER	1405 Kenneth Ave Kaukauna WI	☐ Town ☐ Village ☒ City Kaukauna	4-17 / / '11	Email Phone
7. THERESA BUCHBERGER	Theresa Buchberger	1312 Kenneth Ave,	☐ Town ☐ Village ☒ City Kaukauna	4-17 / / '11	Email Phone
8. SCOTT VANDAHEN	Scott Van Dahen	1404 Glenview Ave (1404 Glenview Ave)	☐ Town ☐ Village ☒ City Kaukauna	4/17 / / '11	Email Phone
9. JASON BERGER	Jason Berger	1409 Glenview AVE	☐ Town ☐ Village ☒ City Kaukauna	4/17 / / '11	Email Phone
10. Barb Couillard	Barb Couillard	N3974 County Rd A	☒ Town Center ☐ Village ☐ City (Appleton is mailing address)	4/18 / / '11	Email Phone

Certification of Circulator

I, James R Bowman (name of circulator), (certify):

I reside at 701 Canterbury 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 S.12.13(3)(a), Wis. Stats.

4 / 19 / 2011 (date)

James R Bowman (signature of circulator)

Page No. # 3471

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. Sharon J. Kemp	Sharon J. Kemp	501 W. 10th St.	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Ema Phon 92
2. Karen Arnoldussen	Karen Arnoldussen	920 W. 10th St.	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Ema Phon
3. Ken Brown	[illegible]	920 W 10th	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Ema Phon
4. Krystal Nechodom	[illegible]	936 W 10th St	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Ema Phon
5. Jeremy Nechodom	[illegible]	300 Taylor St.	☐ Town ☐ Village ☐ City Kaukauna	4/18/'11	Ema Phon
6. Larry McMains	[illegible]	943 W. 10th st	☐ Town ☐ Village ☐ City Kaukauna	4/18/'11	Ema Phon
7. Sandie Dietrich	Sandie Dietrich	1001 W. 10th St	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Ema Phon
8. Lauann Mueller	Lauann Mueller	940 Shamrock Ct	☐ Town ☐ Village ☐ City Kaukauna	4/18/'11	Ema Phon
9. Brian Agen	Brian K Agen	924 Shamrock Ct	☐ Town ☐ Village ☐ City Kaukauna	4/18/'11	Ema Phon
10. Sherry Agen	Sherry Agen	924 Shamrock Ct. Kaukauna	☐ Town ☐ Village ☒ City Kaukauna	4/18/'11	Ema Pho

Certification of Circulator

I, Theodore M Brown (name of circulator), (certify):

I reside at 1201 E. Wisconsin Little Chute, WI 54140 (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.

4/18/2011 (date) Theodore M. Brown (signature of circulator)

Page No. #3472

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. MARIA Castillo	[illegible]	803 Fox River Dr DePere	☐ Town ☐ Village ☐ City DePere	/ / '11 4 16 11	Ema Pho
2. GAIL Schroder	Gail Schroder	2672 Whitegate TR DePere	☐ Town ☐ Village ☐ City DePere	/ / '11 4-16-11	Ema Pho
3. Cyndi Bruehl	Cyndi Bruehl	715 N. Wisconsin St DePere	☐ Town ☐ Village ☒ City DePere	/ / '11 4/17/11	Ema Pho
4.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
5.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
6.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho
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, Lisa Tetzloff (name of circulator), (certify):

I reside at 2163 Dickinson Rd. #8 DePere WI 54115 Ledgeview (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 / 20 / 2011 (date)

Lisa M Tetzloff (signature of circulator)

Page No. #3A-73

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. Mary Ann Sausen	Mary Ann Sausen	1371 Fernando	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Emai Phon
2. Gerald Sausen	Gerald Sausen	1371 Fernando Dr. De Pere WI	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Emai Phon
3. Kevin Hackes	Kevin Hackes	3621 Lost Lane De Pere, WI 54115	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Emai Phon
4. Aaron Lade	Aaron Lade	3562 Silverado Trail De Pere, WI 54115	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Emai Phon
5. Avo Noble	A. Noble	1199 Countryside De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Emai Phon
6. Jim Mueller	Jim Mueller	1500 Carole Ln Green Bay	☐ Town ☒ Village ☐ City Ashwaubenon	4/17/'11	Emai Phon
7. Sarah Rowe	Sarah Rowe	9316 Suburban Dr DePere, WI 54115	☐ Town ☐ Village ☒ City DePere	4/18/'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, Bob Chatt (name of circulator), (certify):

I reside at 1340 Fernando Dr., 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 / 20 / 2011 (date)

Bob Chatt (signature of circulator)

Page No. # 3474

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. Robert Wolsleger	Robert Wolsleger	923 3rd St.	☐ Town ☐ Village ☑ City De Pere	3/29/'11	Ema Phor
2. Karla Albers	Karla Albers	1058 Outward Ave	☐ Town ☐ Village ☐ City De Pere	3/30/'11	Ema Phor
3. MARY I DURHAM	Mary E I Durham	2060 W VISTA CIRCLE	☐ Town ☐ Village ☑ City DE PERE	3/31/'11	Ema Phor
4. Scott Suda	S. Suda	1746 Rainbow Ave	☐ Town ☐ Village ☑ City DePere	3/31/'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, Kelly A. Suda (name of circulator), (certify):

I reside at 1746 Rainbow Avenue 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.

03 / 31 / 2011 (date)

K A Suda (signature of circulator)

Page No. #3475

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. Mark Knapp	Mark Knapp	100 Grant Street	☐ Town ☐ Village ☒ City De Pere	3/22/'11	Email / Phone
2. Sienna Rauterkus	Sienna Rauterkus	N6365 Rods Ln	☒ Town ☐ Village ☐ City Washington	3/29/'11	Email / Phone
3. Devin Thomas	Devin Thomas	100 Grant Street	☐ Town ☐ Village ☒ City De Pere	3/29/'11	Email / Phone
4. Brittany Hattaway	Brittany Hattaway	100 Grant St.	☐ Town ☐ Village ☐ City DePere	4/16/'11	Email / Phone
5. Molly Maher	Molly Maher	100 Grant St	☐ Town ☐ Village ☒ City DePere	4/16/'11	Email / Phone
6. Liz Jolly	Elizabeth Jolly	700 Grant St	☐ Town ☐ Village ☒ City DePere	4/16/'11	Email / Phone
7. Carolyn Silverberg	Carolyn Silverberg	100 Grant St	☐ Town ☐ Village ☒ City DePere	4/18/'11	Email / Phone
8. Jake DeMarais	Jake DeMarais	100 Grant street	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Email / Phone
9. Noelle Gray	Emily Noelle Gray	100 Grant	☐ Town ☐ Village ☒ City DePere	4/18/'11	Email / Phone
10. Alicia Scrivner	Alicia Scrivner	100 Grant St	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Email / Phone

Certification of Circulator

I, Molly Maher (name of circulator), (certify):

I reside at 420 4th St De Pere, 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 / 19 / 2011 (date)

Molly Maher (signature of circulator)

Page No. #3476

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. Brigid O'Brien	Brigid O'Brien	100 Grant street	☐ Town ☐ Village ☒ City De Pere	4/8/'11	Email Phone
2. SAM BONIN	Samantha Bonin	100 Grant street	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Email Phone
3. Alisa R. Christensen	Alisa R. Christensen	100 GRANT St	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Email Phone
4. Kristen Kotil	Kristen Kotil	100 Grant St	☐ Town ☐ Village ☒ City De Pere	4/18/'11	Email Phone
5. Molly Maher	Molly Maher	100 Grant St	☐ Town ☐ Village ☒ City De Pere	4/19/'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, 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 / 19 / 2011 (date)

(signature of circulator)

Page No. # 3477

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. Seth Nelson	Seth Nelson	W10531 Roloff Rd. New London WI 54961	☒ Town ☐ Village ☐ City Maple Creek	03/19/'11	Email S Phone
2. Abe Nelson	Abe Nelson	W10531 Roloff Rd. New London, WI 54961	☒ Town ☐ Village ☐ City Maple Creek	04/02/'11	Email Phone
3. Don			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4. ~~Don Nelson~~			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5. DON NELSON	Don Nelson	W10531 ROLOFF RD NEW LONDON WI 54961	☒ Town ☐ Village ☐ City Maple Creek	4/02/11	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, DON NELSON (name of circulator), (certify):

I reside at W10531 ROLOFF RD NEW LONDON, 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 / 2 20 / 2011 (date)

Donald A Nelson (signature of circulator)

Page No. #3478

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 J. Rickert	Michael J. Rickert	W1991 Van's Ct. Kaukauna, WI. 54130	☒ Town ☐ Village ☐ City of Freedom	3 / 29 / '11	Email Phone
2. Gregg Handt	Gregg Handt	W1804 Hwy. 54 Seymour 54165	☒ Town ☐ Village ☐ City Seymour	4 / 7 / '11	Email Phone
3. Todd Holtz	Todd Holtz	W2748 Autumn Blaze Trail Seymour 54165	☒ Town ☐ Village ☐ City Osborn	4 / 12 / '11	Email Phone
4. Kim Young	Kim J. Young	W478 Hillside Dr. DePere WI 54115	☒ Town ☐ Village ☐ City Oneida	4 / 13 / '11	Email Phone
5. JILL RICKERT	Jill Rickert	W1991 Van's Ct. Kaukauna, WI 54130	☒ Town ☐ Village ☐ City Freedom	4 / 13 / '11	Email Phone
6. Leo Reyes	[illegible]	104 S. Adam St Oconto Falls, WI 54154	☒ Town ☐ Village ☐ City Oconto Falls	4 / 15 / 2011	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 J. Rickert (name of circulator), (certify):

I reside at W1991 Van's Ct. 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.

4 / 18 / 2011 (date)

Michael J. Rickert (signature of circulator)

Page No. # 279

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. David A. Kroll	David A. Kroll	615 S. Michigan St. De Pere WI 54115	☐ Town ☐ Village ☒ City De Pere	03/06/'11	Em Ph
2. RONALD BERNDT	Ronald Berndt	1400 CORMIER ROAD GREEN BAY, WI 54313	☐ Town ☒ Village ☐ City ASHWAUBENON	03/08/'11	Em Ph
3.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph
4.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph
5.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph
6.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph
7.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph
8.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph
9.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph
10.			☐ Town ☐ Village ☐ City	/ / '11	Em Ph

Certification of Circulator

I, STEVE FOSTNER (name of circulator), (certify):

I reside at 3684 TIMBER TR 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.

03 / 09 / 2011 (date)

STEVE FOST (signature of circulator)

Page No. # 3480

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. John Emmel	John Emmel	1760 Juniper Green Bay	☐ Town ☐ Village ☒ City Green Bay	4 / 18 / '11
2. Heather Gauger	Heather Gauger	1819 August St. #6 Green Bay	☐ Town ☐ Village ☒ City Green Bay	4 / 18 / '11
3. JArrod Washington	Jarrod Washington	2679 Ravine Way Green Bay WI 54301	☐ Town ☒ Village ☐ City Allouez	4 / 18 / '11
4. Erika Morales	Erika Morales	2193 Bufflehead Ln Green Bay WI 54311	☒ Town ☒ Village ☐ City Green Bay	4 / 18 / '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, Marjory Yuenger (name of circulator), (certify):

I reside at 112 Garden Gate Ct 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/ / 20 / 2011
(date)
4/20/11

Marjory Yuenger
(signature of circulator)

Page No. # 3481

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. Christine Lemmers	Christine Lemmers	W5253 County Rd B Black Creek Wis	☒ Town ☐ Village ☐ City Black Creek	3/16/'11	Email Phone
2. Louis J Bruette	Louis Bruette	535 W. Pearl St Apt 1 Seymour WI 54165	☐ Town ☐ Village ☒ City SEYMOUR	3/21/'11	Email Phone
3. MARY RESOP	Mary Resop	535 W Pearl St Apt 1 Seymour, Wisconsin 54165	☐ Town ☐ Village ☒ City Seymour	3/21/'11	Email Phone
4. Rocene Skodinski	Rocene Skodinski	434 Henry St. Apt. 9 Seymour, WI. 54165	☐ Town ☐ Village ☒ City Seymour	3/21/'11	Email Phone
5. Ramon Skodinski	Ramon Skodinski	434 Henry St. Apt. 9 Seymour, WI. 54165	☐ Town ☐ Village ☒ City Seymour	3/21/'11	Email Phone
6. Robert G. Wettstein	Robert W. Wettstein	434 Henry ST. APT 16 Seymour, WI 54165	☐ Town ☐ Village ☒ City Seymour	3/21/'11	Email Phone
7. Mary C Wettstein	Mary C Wettstein	434 Henry St. #16 Seymour 54165	☐ Town ☐ Village ☒ City Seymour	3/21/'11	Email Phone
8. Andrew R. Lemmers	A Lemmers	801 W. Ann St. Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/21/'11	Email Phone
9. Cami Lemmers	Cami Lemmers	801 W. Ann St. Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/21/'11	Email Phone
10. Carol Klitzke	Carol Klitzke	506 S Main ST Apt 16 Black Creek WI 54016	☐ Town ☒ Village ☐ City Black Creek	3/22/'11	Email Phone

Certification of Circulator

I, Lisa Voelz (name of circulator), (certify):

I reside at N1791 Old 47 Rd, Bordwel — Town of Lessor (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 / 20 / 2011 (date)

Lisa Voelz (signature of circulator)

Page No. 2482

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. JOSEPH P. FERRERO SR	Joseph P. Ferrero Sr	W. 3824 Co. R. S. PULASKI WI. 54162	☒ Town ☐ Village ☐ City LESSOR	3/5/'11	Email Phone
2. June FERRERO	June Ferrero	W 3824 Co Rd S Pulaski WI 54162	☒ Town ☐ Village ☐ City Lessor	3/5/'11	Email Phone
3. DONNA Ferrero	Donna Ferrero	W3820 Cty RS Pulaski, WI 54162	☒ Town ☐ Village ☐ City Lessor	3/6/'11	Email Phone
4. JOE FERRERO JR.	Joe Ferrero Jr.	W3820 CTY RD S PULASKI WI 54162	☒ Town ☐ Village ☐ City LESSOR	3/6/'11	Email Phone
5. JESS Coisman	Jess Coisman	N1670 OLD 47 RD Pulaski, WI 54162	☒ Town ☐ Village ☐ City Lessor	3/10/'11	Email Phone
6. Laura Coisman	Laura Coisman	N1670 Old 47 Rd Pulaski, WI 54162	☒ Town ☐ Village ☐ City Lessor	3/10/'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, Lisa Voelz (name of circulator), (certify):

I reside at N1791 Old 47 Rd. — Town of Lessor (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 / 20 / 2011 (date)

Lisa Voelz (signature of circulator)

Page No. # 3483

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. Ashley VandeVoort	Ashley VandeVoort	W3105 Knapp Rd Seymour, WI 54165	☒ Town ☒ Village ☐ City Osborn	3 24/'11	Ema Phor
2. Abe Vosters	Ab Vosters	N1739 Maplecrest Freedom 54130	☒ Town ☐ Village ☐ City Freedom	3 23/'11	Ema Phor
3. Steven R. Markens	Steven R Markens	103 W. Mary St Black Creek 54106	☐ Town ☒ Village ☐ City Black Creek	3 28/'11	Ema Phor
4. Amy LuMaye	Amy LuMaye	N4457 Mayflower Rd Black Creek, WI 54106	☒ Town ☐ Village ☐ City Ellington	4 5/'11	Ema Phor
5. Richard LuMaye	Richard LuMaye	N4457 Mayflower Rd. Black Creek, Wi. 54106	☒ Town ☐ Village ☐ City Ellington	4 5 / /'11	Ema Phor
6. Brandon Krueger	Brandon Krueger	N3598 Hilltop Rd. Bonduel, WI 54107	☒ Town ☐ Village ☐ City Hartland	4 16/'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, Lisa Voelz (name of circulator), (certify):

I reside at N1791 CH 47 Rd. Town of Lessor (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 / 20 / 2011 (date)

Lisa Voelz (signature of circulator)

Page No. # 3484

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. Jennifer Gagan	Jennifer Gagan	436 Randall Ave. De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Ema Pho
2. Mark Sommerside	[illegible]	614 Randall Ave De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Ema Pho
3. Lil McKenna	Lil McKenna	702 Randall Ave DePere WI 54115	☐ Town ☐ Village ☒ City DePere	4-17-/ /'11	Ema Pho
4. Gina Rao	Gina Rao	709 Canberry Ct De Pere, WI 54115	☐ Town ☐ Village ☒ City De Pere	4/17/'11	Ema Pho
5. MARTY VANDENLANGENBERG	Marty VanDenLangenberg	W1664 Hwy 54 Seymour WI 54165	☒ Town ☐ Village ☐ City Oneida	4/18/'11	Ema Pho
6. Judy VanDenLangenberg	Judy VanDenLangenberg	W1664 Hwy 54 Seymour WI 54165	☒ Town ☐ Village ☐ City Oneida	4/19/'11	Ema Pho
7. Steve VanDenLangenberg	Steve VanDenLangenberg	W1664 HWY 54 Seymour WI 54165	☒ Town ☐ Village ☐ City Oneida	4/19/'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, Stacie Kaminski (name of circulator), (certify):

I reside at 2560 Zak Lane, Green Bay, WI S (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 / 20 / 2011 (date)

Stacie Kaminski (signature of circulator)

Page No. #3485

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. FRANK SMITH	Frank Smith	2221 S. Webster AVE Green Bay 54301	☐ Town ☑ Village ☐ City ALLOUEZ	4/20/'11	Emai Phon
2.			☐ Town ☐ Village ☐ City	/ / '11	Emai Phon
3.			☐ Town ☐ Village ☐ City	/ / '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, Jason Albertz (name of circulator), (certify):

I reside at 3740 Delahant St. 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 / 20 / 2011 (date)

Jason Albertz (signature of circulator)

Page No. # 3486

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. Lisa Viers-Mascolo	[illegible]	4444 Nakoma Trail	☐ Town ☒ Village ☐ City Hobart	4/19/'11	Em Pho
2. Joe Feldhausen	[illegible]	708 Nathan Drive DePere, WI 54115	☐ Town ☒ Village ☐ City Hobart	4/19/'11	Em Pho
3. Robin Loomans	Robin Loomans	9491 CNTY RD M SURING, WI 54174	☐ Town ☒ Village ☐ City SURING	4/20/'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, Emily Kitchin (name of circulator), (certify):

I reside at 3446 S. 15 ST Milwaukee (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 / 20 / 2011 (date) Emily Kitchin (signature of circulator)

Page No. #3487

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. Thomas Allen	Thomas Allen	5025 Page Ave Nicholas WI 54152	☐ Town ☒ Village ☐ City Nicholas	4/4/'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, Gloria Ritchie (name of circulator), (certify):

I reside at N7813 Hwy 187 Shiocton, WI 54170 (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 / 19 / 2011 (date) Gloria Ritchie (signature of circulator)

Page No. # 3488

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. WHITE, CAREY	Carey White	N-4893 REXFORD Rd SHIOCTON WI 54170	☑ Town ☐ Village ☐ City Ellington	4 / 4 / '11	Email Phone
2. Tyler, Joey	Joey Tyler	N4893 Rexford Rd. Shiocton, WI 54170	☑ Town ☐ Village ☐ City Ellington	4 / 4 / '11	Email Phone
3. [illegible]			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4. CHAS HUELSBECK	Chas Huelsbeck	N 321 STATE Hwy 187 SHIOCTON WIS. 54170	☑ Town NAVARINO ☐ Village ☐ City	4 / 7 / '11	Email Phone
5. Gerald Kelly	Gerald Kelly	N4254 Kelly Rd Shiocton, Wi. 54170	☑ Town ☐ Village ☐ City Ellington	4 / 7 / '11	Email Phone
6. Kelly, Pamela	Pamela Kelly	N4254 Kelly Rd. Shiocton, WI 54170	☑ Town ☐ Village ☐ City Ellington	4 / 7 / '11	Email Phone
7. Laurel Powers	Laurel Powers	N5278 Rexford Rd Shiocton, WIS 54170	☑ Town ☐ Village ☐ City Bovina	4 / 10 / '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, James M. Main (name of circulator), (certify):

I reside at N5086 Rexford Rd · Shiocton, Wi 54170 (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)

James M Main (signature of circulator)

Page No. # 3489

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. John Jessogne	John Jessogne	1212 Rosehill RD. Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/16/'11	Ema Joh Pho
2. Guy Tesch	[signature]	642 East Pearl Street Seymour Wi 54165	☐ Town ☐ Village ☒ City Seymour	3/16/'11	Ema Pho
3. Steve Laurent	[signature]	2231 Kastner Dr Green Bay WI	☐ Town ☒ Village ☐ City Ashwaubenon	3/16/'11	Ema Pho
4. ✓ Todd Mueller	Todd Mueller	737 Foote St Seymour WI 54165	☐ Town ☐ Village ☒ City Seymour	3/16/'11	Ema Pho
5. Greg Geurts	[signature]	N6870 French Rd Seymour WI 54165	☒ Town ☐ Village ☐ City Osborn	3/16/'11	Ema Pho
6. Ralph Bates	Ralph Bates	456 N. Main ST Seymour Wi 54165	☐ Town ☐ Village ☒ City Seymour	3/16/'11	Ema Pho
7. VERA HOLZER	VERA HOLZER	355 S. MAIN UT 2 SEYMOUR, WIS. 54165	☐ Town ☐ Village ☒ City SEYMOUR	3/17/2011	Ema Pho
8. Michelle Tesch	Michelle Tesch	642 E. Pearl St. Seymour Wi 54165	☐ Town ☐ Village ☒ City Seymour	3/17/'11	Ema Pho
9. Jody Frederickson	[signature]	2127 Olde County Circle Kaukauna WI 54130	☐ Town ☐ Village ☒ City Kaukauna	3/18/'11	Ema Pho
10.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho

Certification of Circulator

I, [signature] (name of circulator), (certify):

I reside at 310 Pine St Neenah, W. 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.

3 / 18 / 2011 (date) [signature] (signature of circulator)

Page No. # 3490

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. Roy Landskron	Roy Landskron	W8725 Buck Rd Shiocton WI 54170	☒ Town ☐ Village ☐ City Deer Creek	04/01/'11	Email Phone
2. Russell Moeller	Russell Moeller	1075 W High St Seymour WI 54165	☐ Town ☐ Village ☐ City Seymour	4-1-11	Email Phone
3. Robert Prokop	Bob Prokop	N8471 Beyer Rd Black Creek WI 54106	☒ Town ☐ Village ☐ City maine	4/1/'11	Email Phone
4. Kathy A. Pluger	Kathy Pluger	N5382 Pluger Rd Shiocton WI 54170	☒ Town ☐ Village ☐ City Bovina	4/2/'11	Email Phone
5. Patricia L. Shepard	Patricia L. Shepard	W6893 Cty. Rd. F Shiocton, WI. 54170	☒ Town ☐ Village ☐ City maine	4/2/'11	Email Phone
6. LYLE E SHEPARD	Lyle E. Shepard	W6893 Hwy F Shiocton wi. 54170	☒ Town ☐ Village ☐ City maine	4/2/'11	Email Phone
7. Jennifer A. Smith	Jennifer A. Smith	N6335 Twelve Corners Rd. Black Creek, WI 54106	☒ Town ☐ Village ☐ City Black Creek	4/2/'11	Email Phone
8. Steven J. Smith	Steven J. Smith	N6335 Twelve Corners Rd Black Creek WI 54106	☒ Town ☐ Village ☐ City Black Creek	4/2/'11	Email Phone
9. Steven L. Allen	Steven L. Allen	N6101 State Hwy 187 Shiocton, WI 54170	☒ Town ☐ Village ☐ City Bovina	4/2/'11	Email Phone
10. Julie A. Allen	Julie A. Allen	N6101 State Hwy 187 Shiocton, WI 54170	☒ Town ☐ Village ☐ City Bovina	4/2/'11	Email Phone

Certification of Circulator

I, ROY LANDSKRON (name of circulator), (certify):

I reside at W8725 Buck Rd Shiocton WI 54170 (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 / 9 / 2011 (date) Roy Landskron (signature of circulator)

Page No. #3491

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. John P Vandehey	[illegible]	W7576 Highview CT Shiocton WI 54170	☑ Town ☐ Village ☐ City Town of Bovina	4/2/'11	Em Ph
2. Bart Young	[illegible]	N5828 Old 54 Rd Shiocton WIS. 54170	☑ Town ☐ Village ☐ City Town of Bovina	4/2/'11	Em Ph
3. KEVIN FABRY	[illegible]	3156 LAZY DAY DR. DEPERE, WI. 54115	☑ Town ☐ Village ☐ City LAWRENCE	4/2/'11	Em Ph
4. Shawn Park	[illegible]	N5515 Old 54 Rd Shiocton, WI	☐ Town ☑ Village ☐ City Shiocton	4/2/'11	Em Ph
5. Roy Landskron	Roy Landskron	W8725 Buck Rd Shiocton	☑ Town ☐ Village ☐ City Deer Creek	4/9/'11	Em Ph
6.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
7.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
8.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
9.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph
10.			☐ Town ☐ Village ☐ City	/ /'11	Em Ph

Certification of Circulator

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

I reside at W8725 Buck Rd Shiocton 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 / 9 / 2011
(date)

Roy Landskron
(signature of circulator)

Page No. #3A92

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. BARB PHARRIS	Barb Pharris	132 E. ALLOUEZ AVE GREEN BAY, WI 54301	☐ Town ☒ Village ☐ City ALLOUEZ	4 / 19 / '11	Email Phone
2. Dave Johnson	Dave Johnson	142 E. Allouez Green Bay, WI 54301	☐ Town ☒ Village ☐ City Allouez	4 / 19 / '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, Robert A. Meyer, Jr. (name of circulator), (certify):

I reside at 427 E. Gorham St. #205, 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 / 19 / 2011 (date)

Robert A. Meyer (signature of circulator)

Page No. #3493

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. Elvia Martinez	Elvia Martinez	190 Reid St. 113	☐ Town ☐ Village ☒ City De Pere	4/20/'11	Email Phone
2. Hannah Grahn	Hannah Grahn	190 Reid St. #224 Mad/Lor	☐ Town ☐ Village ☒ City De Pere	4/20/'11	Email Phone
3. Amanda Buettemann	Amanda Buettemann	100 Grant St.	☐ Town ☐ Village ☒ City De Pere	4/20/'11	Email Phone
4. Tyler Friestad	Tyler Friestad	190 Reid St 106	☐ Town ☐ Village ☒ City De Pere	4/20/11	Email Phone
5. Angela McCoy	Angela McCoy	502 N. Tenth St. #78	☐ Town ☐ Village ☒ City DePere	4/20/'11	Email Phone
6. Janet Hermes	Janet Hermes	112 Lamplighter Dr #7 Kauk	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Email Phone
7. Melissa Johnson	Melissa Johnson	112 Lamplighter Dr #7	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Email Phone
8. Ryan Lemke	Ryan Lemke	112 Lamplighter Dr. #9	☐ Town ☐ Village ☒ City Ka-Kauna	4/20/'11	Email Phone
9. Nick Berg	[illegible]	112 Lamplighter #11	☐ Town ☐ Village ☒ City Kaukauna	4/20/11	Email Phone
10. [illegible]	[illegible]	112 Lamplighter #1 Kaukauna Wis	☒ Town ☐ Village ☒ City Kaukauna	4/20/'11	Email Phone

Certification of Circulator

I, Andrew Dybevik (name of circulator), (certify):

I reside at 5202 Dorsett Drive, 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.

4 / 20 / 2011 (date) Andrew Dybevik (signature of circulator)

Page No. 2494

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. Amanda Wiegus	Amanda Wiegus	1883 St. Katschuenica Greenleaf, WI 54126	☐ Town ☐ Village ☐ City Wrightstown	4/20/'11	Email / Phone
2. Kotoski	[illegible]	307 W 11th St Kaukauna WI 54130	☑ Town ☐ Village ☐ City Kaukauna	4/20/'11	Email / Phone
3. Brittany McGowan	Brittany [illegible]	409 S Harriet St. Kimberly, WI 54136	☑ Town ☐ Village ☐ City Kimberly	4/20/'11	Email / Phone
4. Mike Kopp	Mike Kopp	821 1/2 Lawe St. Kaukauna, WI 54130	☐ Town ☐ Village ☑ City Kaukauna	4/20/'11	Email / Phone
5. Shane Kopp	[illegible]	173 W Lake St ~~[illegible]~~ Stockbridge	☐ Town ☑ Village ☐ City Stockbridge	4/20/'11	Email / Phone
6. Kevin Lisch	Kevin Lisch	909 Elm Ave Kaukauna	☐ Town ☐ Village ☑ City Kaukauna	4/20/'11	Email / Phone
7. Scott Pingel	Scott Pingel	888 E Shady Ln Lot 239 Neenah, WI 54956	☑ Town ☐ Village ☐ City Neenah	4/20/'11	Email / Phone
8. Charles Gilbert	Charles Gilbert	141 Lamplighter Dr. #2	☐ Town ☐ Village ☒ City Kaukauna	4/20/'11	Email / Phone
9. Anne Genignani	Anne Genignani	223 Brothers Kaukauna	☐ Town ☐ Village ☑ City Kaukauna	4/20/'11	Email / Phone
10. Catherine Young	Catherine Young	40 W. Snell Rd. apt. A Oshkosh WI, 54901	☐ Town ☐ Village ☒ City Oshkosh	4/20/'11	Email / Phone

Certification of Circulator

I, Kwame Martin (name of circulator), (certify):

I reside at 707 Decatur Pl NE Wash DC (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 / 20 / 2011 (date)

(signature of circulator)

Page No. #3495

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. Amanda Wiesner	[signature]	2811 Hunters Run Kauka	☐ Town ☐ Village ☑ City Kaukauna	04/20/'11	Ema Phon
2. HARVEY MEINTZ	[signature]	3003 HUNTER RUN KAUKAUNA	☐ Town ☐ Village ☑ City Kaukauna AD	4/20/'11	Ema Phon
3.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon
4.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon
5.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon
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9.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon
10.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phon

Certification of Circulator

I, Andrew Dybevik (name of circulator), (certify):

I reside at 5202 Dorsett Drive, 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.

4 / 20 / 2011 (date) [signature] (signature of circulator)

Page No. # 3496

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. Michelle Hebel-Barske	Michelle Hebel Barske	3410 E River Dr. #10 Green Bay Wis.	☐ Town ☐ Village ☒ City Green Bay	4 20 '11	Email Phone
2. Dawn Gustafson	Dawn Gustafson	1863 Misty Moon Way DePere WI 54115	☒ Town ☐ Village ☐ City Lawrence	4 20 '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, MATT A. NIVA (name of circulator), (certify):

I reside at 531 5th St. Upper front 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 / 20 / 2011 (date)

Matt A. Niva (signature of circulator)

Page No. #3497

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. Jeremy Gocht	[illegible]	520 S. Ontario ST	☐ Town ☐ Village ☒ City De Pere	4 / 20 '11	Email Phone
2. Ashley Kuester	ashley kuester	705 cambridge Ct.	☐ Town ☐ Village ☒ City De Pere	4/20 '11	Email Phone
3. Rod Cox	[illegible]	3918 S. Chavez	☐ Town ☐ Village ☒ City De Pere	4/20 '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, Caroline Osterman (name of circulator), (certify):

I reside at 402 Brinley Ave Bradley Beach NJ 07720 (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 / 20 / 2011 (date)

Caroline Osterman (signature of circulator)

Page No. # 2498

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 Meyer	Karen Meyer	N1739 CTY Rd J	☒ Town ☐ Village ☐ City Kaukauna	4 /20/'11	Email Phone
2. Gregan Mun	[illegible]	510 W 7th	☒ Town ☐ Village ☐ City Kaukauna	4/20/11	Email Phone
3. Abbey Noonan	Abbey Noonan	815 Desnoyer St	☒ Town ☐ Village ☐ City Kaukauna	4/20/'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. Kwame Martin (name of circulator) (certify):

I reside at 702 Decatur Pl NE Wash DC
(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 / 20 / 2011
(date)

(signature of circulator)

Page No. #3499

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. Mike Doxtator	[illegible]	1221 Chief Hill Dr Green Bay WI 54313	☐ Town ☐ Village ☒ City Green Bay	4/19/'11	Email Phone
2. Dale R. Mitchell Sr	[illegible]	1325 Chief Hill Dr Green Bay WI 54313	☐ Town ☐ Village ☒ City Green Bay	4/19/'11	Email Phone
3. Leah Schommer	Leah Schommer	1025 Moraine Way Apt. 5 Green Bay, WI 54303	☐ Town ☐ Village ☒ City Green Bay	4/19/'11	Email Phone
4. [illegible]	[illegible]	1325 Chief Hill Dr Green Bay WI 54303	☒ Town ☐ Village ☐ City Green Bay	4/19/'11	Email Phone
5. Michelle Hill	[illegible]	1325 Swamp Rd GB WI 54313	☒ Town ☐ Village ☒ City Green Bay	4/19/'11	Email Phone
6. Joseph Doxtater	[illegible]	1335 Swamp Rd G.B. WI 54304	☐ Town ☐ Village ☐ City Green Bay	4/19/'11	Email Phone
7. Cheryl Hill	Cheryl Hill	1412 Swamp Rd Gr. Bay 54303	☐ Town ☐ Village ☒ City Gr. Bay	4/19/'11	Email Phone
8. Chasity Primo	Chasity Primo	1325 Rona Ln. GB 54313	☐ Town ☐ Village ☒ City G Bay	4/19/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Elroy Fox (name of circulator), (certify):

I reside at 216 E. Green Bay St. 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 / 19 / 2011 (date)

Elroy Fox (signature of circulator)

Page No. #350D