RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Amber Reinhart	Amber Reinhart	231 N. Burritt. Ave. Apt 10 Lake Delton WI 53965	☐ Town ☑ Village ☐ City LAKE DELTON	04/09/'11	Email Phone
2.	Marshall Pixley	Marshall P	231 N Burritt Ave Apt 10 Lake Delton WI 53965	☐ Town ☑ Village ☐ City LAKE DELTON	04/09/'11	Email Phone
3.	MARLENE O'BRIEN	Marlene O'Brien	~~241 N. BARTLE AVE #1~~ ~~LAKE DELTON WI 53654~~	☐ Town ☐ Village ☐ City LAKE DALTON	4-9 /'11 11	Email Phone
4.				☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
5.				☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
6.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
7.				☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
8.				☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
9.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho
10.				☐ Town ☐ Village ☐ City	/ /'11	Em Pho

Certification of Circulator

I, James N Youngerman (name of circulator), (certify):

I reside at 2445 Fox Ave Madison, WI 53711 (circulator's residence – including number, street and municipality)

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

4 / 4 / 2011 (date)

James N Youngerman (signature of circulator)

Page No. #3021

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Clint Greendeer	Clint Greendeer	S2198A Ishnala Rd. Baraboo, WI 53913	☒ Town ☐ Village ☐ City of Lake Delton	4 / 9 / '11	Ema Pho
2.	KENNETH KLINC	K	S2701B Vanhy Ct Baraboo Wis. 53913	☒ Town ☐ Village ☐ City OF Lake Delton	4 / 9 / '11	Ema Pho
3.	BOB CRARY	Robt	S2503 VAN Hy Ct BARABOO WI 53913	☐ Town ☐ Village ☐ City OF LAKE DELTON	4 / 9 / '11	Ema Pho
4.	Kenneth Bonnell	Kenneth Bonnell	S2596 Van Hy Rd. Baraboo Wis 53913	☐ Town ☐ Village ☐ City DELTON	4 / 9 / '11	Ema Pho
5.	John Bhre Mike Bonnell	John Bhre	S1696 Van Hy RD Baraboo WI 53913	☐ Town ☐ Village ☐ City Delton	/ / '11 4 9	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	Em Phc

Certification of Circulator

I, JILL D. SWENSON (name of circulator), (certify):

I reside at 1358 PINON TRAIL OREGON WI 53575 (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 / 09 / 2011 (date) Jill D. Swenson (signature of circulator)

Page No. # 3002

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Yvonne Friday	Yvonne Friday	406 E Sumner St	☐ Town ☐ Village ☑ City Weyauwega	4 / 9 / '11	Ema Phor
2.	Kelly Bachman	Kelly Bach	306 E. Sumner St.	☐ Town ☐ Village ☑ City Weyauwega	4 / 9 / '11	Ema Phor
3.	Shelly Meidam	Shelly Meidam	21 E Sumner St.	☐ Town ☐ Village ☑ City Weyauwega	4 / 9 / '11	Ema Phor
4.	ELEANOR FISHER	Eleanor Fisher	368 E. PARKER ST.	☐ Town ☐ Village ☑ City WEYAUWEGA	/ / '11 4-9	Ema Phor
5.	Peter Badway	Peter Badway	309E Parker St.	☐ Town ☐ Village ☑ City Weyauwega	/ / '11 4-9	Ema Phor
6.	Cindy Smith	Cindy Smith	410 S. Harlon St. # 2 Weyauwega WI 54983	☐ Town ☐ Village ☑ City Weyauwega	/ / '11 4 9	Ema Phor
7.	Sally McIntyre	Sally McIntyre	412 S Harlon St #2	☐ Town ☐ Village ☑ City Weyauwega	/ / '11 4 9	Ema Phor
8.	William J Mundt	William J Mundt	412 S Harlon Street Apt 4	☐ Town ☐ Village ☑ City weyauwega	/ / '11 4-9	Ema Phor
9.	CAROL VOLK	Carol Volk	305 S HARLON	☐ Town ☐ Village ☑ City Weyauwega	4/9 / '11	Ema Phor
10.				☐ Town ☐ Village ☐ City	/ / '11	Ema Phor

Certification of Circulator

I, Alan Vonderohe (name of circulator), (certify):

I reside at W10751 Wildwood Way Poynette WI 53955 (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) Alan Vonderohe (signature of circulator)

Page No. #3003

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Vincent S Will	Vincent S Will	215 E Main St Apt B	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
2.	Sylvia D. Robison	Sylvia D Robison	217 E. main ST	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
3.	Doris E Robison	Doris E Robison	217 E Main ST	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
4.	Wilbur E Robison	Wilbur E Robison	217 E Main St	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
5.	Holly D Eckroth	Holly D Eckroth	315 E. Main St	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
6.	Stephan Wucherer	Stephan Wucherer	212 E Alfred St	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
7.	Robert Rieckmann	Robert Rieckmann	W321 Cty Rd H Freedom T	☒ Town ☐ Village ☐ City Bloomfield	4/9/'11	Email Phone
8.	Aaron Crist	Aaron Crist	303 E Summer St	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
9.	DEBORA KLOEHN	Debora Kloehn	409 E. SUMMER ST. Weyauwega, WI 54983	☐ Town ☐ Village ☒ City WEYAUWEGA	4/9/11	Email Phone
10.	IRVIN KLOEHN	Irvin Kloehn	409 E Summer St	☐ Town ☐ Village ☒ City WEYAUWEGA	4/9/'11	Email Phone

Certification of Circulator

I, Alan Vandercho (name of circulator), (certify):

I reside at W10751 Wildwood Way Poynette, WI 53955 (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) Alan Vandercho (signature of circulator)

Page No. #3004

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Merri Odgers	Merri Odgers	309 Second Ave Weyauwega	☐ Town ☐ Village ☒ City Weyauwega	4 / 9 / '11	Email Phone
2. Kay Burns	Kay Burns	Fox Bee Lan New London, WI	☐ Town ☐ Village ☒ City New London	4 / 9 / '11	Email Phone
3. Becky Bruno	Becky Bruno	148 Lamplighter Dr. Kaukauna, WI 54130	☐ Town ☐ Village ☒ City Kaukauna	4 / 9 / '11	Email Phone
4. Cherie Goetsch	Cherie Goetsch	309 W3rd Ave Weyauwega WI	☐ Town ☐ Village ☒ City Weyauwega	4 / 9 / '11	Email Phone
5. Tom Konetz		606 E Wisconsin Ave Weyauwega WI	☐ Town ☐ Village ☒ City Weyauwega	/ / '11 4 9	Email Phone
6. Thomas Day		608 E Wisconsin St Weyauwega WI 54983	☒ Town ☐ Village ☐ City Weyauwega	4 / 9 / '11	Email Phone
7. Randy Weed	Randy Weed	Weyauwega WI 54983 610 E. Wisconsin St.	☐ Town ☐ Village ☒ City Weyauwega	4 / 9 / '11	Email Phone
8. KARLA HARRIS	Karla Harris	105 N. LIBERTY ST WEYAUWEGA, WI 54983	☐ Town ☐ Village ☒ City WEYAUWEGA	4 / 9 / '11	Email Phone
9. Chuck Harris	Chuck Harris	105 N LIBERTY ST weyauwega WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4 / 9 / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

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

I reside at 5448 Alan Dr Oregon, Wi 53575 (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)

Beth Whitteman (signature of circulator)

Page No. #3005

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Gayle Robbins	Gayle Robbins	710 E Alfred St #20 Weyauwega WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4 / 9 / '11	Email Phone
2.	Janice Clumpner	Janice Clumpner	710 E Alfred St Lot 37 Weyauwega WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4 9 / '11	Email Phone
3.				☐ Town ☐ Village ☒ City Weyauwega	/ / '11 4 9	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, Beth Cox (name of circulator), (certify):

I reside at 1000 Glenway Rd Oregon 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 / 9 / 2011 (date)

Beth Cox (signature of circulator)

Page No. # 3006

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Melody Hurst	Melody Hurst	607 N. 2nd St Weyauwega WI	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
2.	Amy Timm	Amy Timm	600 Second St. Weyauwega WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
3.	MINA Miller	Mina Miller	208 W 3rd Ave Weyauwega, Wi 54983	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
4.	James Miller	James Miller	208 W. 3rd Ave Weyauwega, WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
5.	Zach KONEMAN		390 Forbes Fremont St Wi	☐ Town ☒ Village ☐ City Fremont	4/9/'11	Email Phone
6.	BRIAN KLENKE		619 N MILL ST WEYAUWEGA WI. 54983	☐ Town ☐ Village ☒ City WEYAUWEGA	4/9/'11	Email Phone
7.	MIRON Scholist		7497 Meadow Lane Custer WI 54423	☐ Town ☐ Village ☒ City Custer	4/9/'11	Email Phone
8.	Chris Behm		505 E Wisconsin St Weyauwega WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
9.	JEFF Niemuth		206 W. Pine St	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
10.	Lorelei A. OTTE	Lorelei A. Otte	502 E Main Weyauwega WI	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone

Certification of Circulator

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

I reside at 1000 Glenwater Rd Oregon 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 9 (date) / 2011

(signature of circulator)

Page No. # 3067

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Zeinert	Tammy Zeinert	414 E Main St. Weyauwega	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
2. Harvey Zeinert	Harvey Zeinert	414 E Main St. Weyauwega WI	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
3. LAURENCIO LEYVA	Laurencio Leyva	506 E. MAIN St Weyauwega WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
4. Judith Meisenheimer	Judith Meisenheimer	516 E. Main St	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
5. LaMayne G Holley	LaMayne G Holley	507 E Ann St Weyauwega, WI	☐ Town ☐ Village ☒ City Weyauwega	4/9/11	Email Phone
6. Arnie Dittmann	ARNIE DITTMANN	W8864 CZECH CT WAUTOMA, WI	☒ Town DAKOTA ☐ Village ☐ City WAUTOMA WI	4/9/'11	Email Phone
7. Beverly Walbruck	Beverly Walbruck	708 E Alfred	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
8. HAROLD Walbruck	Harold Walbruck	708 E Alfred	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone
9. CAROL DITTMANN	Carol Dittmann	W8864 CZECH Ct WAUTOMA, WI	☒ Town DAKOTA ☐ Village ☐ City WAUTOMA WI	4/9/'11	Email Phone
10. Tim Sager	Tim Sager	710 E Alfred st Wega	☐ Town ☐ Village ☒ City Weyauwega	4/9/'11	Email Phone

Certification of Circulator

I, Danette Peyer (name of circulator), (certify):

I reside at 265 Hayler Court, Oregon, WI 53575 (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) Danette Peyer (signature of circulator)

Page No. # 3008

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Chloe Terry	Chloe Terry	145 Lafollette	☑ Town ☐ Village ☐ City Iola	4/9/'11	Email Phone
2. Nona Schmidt	Nona Schmidt	210 Frogner St #4	☐ Town ☑ Village ☐ City Iola	/ /'11 4 9 11	Email Phone
3. Mary Birling	Mary Birling	227 Frogner St.	☐ Town ☐ Village ☐ City Iola	4/9/'11	Email Phone
4. Paul Birling	Paul Birling	227 Frogner St.	☐ Town ☐ Village ☐ City IOLA	4/9/'11	Email Phone
5. Barb Rasmussen	Barb Rasmussen	220 Frogner St	☐ Town ☐ Village ☐ City Iola	4/9/'11	Email Phone
6. Donna Thompson	Donna Thompson	320 North St.	☐ Town ☑ Village ☐ City Iola	4/9/'11	Email Phone
7. Robert Thompson	R. L. Thompson	320 North St.	☐ Town ☑ Village ☐ City Iola	4/9/'11	Email Phone
8. Jason Dr[illegible]	[illegible]	330 North St	☐ Town ☑ Village ☐ City	4/9/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Miriam Mueller-Owens, (certify):
(name of circulator)

I reside at 4304 Mallet Ave Madison WI 53716
(circulator's residence – including number, street and municipality)

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

4 / 9 / 2011 (date) Miriam Mueller-Owens (signature of circulator)

Page No. #3009

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Melissa Thulen	M. Thulen	140 Division St Iola, WI	☐ Town ☒ Village ☐ City Iola	04 / 09 / '11	Email Phone
2. Tim Johnson	Tim	270 Division St Iola WI	☐ Town ☒ Village ☐ City Iola	04 / 09 / '11	Email Phone
3. Jacqueline Johnson	Jacqueline Johnson	270 Division St Iola WI	☐ Town ☒ Village ☐ City Iola	4 / 9 / '11	Email Phone
4. Joe Enoch		455 Division St Iola WI	☐ Town ☒ Village ☐ City Iola	4 / 9 / '11	Email Phone
5. Sharyl A Peterson	Sharyl A Peterson	375 E Ida St Iola Wi	☐ Town ☒ Village ☐ City Iola	/ / '11 4/9	Email Phone
6. Robert S Christenson	Robert S Christenson	285 W Ellefson Iola wi	☐ Town ☐ Village ☒ City Iola	4 / 9 / '11	Email Phone
7. Josh Melum	Josh Melum	295 w Ellefson St Iola WI	☐ Town ☒ Village ☐ City Iola	4 / 9 / '11	Email Phone
8. ELAINE C. BOSTONE	Elaine C. Bostone	430 Grove ST. Iola, Wi 54945	☐ Town ☒ Village ☐ City Iola	4 / 9 / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Theodore J Anderson (name of circulator), (certify):

I reside at W6932 Alp Ct Wild Rose Wi 54984 (circulator's residence – including number, street and municipality)

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

4 / 9 / 2011 (date)

Theodore J Anderson (signature of circulator)

Page No. 9 # 3010

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Joanne Rice	Joni Rice	2635 Otter Dr Apt B Waupaca WI 54981	☐ Town ☐ Village ☒ City	3/27/'11	Email Phone
2.	Richard Pearson	Richard Pearson	E3197 Ebbe Lake Rd PO Box 551 Waupaca WI 54981	☒ Town ☐ Village Waupaca ☐ City	3/29/'11	Email Phone
3.	Corinne Pearson	Corinne Pearson	E3197 Ebbe Lake Rd Waupaca, WI 54981	☒ Town ☐ Village ☐ City	3/29/'11	Email Phone
4.	Diane Borland	Diane Borland	309 Center St Waupaca, WI 54981	☐ Town ☐ Village ☒ City	4/2/'11	Email Phone
5.	Steve Borland	Steve Borland	309 Center St Waupaca, WI 54981	☐ Town ☐ Village ☒ City	4/2/'11	Email Phone
6.	Tim O'Keefe	Tim O'Keefe	Waupaca, WI 54981	☐ Town ☐ Village ☒ City	4/2/'11	Email Phone
7.	LaNora Taber	LaNora Taber	124 Harrison Waupaca WI 54981	☐ Town ☐ Village ☒ City	4/2/'11	Email Phone
8.	Josie Vargas	RJ	Waupaca WI 54981 526 Granite St	☐ Town ☐ Village ☒ City	4/2/'11	Email Phone
9.	Jeanne Trombla	Jeanne M. Trombla	420 Granite Waupaca	☐ Town ☐ Village ☒ City	4/2/'11	Email Phone
10.	Lori Miller	Lori Miller	512 N. Franklin St Waupaca	☐ Town ☐ Village ☒ City	4/2/'11	Email Phone

Certification of Circulator

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

I reside at E3197 Ebbe Lake Road PO Box 551 Waupaca Town 54981 (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)

Michael Pearson (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	NANCY A. Goetz	Nancy A. Goetz	E2302 Fawn Ridge Ct WAUPACA WI 54981	☒ Town ☐ Village ☐ City Farmington	4 / 2 / '11	Email Phone
2.	HAROLD A. GOETZ	Harold A. Goetz	E2302 FAWN RIDGE CT WAUPACA, W, 54981	☒ Town ☐ Village ☐ City FARMINGTON	4 / 2 / '11	Email Phone
3.	Glenn Butt	Glenn Butt	N 3131 W. Silvedale DR Waupaca WI 54981	☒ Town ☐ Village ☐ City Farmington	4/2 / '11	Email Phone
4.	MARIANNE SMALL	Marianne Small	N6699 CTY J SCANDINAVIA 54977	☒ Town ☐ Village ☐ City SCANDINAVIA	4/2 / '11	Email Phone
5.	BOB SMALL	Robert E Small	N6699 CTY J SCANDINAVIA 54977	☒ Town ☐ Village ☐ City SCANDINAVIA	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, Patricia A. DuChene (name of circulator), (certify):

I reside at N9168 County Road J, Iola town of Iola (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 / 3 / 2011 (date) Patricia A. DuChene (signature of circulator)

Page No. #3012

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Deborah Schmoll	Deborah Schmoll	N1813 Shambeau Trace Waupaca WI 54981	☑ Town ☐ Village ☐ City Lind	04/02/'11	Email Phone
2.	Dave Muntner	David Muntner	W5041 Lakewood Ct Waupaca WI 54981	☑ Town ☐ Village ☐ City Springwater	4/2/'11	Email Phone
3.	MARLENE HAASE	Marlene Haase	E2615 Crystal Rd Waupaca, WI 54981	☑ Town ☐ Village ☐ City Lind	4/2/'11	Email Phone
4.	JIM NIGHBOR	Jim Nighbor	1040 County Road QQ Apt #12 Waupaca, WI 54981	☑ Town ☐ Village ☐ City Waupaca	4/2/'11	Email Phone
5.	JUDITH HERRBOLD	Judith Herrbold	N1743 Catherine Way Waupaca WI 54981	☑ Town ☐ Village ☐ City Lind	4/2/'11	Email Phone
6.	TERESA FOCHS	Teresa Fochs	E2430 Silver Lake Rd Scandinavia WI 54977	☑ Town ☐ Village ☐ City SCANDINAVIA	4/2/'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, ~~Jason M.~~ Patricia A. DuChene (name of circulator), (certify):

I reside at N9168 County Road J, Iola township of Iola (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.

4/3/2011 (date) Patricia A. DuChene (signature of circulator)

Page No. 1 #3013

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Cunningham	Sarah Cunningham	632 Elm Street Waupaca, Wi. 54981	☐ Town ☐ Village ☒ City	4 / 2 / '11	Email Phone
2.	Sandra Tryba	Sandra Tryba	180 High Scandinavia 54977	☐ Town ☒ Village ☐ City	4 / 2 / '11	Email Phone
3.	Jeffrey A. Tryba	Jeffry A. Tryba	180 High Scandinavia, WI 54977	☐ Town ☒ Village ☐ City	4 / 2 / '11	Email Phone
4.	Kristin Herman	Kristin Herman	553 Depot Street Manawa, WI 54949	☐ Town ☐ Village ☒ City	4 / 2 / '11	Email Phone
5.	Kaye Abbold	Kaye Abbold	113 Oman St. Waupaca, Wi. 54981	☐ Town ☐ Village ☒ City	4 / 2 / '11	Email Phone
6.	Jackie Mattice	Jackie Mattice	117 Crestview Ln Waupaca WI	☐ Town ☐ Village ☒ City	4 / 2 / '11	Email Phone
7.	Tom Block	Tom Block	117 Crestview Ln Waupaca, Wis	☐ Town ☐ Village ☒ City	4 / 2 / '11	Email Phone
8.	HAROLD ZAWACKI	Harold Zawacki	110 CRESTVIEW LN WAUPACA WI	☐ Town ☐ Village ☒ City	4 / 2 / '11	Email Phone
9.	Cheryl Butt	Cheryl Butt	N3131 W. Silver Lake Dr Waupaca, WI	☒ Town ☐ Village ☐ City Farmington	4/2/'11	Email Phone
10.	Jackie Habighorst	Jackie Habighorst	211 W Session St Waupaca WI	☐ Town ☐ Village ☒ City	4 / 2 / '11	Email Phone

Certification of Circulator

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

I reside at PO Box 551, E3197 Ebbe Lake Road Waupaca Town 54981
(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)

Michael Pearson
(signature of circulator)

Page No. # 301-4

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Lowney	Richard Lowney	6416 E Symco Rd Manawa WI 54949	☒ Town ☐ Village ☐ City UNION	4/14/'11	Email Phone
2.	Jeremy Dumrichoo	Jeremy Dumrichoo	229 Progress Rd Apt. 16 Manawa, WI 54949	☒ Town ☐ Village ☐ City LITTLE WOLF	4/14/'11	Email Phone
3.	Carey Celske (CELSKE)	Carey Celske	E5921 Rivest (RIVERST) Manawa WI 54949	☒ Town ☐ Village ☐ City LITTLE WOLF	4/14/'11	Email Phone
4.	Robin Dumrichoo	Robin Dumrichoo	N4650 Hwy 22 Manawa WI 54949	☒ Town ☐ Village ☐ City ROYALTON	04/04/'11	Email Phone
5.	Dustin Boerst	Dustin Boerst	~~1031 61 Roberts Ave~~ Appleton WI 54914	☐ Town ☐ Village ☒ City	~~04/04/'11~~	Email Phone
6.	Lucas Kriesel	Lucas Kriesel	E3128 St. Rd 161 Iola WI, 54945	☒ Town ☐ Village ☐ City HELVETIA	04/04/'11	Email Phone
7.	Gary Lankins	Gary Lankins	N5975 Rich Lake Rd Ogdensburg WI 54962	☒ Town ☐ Village ☐ City ST. LAWRENCE	04/04/'11	Email Phone
8.	JERRY KUSSEROW	Jerry Kusserow	E6735 Lark Ln. New London, WI 54961	☒ Town ☐ Village ☐ City ROYALTON	4-4-'11	Email Phone
9.	John Staiger	John Staiger	E527 Ct, Rd B Manawa	☐ Town ☐ Village ☐ City LITTLE WOLF	4-4-'11	Email Phone
10.	TODD NIEMUTH	Todd Niemuth	E5883 SWAN RD MANAWA	☒ Town ☐ Village ☐ City LITTLE WOLF	4-4-11	Email Phone

Certification of Circulator

I, Helene Pohl (name of circulator), (certify):

I reside at E3080 Poverty Hill Rd Ogdensburg WI 54962 Township of St Lawrence
(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 / 08 / 2011
(date)

Helene Pohl
(signature of circulator)

Page No. # 3015

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Allen Kempf	Allen Kempf	N1651 East Rd. Waupaca, WI 54981	☑ Town ☐ Village ☐ City Dayton	3/9/'11	Email Phone
2.	Jeff Carlson	Jeff Carlson	N2641 Cambria Ln Waupaca, WI 54981	☑ Town ☐ Village ☐ City Farmington	3/23/'11	Email Phone
3.	Judy Carlson	Judy Carlson	N2641 Cambria Ln. Waupaca, WI 54981	☒ Town ☐ Village ☐ City Farmington	3/23/'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, Beverley F. Brackenbury (name of circulator), (certify):

I reside at N1651 East Rd. Waupaca WI 54981 (circulator's residence – including number, street and municipality)

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

3 / 29 / 2011 (date)

Beverley F. Brackenbury (signature of circulator)

Page No. #3016

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 KASSERA	Linda Kassera	E5788 WAUKAUNAKA ST. Weyauwega, WI	☒ Town ☐ Village ☐ City Royalton	3 / 27 / '11	Email Phone
2.	PENNY MANN	Penny Mann	N4216 Oakland Dr Waupaca, WI 54981	☒ Town ☐ Village ☐ City FARMINGTON	3 / 27 / '11	Email Phone
3.	RAYMOND GROBE	Raymond Grobe	Weyauwega WI 54983 N3865 Thompson Rd.	☒ Town MUKWA ☐ Village ☐ City	4 / 2 / '11	Email Phone
4.	Roberta Pachwal	Roberta Pachwal	N4080 Faskell Rd. New London, WI 54961	☒ Town ☐ Village ☐ City Mukwa	4 / 7 / '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, Margie R. Nelson (name of circulator), (certify):

I reside at E5788 WauKaunaKa Weyauwega town of Royalton
(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)

Margie R. Nelson
(signature of circulator)

Page No. #361

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Glen W Johnson	Glen W Johnson	N6520 45 HWY 45 lot 15 New London, WI 54961	☒ Town ☐ Village ☐ City Lebanon	4 / 3 / '11	Email Phone
2.	ARLENE M JOHNSON	Arlene Johnson	N6520 45 HWY LOT 15 NEW LONDON, WI 54961	☒ Town ☐ Village ☐ City Lebanon	4-3 / / '11	Email Phone
3.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.	Renee Graichen	Renee Graichen	1023½ S. Pearl St. New London, WI 54961	☐ Town ☐ Village ☒ City New London	4 / 6 / '11	Email Phone
5.	Sandy Heineman	Sandy Heineman	N5793 Cty Rd D New London	☒ Town ☐ Village ☐ City Maple Creek	/ / '11 4 6	Email Phone
6.	Kevin Hagen	K Hagen	E2110 Lake Rd Iola WI	☐ Town ☒ Village ☐ City Town of Iola	4 / 7 / '11	Email Phone
7.	Kathrine Nehring	Kathrine Nehring	Lot 46 Northgate Estate New London, WI 54961	☐ Town ☐ Village ☒ City New London	4 / 7 / '11	Email Phone
8.	ILeen Kramer	Ileen Kramer	N8380 Poplar Rd Bear Creek, WI	☒ Town ☐ Village ☐ City	4 / 7 / '11	Email Phone
9.	Rodger Gill	Rodger Gill	E170 Norske Rd, Iola, WI	☐ Town ☐ Village ☐ City	4 / 7 / '11	Email Phone
10.	Bonnie Kersten	Bonnie Kersten	106 Campus Dr. Clint, WI	☐ Town ☐ Village ☒ City Clintonville	4/7 / '11	Email Phone

Certification of Circulator

I, KAREN M. VOIE (name of circulator), (certify):

I reside at N5780 Matson Rd Scandinavia WI 54977 (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 / 07 / 2011 (date)

Karen M. Voie (signature of circulator)

3

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Adam Phillips		1215 W Beckert Rd Apt New London WI 54961	☐ Town ☐ Village ☒ City	4/6/'11	Email Phone
2.	Rodney Harrington	Rodney Harrington	E8835 Huntley Rd New London Wi 54961	☐ Town ☐ Village ☒ City	4/6/'11	Email Phone
3.	Nathan Much	Nathan Much	E7082 HGW Rd Marion WI	☐ Town ☐ Village ☒ City	4/6/'11	Email Phone
4.	Peggy Besaw	Peggy Besaw	1323 Lawrena St New London, WI 54961	☐ Town ☐ Village ☒ City	4/6/'11	Email Phone
5.	Debra Davis	Debra Davis	N4645 church st. New London, Wis 54961	☒ Town ☐ Village ☐ City	4/6/'11	Email Phone
6.	Bobbi Jo Pethke	Bobbi J Pethke	N8713 State Rd 110 Manawa WI 54949	☒ Town ☐ Village ☐ City City	4/6/'11	Email Phone
7.	Taylor Pethke	Taylor Pethke	N8713 State Rd 110 Manawa WI 54949	☒ Town ☐ Village ☐ City City	4/6/'11	Email Phone
8.	Bonnie Paulson	Bonnie Paulson	N5824 MATSON RD SCANDINAVIA WI 54977	☒ Town ☐ Village ☐ City SCANDINAVIA	4/6/'11	Email Phone
9.	Norman Paulson	Norman R Paulson	N5824 MATSON RD SCANDINAVIA WI 54977	☒ Town ☐ Village ☐ City SCANDINAVIA	4/6/'11	Email Phone
10.	MERILYN PALMER	Merilyn Palmer	E5818 BEAR LAKE Rd. New London, WI 54961	☒ Town ☐ Village ☐ City ROYALTON	4/6/'11	Email Phone

Certification of Circulator

I, KAREN M. VOIE (name of circulator), (certify):

I reside at N5280 Matson Rd, Scandinavia, Wi 54977 (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 / 07 / 2011 (date)

Karen M. Voie (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Peter Markowski	Peter Markowski	10995 Tg 11 Oak Ct. Waupaca WI 54981	☑ Town ☐ Village ☐ City Lanark	4/4/'11	Email Phone
2.	Carol Fossell	Carol J Fossell	W5525 So. City Rd A Wild Rose, WI 54984	☒ Town SPRINGWATER ☐ Village ☐ City	4/4/'11	Email Phone
3.	James Fossell	James Fossell	W5525 S Cty Rd A Wild Rose WI 54984	☒ Town ☐ Village Springwater ☐ City	4/4/'11	Email Phone
4.	Mike Guthu	Mike Guth	N7804 Cty Hwy J Iola, Wis 54945	☐ Town ☒ Village ☐ City Iola	4/4/'11	Email Phone
5.	DONALD DOMBROWSKI	Donald Dombrowski	E2920 NELSEN RD WAUPACA WI 5498	☒ Town ☐ Village ☐ City	4/4/'11	Email Phone
6.	Joshua Robbert	Joshua Robbert	402 N EAST ST. Wexaunwega WI 54983	☐ Town ☒ Village ☐ City Weyauwega	4/4/'11	Email Phone
7.	MARY BIERSTAKER	Mary Bierstaker	N3185 Silver Lake Dr. Waupaca, Wi 54981	☒ Town ☐ Village ☐ City	4/4/'11	Email Phone
8.	GLENDLE BIERSTAKER	Glendle Bierstaker	N 3185 SILVER LAKE Rd. Waupaca, WI 54981	☒ Town ☐ Village ☐ City	4/4/'11	Email Phone
9.	Mark Rodgers	Mark Rodge	E 5828 timber lane Weyauwega wi 54983	☐ Town ☒ Village ☐ City Weyauwega	4.4/'11	Email Phone
10.	Yvonne Friday	Yvonne Friday	406 E Summit St Weyauwega, WI 54983	☐ Town ☒ Village ☐ City Weyauwega	4/4/'11	Email Phone

Certification of Circulator

I, Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd. Clintonville, WI 54929 (circulator's residence – including number, street and municipality)

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

April / 4 / 2011 (date) Ramona Danke (signature of circulator)

Page No. #3020

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Gloria T. Hinnendael	Gloria T. Hinnendael	N5058 Pine Crest Dr. Manawa, WI. 54949	☐ Town ☐ Village ☒ City Manawa	4 / 4 / '11	Email Phone
2. Robert & Christine Matchen	Christine Matchen Robert Matchen	E2021 N. Westgate Acres Waupaca WI 54981 E2021 N. Westgate Acres Waupaca WI 54981	☒ Town Farmington ☐ Village ☒ City Farmington	4 / 4 / '11 4/4	Email Phone
3. Maria Kurulo		N5089 Waupaca Rd Ogdensburg WI 54962	☒ Town ☐ Village ☐ City St Lawrence	4/4/'11	Email Phone
4. TERRANCE J SCHERZ	Terrance J Scherz	E783 AUGUSTA LANE WAUPACA WIS 54981	☒ Town ☐ Village ☐ City DAYTON	4/4/'11	Email Phone
5. IRENE D SCHERZ	Irene D. Scherz	E783 AUGUSTA LANE DAYTON WAUPACA WIS 54981	☒ Town ☐ Village ☐ City DAYTON	4/4/'11	Email Phone
6. THOMAS PAYETTE	Thomas Payette	N2762 SHADOW RD WAUPACA, WI 54981	☒ Town ☐ Village ☐ City WAUPACA	4/4/'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, Ramona Danke, (certify):
(name of circulator)

I reside at E7506 Beaver Creek Rd, Clintonville, WI 54929
(circulator's residence -- including number, street and municipality)

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

April / 4 / 2011 Ramona Danke
(date) (signature of circulator)

Page No. # 362

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Jeffrey S. Manske	Jeffrey S. Manske	W3224 Cty H. Pine River WI 54965	☒ Town ☐ Village ☐ City	4/5/'11	Email / Phone
2. Ashley Elwing	Ashley Elwing	101 W. Main St Weyauwega, WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4/5/'11	Email / Phone
3. Adam Elwing	A. Elwing	101 W. Main Weyauwega WI 54983	☐ Town ☐ Village ☒ City Weyauwega	4/5/'11	Email / Phone
4. Keith Nemmetz	Keith Nemmetz	N7449 White Clover Rd Manawa WI 54949	☐ Town ☐ Village ☒ City Little Wolf	4/5/'11	Email / Phone
5. BURNELL NEMMETZ	Burnell Nemmetz	N7449 White Clover Manawa 54949	☐ Town ☐ Village ☒ City Little Wolf	4/5/'11	Email / Phone
6. Ruth Nemmetz	Ruth A. Nemmetz	N7449 White Clover Rd. Manawa, WI 54949	☐ Town ☐ Village ☒ City Little Wolf	4/5/'11	Email / Phone
7. Peggy Erickson	Peg Erickson	715 Royalton St. Waupaca 54981	☐ Town ☐ Village ☒ City Waupaca	4/5/'11	Email / Phone
8. Jim Erickson		715 Royalton St Waupaca 54981	☐ Town ☐ Village ☒ City Waupaca	4/5/'11	Email / Phone
9. John Reinke	John Reinke	E6764 Cty X Weyauwega, WI 54983	☒ Town ☐ Village ☐ City	4/5/'11	Email / Phone
10. DAN MELZER	Daniel K Melzer	N7115 33rd DR Fremont WIS 54940	☒ Town ☐ Village ☐ City	4/5/'11	Email / Phone

Certification of Circulator

I Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd Clintonville, WI 54929 (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 / 5 / 2011 (date) Ramona Danke (signature of circulator)

Page No. #302

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Jered Wilson	Jered Wilson	1303 Wolf River Dr. Fremont WI 54940	☒ Town ☐ Village ☐ City Little Wolf	4/5/'11	Email Phone
2.	Joshua Korotka	Joshua Korotka	E5706 Swan Rd. Manawa WI 54949	☒ Town ☐ Village ☐ City Little Wolf	4/5/'11	Email Phone
3.	JIM DZIADOSZ	Jim Dziadosz	[illegible]	☒ Town ☐ Village ☐ City [illegible]	4-8-11	Email Phone
4.	Richard Stanchi-2	Richard Stanchi	Menasha WI 1159 Mayer St	☐ Town ☐ Village ☒ City	4/8/'11	Email Phone
5.	Adam Fenlaciki	Adam Fenlaciki	N2658 Melody Ln Waupaca, WI 54981	☒ Town ☐ Village ☐ City Farmington	4/8/'11	Email Phone
6.	Betty Eaton	Elizabeth M Eaton	EM65 Nelson Rd Iola WI 54945	☒ Town ☐ Village ☐ City Iola	4/8/'11	Email Phone
7.	Bryant L Wagarclay	Bryant L Wagarclay	600 Oak St Lot 216 Waupaca 54981	☒ Town ☐ Village ☐ City	4/8/'11	Email Phone
8.	Constance J Downey	Constance J Downey	N3899 9th Drive Hancock, WI 54943	☒ Town ☐ Village ☐ City Deerfield	4/8/'11	Email Phone
9.	Hanna Wachs	Hanna Wachs	Waupaca, WI 54981	☒ Town ☐ Village ☐ City Lind	4/8/'11	Email Phone
10.	MICHAEL SCHROEDER	Michael Schroeder	N5503 Hwy W WILD ROSE WI 54984	☐ Town ☒ Village ☐ City Wild Rose	4/8/'11	Email Phone

Certification of Circulator

I, Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd. Clintonville, WI 54929 (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 / 8 / 2011 (date)

Ramona Danke (signature of circulator)

Page No. #303

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	David Radtke	David Radtke	E6747 White Lake Rd Weyauwega WI 54983	☒ Town ☒ Village ☐ City Weyauwega	4/5/'11	Email Phone
2.	Diane Genge	Diane Genge	Waupaca, Wi 54981 121 Bunny Rd Q/D D14	☐ Town ☐ Village ☒ City Waupaca	4/5/'11	Email Phone
3.	Alizabethe Marschner	Alizabethe Marschner	108N. Lake St. Weyauwega, Wis 54983	☐ Town ☒ Village ☐ City Weyauwega	4/5/'11	Email Phone
4.	JAMES J MORTENSEN	James J mortensen	106 N STATE ST WAUPACA WI 54981	☐ Town ☐ Village ☒ City WAUPACA	4/8/'11	Email Phone
5.	DON JOERS	Don Joers	218 GRANITE 54981 Waupaca, WI 54981	☐ Town ☐ Village ☒ City WAUPACA	/'11 4-8-11	Email Phone
6.	Amanda Brickey	Amanda Brickey	Weyauwega WI 54983	☒ Town ☒ Village ☐ City Weyauwega	/'11 4-8-11	Email Phone
7.	Deawan Blank	Deawan Blank	Weyauwega WI 54983 1390 main St.	☒ Town ☒ Village ☐ City Weyauwega	/'11 4/8	Email Phone
8.	JOHN MCLENIGAN	John McLenigan	SCANDINAVIA 54977	☐ Town ☒ Village ☐ City SCANDINAVIA	4/8/'11	Email Phone
9.	Candyce Severson	Candyce Severson	800 WAUPACA Rd Ogdensburg WI 54962	☐ Town ☒ Village ☐ City Ogdensburg	4/8/'11	Email Phone
10.	Clydene Rohloff	Clydene Rohloff	N2758 ConservationRd Waupaca WI 54981	☒ Town ☐ Village ☐ City Waupaca	4/8/'11	Email Phone

Certification of Circulator

I, Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd Clintonville WI 54929 (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 / 8 / 2011 (date) Ramona Danke (signature of circulator)

Page No. # 324

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Janet Gunderson	Janet Gunderson	Iola. Wi. 54945 E580 N. Lake Rd.	☒ Town ☐ Village ☐ City Iola.	4/8/'11	Email Phone
2. Suzanne Hammonds	Suzanne E Hammonds	W8606 Co Rd C Wautoma, WI	☐ Town ☐ Village ☐ City Wautoma	4/8/'11	Email Phone
3. SHARON Kerneen	Sharon Kerneen	N2745 Timber LN Weyauwega	☒ Town ☐ Village ☐ City Roylaton	4/8/'11	Email Phone
4. John Kerneen	John Kerneen	N2745 Timber Ln. Weyauwega.	☒ Town ☐ Village ☐ City Roylaton	4/8/'11	Email Phone
5. Joan Pogrant	Joan Pogrant	N2783 County QQ Waupaca	☒ Town ~~☒ Village~~ ☐ City Farmington	4/8/'11	Email Phone
6. NORMAN WILSON	Norman Wilson	923 MEADOR WAUPACA, WI 54981	☐ Town ☐ Village ☒ City WAUPACA	4/8/'11	Email Phone
7. Rick Ferge	Rick Ferge	E6803 Guth Rd Weyauwega	☒ Town ☐ Village ☐ City Roylaton	4/8/'11	Email Phone
8. Andrew Ward	Andrew Ward	E4430 Stecks Rd Weyauwega	☐ Town ☐ Village ☒ City Waupaca	4/8/'11	Email Phone
9. Tiffany Ross	Tiffany Ross	W8767 Cty Rd C Wautoma WI	☐ Town ☐ Village ☒ City Wautoma	4/8/'11	Email Phone
10. [illegible]	[illegible]	W8767 Cty Rd C Wautoma WI 54982	☐ Town ☐ Village ☒ City Wautoma	4/8/'11	Email Phone

Certification of Circulator

I, Ramona Danke, (certify):
(name of circulator)

I reside at E7506 Beaver Creek Rd, Clintonville WI 54929
(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 / 8 / 2011 (date) Ramona Danke (signature of circulator)

Page No. # 3025

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 RUSSELL	Kathleen Russell	1318 TERRACE CT WAUPACA, WI 54981	☐ Town ☐ Village ☒ City WAUPACA	4/9/'11	Email Phone
2.	WESTFIELD JACKSON	Westfield Jackson	E3290 BAGS HILL Rd WAUPACA WI 54981	☒ Town ☐ Village ☐ City LIND	4/9/'11	Email Phone
3.	Marc Sorrens	Marc E Sorrens	N2315 River Rd Weyauwega, W. 54983	☐ Town ☒ Village ☐ City Weyauwega	4/9/'11	Email Phone
4.	THOMAS J. L. PRAHL	Thomas J Prahl	E7666 Cty RD X Weyauwega WI. 54983	☒ Town ☐ Village ☐ City MUKWA	4/9/'11	Email Phone
5.	WAYNE JOHNSON	Wayne Johnson	E2777 CRYSTAL Rd WAUPACA, WI	☒ Town ☐ Village ☐ City LIND	4/9/'11	Email Phone
6.	Mary Kamp	Mary Kamp	421 5th Street Waupaca, WI 54981	☐ Town ☐ Village ☒ City Waupaca	4/9/'11	Email Phone
7.	Janet Arndt	Janet Arndt	N7077 Hwy 49 Weyauwega WI 54983	☑ Town ☐ Village ☐ City W. Bloomfield	4/9/'11	Email Phone
8.	Greg Grosskopf	Greg Grosskopf	W3903 Beechnut Ln. Redgranite	☐ Town ☐ Village ☒ City Leon	4/9/'11	Email Phone
9.	Pamela J. Smith	Pamela J Smith	N2220 Old Highway 22 Waupaca, WI 54981	☒ Town Twp Dayton ☐ Village ☐ City	4/9/'11	Email Phone
10.	Ray A Smith	Ray A. Smith	N2220 Old Highway 22 Waupaca, WI 54981	☒ Town Twp Dayton ☐ Village ☐ City	4/9/'11	Email Phone

Certification of Circulator

I, Ramona Danke, (certify):
(name of circulator)

I reside at E7506 Beaver Creek Ln, Clintonville, WI 54929
(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 / 9 / 2011 Ramona L Danke
(date) (signature of circulator)

Page No. # 32

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Cheryl Sloan	Cheryl Sloan	W4786 Aspen Ct. Wild Rose, WI 54984	☒ Town ☐ Village ☐ City	4/8/'11	Em Pho
2. Rick Stuebs	Rick D[illegible]	E601 Frostvalley Rd Waupaca WI 54981	☒ Town ☐ Village ☐ City Farmington	4/8/'11	Em Pho
3. ~~Jeremy Hayes~~	[illegible]	2503 ~~[illegible]~~ Apt 3 ~~Green Bay WI~~	☐ Town ☐ Village ☐ City	/ /'11	Em Pho
4. Walter Kasper	Walter Kasper	135 Tustin Rd Fremont WIS	☐ Town ☒ Village ☐ City Fremont WIS	4/9/'11	Em Pho
5. Larry Clark	Larry Clark	9211 CTY Rd. A-H Fremont WI	☒ Town ☐ Village ☐ City Wolf River	4-9-11	Em Pho
6. Steven G. Sweet	Steven G. Sweet	710 E. Alfred St Weyauwega	☐ Town ☐ Village ☒ City Weyauwega	4-9-11	Em Pho
7. Cory Quick	Cory R Quick	E1873 Lakeshore DR Iola WI	☒ Town ☐ Village ☐ City Iola	4/9/'11	Em Pho
8. Joel Abel	Joel Abel	802 S Washington St Waupaca WI	☒ Town ☐ Village ☐ City Waupaca	4/9/'11	Em Pho
9. Richard Bina	Richard Bina	10508 CTY RD D Almond, WI	☒ Town ☐ Village ☐ City Belmont	4/9/'11	Em Pho
10. Donald Westfahl	Don Westfahl	N2051 Shadow rd Waupaca	☐ Town ☐ Village ☒ City Waupaca	4/9/'11	Em Pho

Certification of Circulator

I, Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd Clintonville, WI 54929
(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 / 9 / 2011 (date) Ramona Danke (signature of circulator)

Page No. #3027

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Kayla Fenlacki	Kayla Fenlacki	N2638 Melody Lane Waupaca, WI	☒ Town ☐ Village ☐ City Farmington	4/5/'11
2. Debbie L. Boers	Debbie L Boers	2110 Sunset Lake Rd Amherst [redacted], WI 54406	☒ Town ☐ Village ☐ City Amherst	4/5/'11
3. Yvonne Bonnell	Yvonne Bonnell	E5031 Haire Rd Weyauwega, WI 54983	☒ Town ☐ Village ☐ City Weyauwega	4/5/'11
4. Timothy L Meadows	Timothy Meadows	E5670 Lakeshore Dr. P.O.Box 146 Weyauwega, WI. 54983	☒ Town ☐ Village ☐ City Weyauwega	4/5/'11
5. Audrie M. Meadows	Audrie M Meadows	E5670 Lake Shore Drive P.O. 146 Weyauwega WI 54983	☐ Town ☐ Village ☐ City Weyauwega	4/5/11
6. Dawn Eller	Dawn Eller	1214 Terrace Ct Waupaca 54981	☐ Town ☐ Village ☐ City Waupaca	4/5/'11
7. Charlie Albrecht	Charlie Albrecht	112 Hwy QQ Apt D14 Waupaca, WI	☐ Town ☐ Village ☐ City Waupaca	4/9/'11
8. Tiffany Links	Tiffany Links	1321 terrace court Waupaca, WI 54981	☐ Town ☐ Village ☐ City Waupaca	4/5/'11
9. GARY WILSON	Gary Wilson	9836 HWY 22 WAUPACA WIS. 54981	☒ Town ☐ Village ☐ City PORTAGE	4-5
10. IAN TEAL	[signature]	9557 Cty RD H Fremont, WI 54940	☒ Town ☐ Village ☐ City Fremont	4/5/'11

Certification of Circulator

I, Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd, Clintonville, WI 54929 (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 / 5 / 2011 (date)

Ramona Danke (signature of circulator)

Page No. # 328

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. PATRICK ANCINEC	Patrick Ancinec	N5541 Cty Rd W Wild Rose WI 54984	☒ Town ☐ Village ☐ City SAXEVILLE	4 / 9 / '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, Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd Clintonville, WI 54929 (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 / 9 / 2011 (date) Ramona Danke (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Lynn Ponto	Lynn Ponto	E4242 Stecker Rd Weyauwega, WI 54983	☒ Town ☐ Village ☐ City Lind	4/9/'11	Ema Pho
2.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
3.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
4.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
5.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
6.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
7.			☐ Town ☐ Village ☐ City	/ /'11	Em 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, Lynne Kessler (name of circulator), (certify):

I reside at E8301 Hwy 54 New London 54961 (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)

Lynne Kessler (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Dawn Nicholson	Dawn Nicholson	N6662 31st Dr Wrightstown WI 54583	☑ Town West Bloomfield ☐ Village ☐ City	4 / 9 / '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, Charles C Bradley Jr (name of circulator), (certify):

I reside at W1155 State Rd 33, Portage, WI 53901 (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 / 09 / 2011 (date)

Charles C Bradley Jr (signature of circulator)

Page No. # 331

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Stephen Stead	Stephen Stead	711 LEIGHTON RD WAUPACA	☐ Town ☐ Village ☒ City WAUPACA	4/9/'11	Email Phone
2.	SANDIE VIRGALLITO-WACEK	Sandie Virgallito-Wacek	N8899 PAGEL Rd IOLA WI 54945	☒ Town ☐ Village ☐ City IOLA	4/9/'11	Email CR Phone
3.	Magnum Polmatier		108 Maple St. Waupaca,	☐ Town ☐ Village ☒ City Waupaca	4/9/'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, TERRY L. BARTELS (name of circulator), (certify):

I reside at 620 W SUPERIOR ST #8 PORTAGE, WI 53901 (circulator's residence – including number, street and municipality) 608-617-7614

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)

Terry L. Bartels (signature of circulator)

Page No. # 322

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. DANIEL RICKER		N2025 GUYEE WAUPACA, WI 54981	☒ Town LIND ☐ Village ☐ City	4 / 9 '11	Ema Pho
2.			☐ Town ☐ Village ☐ City	/ / '11	Ema 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, Jonathan Graw (name of circulator), (certify):

I reside at 638 Boyd St. Fond du Lac, WI 54935 (circulator's residence – including number, street and municipality)

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

9 / 9 / 2011
(date)

Jonathan Graw
(signature of circulator)

Page No. #3033

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Jesse Lepri	Jesse Lepri	445 B Division St Iola WI 54945	☐ Town ☑ Village ☐ City	4/9/'11	Email Phone
2. Jennifer Chapel	Jennifer Chapel	1042 Zdewski Dr Plover, WI 54467	☐ Town ☒ Village ☐ City	4/9/'11	Email Phone
3. Ken Swartz	K. Swartz	724 Ware St. Waupaca, WI 54981	☐ Town ☐ Village ☒ City Waupaca	4/9/'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, Lisa Aarli (name of circulator), (certify):

I reside at 2030 E Mifflin St. Madison WI 53704 (circulator's residence – including number, street and municipality)

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

4 / 9 / 2011 (date)

Lisa Aarli (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Peggy Baxter	Peggy Baxter	115 N State St.	☐ Town ☐ Village ☑ City Waupaca	4/9/'11	Email Phone
2.	Chad Baxter	Chad Baxter	118 N State St.	☐ Town ☐ Village ☑ City Waupaca	4/9/'11	Email Phone
3.	TRACY ZIELKE	Tracy Zielke	515 RIVER ST	☐ Town ☐ Village ☒ City WAUPACA	4/9/'11	Email Phone
4.	TODD IBE		106 N STATE ST	☐ Town ☐ Village ☒ City WAUPACA	4/9/'11	Email Phone
5.	THOMAS G BEST SR	Thomas G Best	111 MAPLE ST,	☐ Town ☐ Village ☒ City WAUPACA	/'11 4-9	Email Phone
6.	Kelly Gensler	Kelly	119 Maple St	☐ Town ☐ Village ☒ City Waupaca	4/9/'11	Email Phone
7.	Barbara J. Heiser	B.	122 maple st.	☐ Town ☐ Village ☒ City Waupaca	/'11 4 9	Email Phone
8.	Erica Spaulding	Erica	116 maple St	☐ Town ☐ Village ☒ City Waupaca	4/9/'11	Email Phone
9.	Donna Purchatke	Donna Purchatke	26 S Division	☐ Town ☐ Village Waupaca ☐ City	4/9/'11	Email Phone
10.	Hilda Klos	Hilda Klos	202 Lewiston	☐ Town ☐ Village Waupaca ☒ City	4/9/'11	Email Phone

Certification of Circulator

I, ROBERT Hoch (name of circulator), (certify):

I reside at 8389 Co. Rd. T ARPIN WI 54410
(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)

Robert Hoch (signature of circulator)

Page No. # 3035

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Marko Grundman	Marko Grundman	709 Holbeck	☐ Town ☐ Village ☒ City Waupaca	4 / 9 / '11	Email Phone
2.	Dan Peterson	Dan Peterson	717 Wesley	☐ Town ☐ Village ☒ City Waupaca	4 / 9 / '11	Email Phone
3.	Joanie Peterson	Joanie Peterson	717 Wesley	☐ Town ☐ Village ☒ City Waupaca	4 / 9 / '11	Email Phone
4.	William Rhodes	William Rhodes	701 Wesley St	☐ Town ☐ Village ☒ City Waupaca	4 / 9 / '11	Email Phone
5.	Peggy Green	Peggy Green	816 Parkview Way	☐ Town ☐ Village ☐ City Waupaca	/ / '11 4-9-11	Email Phone
6.	Mark Bacon	Mark Bacon	809 Parkview Way	☐ Town ☐ Village ☒ City Waupaca	/ / '11 4 9	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, Tina Leigh (name of circulator), (certify):

I reside at 117 Valley View Rd, Mt. Horeb, WI 53572 (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)

(signature of circulator)

Page No. #3036

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Debra J. Schroeder	Debra J. Schroeder	R 126 Crestview LN Waupaca WI 54981	☐ Town ☐ Village ☒ City Waupaca	4/9/'11	Email Phone
2. Randy L Lewis	Randy Lewis	234 Willard St ~~Waupa~~	☐ Town ☐ Village ☒ City Waupaca	4/9/'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, Randy Leigh (name of circulator), (certify):

I reside at 117 Valley View Road Manawa 54949 (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 / 9 / 2011 (date)

Randall Wayne Leigh (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Melissa Hoffland	[signature]	501 N. Franklin St Waupaca, WI 54981	☐ Town ☐ Village ☒ City Waupaca	4/9/'11	Email missy Phone
2. Nancy Anderson	[signature]	335 North St. Waupaca WI 54981	☐ Town ☐ Village ☒ City Waupaca	4/9/'11	Email Phone
3. Amanda Mueller	[signature]	315 South St Waupaca WI 54981	☐ Town ☐ Village ☒ City Waupaca	4/9/'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, Tina Leigh (name of circulator), (certify):

I reside at 117 Valley View Rd, Mt Horeb, WI 53572 (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)

[signature] (signature of circulator)

Page No. #3038

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Crystal M Dankert	Crystal Dankert	446 Center St	☐ Town ☐ Village ☑ City Waupaca	04 / 09 / '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, Frank Iltis (name of circulator), (certify):

I reside at 1830 Baird St., Madison, WI 53713 (circulator's residence – including number, street and municipality)

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

04 / 09 / 2011 (date)

Frank Iltis (signature of circulator)

Page No. # 3039

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Tammie Jensen	Tammie Jensen	E8609 Cty C Clintonville, WI 54929	☑ Town ☐ Village ☐ City Clintonville	3 / 19 '11	Email Phone
2.	William K Mommaerts	William K Mommaerts	1307 E Seeley St Milw WI 53207	☐ Town ☐ Village ☐ City	3 / 19 / '11	Email Phone
3.	Tami Bagstad	Tami Bagstad	272 Roosevelt Ave Clintonville, WI 54929	☐ Town ☐ Village ☒ City Clintonville	3 / 19 / '11	Email Phone
4.	Tyler Bagstad	Tyler Bagstad	272 Roosevelt Ave Clintonville, WI 54929	☐ Town ☐ Village ☐ City Clintonville	3 / 19 / '11	Email Phone
5.	Melissa Popp	Melissa Popp	111 N Main Street Clintonville WI 54929	☐ Town ☐ Village ☒ City Clintonville	/ / '11 3-19	Email Phone
6.	Wesley J Quinsaat Jr.	Wesley J Quinsaat Jr.	52 16th Street Clintonville WI 54929	☐ Town ☐ Village ☒ City Clintonville	3 / 19 / '11	Email Phone
7.	Harry Michalska	Harry Michalska	N1641 Two Creek Navarino Wisc. 54107	☐ Town ☒ Village ☐ City Navarino	3 / 19 / '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, Ramona Danke (name of circulator), (certify):

I reside at E7506 Beaver Creek Rd Clintonville, WI 54929 (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 / 19 / 2011 (date)

Ramona Danke (signature of circulator)

Page No. #3090

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Dolores A. Holzem	Dolores A. Holzem	555 E. Lake Avenue	☐ Town ☒ Village ☐ City Lake Delton	3/10/'11	Email Phone
2. Misty M. Gall	Misty M Gall	417 Locust St.	☐ Town ☒ Village ☐ City West Baraboo	3/10/'11	Email m Phone 6
3. Aimee B. Schulz	Aimee B. Schulz	3722 10th Ct.	☐ Town ☒ Village ☐ City Dell Prairie	3/10/'11	Email Phone
4. Jasper Kooij	[signature]	906 Clara Avenue	☐ Town ☒ Village ☒ City ~~Wisco~~ Lake Delton	3/14/'11	Email Phone
5. Shainey Engelbrecht	[signature]	48 Gravy LN WI Dells WI 53965	☐ Town ☒ Village ☐ City Lake Delton	3/14/'11	Email e Phone
6. Steven Ward	[signature]	7 Spruce Trl WI Dells WI 53965	☐ Town ☐ Village ☒ City Springville (Wi Dells)	3/14/'11	Email Phone
7. Tammy Leis	Tammy Leis	8 Spruce Trail WI Dells WI 53965	☐ Town ☐ Village ☒ City Springville	3/14/'11	Email Phone
8. Nick Leis	[signature]	8 Spruce Trail WI. Dells WI 53965	☐ Town ☐ Village ☒ City Springville (WI Dells)	3/14/'11	Email Phone
9. Sherrie Gilner	Sherrie Gilner	4120 W. 8th Ave	☒ Town ☐ Village ☐ City Dell Prairie Wisconsin Dells	3/14/'11	Email Twin Phone 608-
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Lawrence Gillick (name of circulator), (certify):

I reside at ~~Lawrence Gillick~~ 402 E Conant St. Portage (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 / 08 / 2011 (date)

Lawrence Gillick (signature of circulator)

3A Page No.

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. HEATHER L. JOHNSON	Heather L Johnson	223 W. Emmett Portage, WI 53901	☐ Town ☐ Village ☒ City Portage	3 /17/ '11	Email HLJot Phone 608
2. Marliene Salzwedel	Marliene Salzwedel	136A main St. Montello	☒ Town ☐ Village ☐ City Montello	3/17/'11	Email Phone 6
3. Deidre Horne	Deidre H. Horne	rt1686 Coty Rd M montello WI 53949	☒ Town ☐ Village ☐ City Montello	3 /17/'11	Email dc Phone
4. Dennis L. Baker	Dennis L Baker	N9805 Hwy 44, Portage, WI 53901	☒ Town ☐ Village ☐ City Lewiston	3 /17/'11	Email dl Phone
5. Justine Hermanson	Justine Hermanson	601 Wauona TRls Lot 65 Portage, WI 53901	☐ Town ☐ Village ☒ City Portage	/'11 3 17 /	Email Phone 6
6. Geoff Heim		816 Hamilton St Portage WI 53901	☐ Town ☐ Village ☒ City Portage	3 /17/'11	Email Phone 6
7. DAVID GUNDERSON		2900 FOREST HILL DRIVE PORTAGE, WI 53901	☐ Town ☐ Village ☒ City PORTAGE	3 /17/'11	Email Phone
8. Pamela J. Yaroch	Pam Yaroch	N8034 8th. Drive Westfield, WI 53964	☐ Town ☐ Village ☒ City Westfield	3 /17/'11	Email Phone 6
9. Tim Yaroch		N8034 8th Dr Westfield Wi 53964	☐ Town ☐ Village ☒ City Newton	3 /17/'11	Email Phone
10. Colleen Sengbusch	Colleen Sengbusch	526 S Miller St Oxford WI 53952	☐ Town ☒ Village ☐ City Oxford	3 17/'11	Email Phone

Certification of Circulator

I, Tricia Hawkins (name of circulator), (certify):

I reside at 1612 Cleveland Beloit WI 53511 (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 / 17 / 2011 (date)

Tricia Hawkins (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Janice Rakowski	Janice Rakowski	261 Jefferson St Baraboo, WI 53913	☐ Town ☐ Village ☒ City Baraboo	3/17/'11	Email Phone
2. VERA DWARS	Vera Dwars	1220 Jefferson St Baraboo, WI 53913	☐ Town ☐ Village ☒ City Baraboo	3/17/'11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Claire Waldvogel (name of circulator), (certify):

I reside at 402 East Conant Street Portage, WI 53901 (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 / 17 / 2011 (date)

Claire Waldvogel (signature of circulator)

Page No. #3

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Leah Woller	Leah Woller	322 3rd. Ave. Baraboo, WI 53913	☐ Town ☐ Village ☒ City Baraboo	3 / 9 / '11	Email lw Phone 71
2. Annemieke Savert	ASAVert	906 Clara Ave Wisc. Dells, WI 53965	☐ Town ☒ Village ☐ City Lake Delton	3 / 10 / '11	Email a Phone 6
3. Bobbie Sessler	Bobbie L. Sessler	E9324 Terrytown Rd. Baraboo	☐ Town ☒ Village ☐ City Rock Springs	3 / 10 / '11	Email Phone
4. Maggie McDonald	Maggie McDonald	1611 Pleasant View Dr. Wis. Dells, WI 53965	☐ Town ☐ Village ☒ City Wis. Dells	3 / 11 / '11	Email MK Phone 60
5. Teresa Regel	Teresa Regel	E 9845A Berry Rd	☒ Town ☐ Village ☐ City Delton	3 / 11 / '11	Email Phone
6. Sandra Nachreiner	Sandra Nachreiner	N6122 Cty U Portage WI 53901	☒ Town ☐ Village ☐ City Caledonia	3 / 11 / '11	Email Phone
7. Stephanie Czuprynko	Stephanie Czuprynko	E11340 Hillside Drive Lake Delton WI 53940	☒ Town ☐ Village ☐ City of Delton	3 / 11 / '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, Lawrence Gillick (name of circulator), (certify):

I reside at 402 E Conant St. Portage (circulator's residence – including number, street and municipality)

I personaliy 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 / 08 / 2011 (date)

Lawrence Gillick (signature of circulator)

Page No. 204

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Curt Nachreiner	Curt Nachreiner	N6122 CTY Hwy U Portage WI 53901	☒ Town ☐ Village ☐ City Caledonia	3 / 11 / '11	Email Phone
2.	Ralph B. Nachreiner	Ralph B. Nachreiner	N4122 Co Rd U Portage WI 53901	☒ Town ☐ Village ☐ City Caledonia	3 / 11 / '11	Email Phone
3.	Pauline Nachreiner	Pauline Nachreiner	N6122 Co Rd U Portage, WI 53901	☒ Town ☐ Village ☐ City Caledonia	3 / 11 / '11	Email Phone
4.	Mindy Behnke	Mindy Behnke	2633 New Pines Rd Portage, WI 53901	☐ Town ☐ Village ☒ City Portage	3 / 12 / '11	Email Phone
5.	Lennis Woznick	Lennis Woznick	15A Oriole Ave WI Dells WI 53965	☐ Town ☒ Village ☐ City Lake Delton	/ / '11 3 25	Email Phone
6.	Dan Schultz	Dan Schultz	523 Cedar St. WI Dells WI 53965	☐ Town ☐ Village ☐ City WI Dells	3 / 25 / '11	Email Phone
7.	Dale B Lund		15 A Oriole Ave Wis Dells WI, 53965	☐ Town ☒ Village ☐ City Lake Delton	/ / '11 3 25	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, Lawrence Gillick (name of circulator), (certify):

I reside at 402 E. Conant St. Portage (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 / 08 / 2011 (date)

Lawrence Gillick (signature of circulator)

Page No. # 3045

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. GEORGE I. KOEPP	George I Koepp	N5841 Owen Park Rd Portage, WI 53901	☑ Town ☐ Village ☐ City Caledonia	3 /15/ '11	Email Phone
2. Paul A. Roth	Paul A. Roth	S3723 Bent Tree Dr. Baraboo, WI 53913	☑ Town ☐ Village ☐ City Fairfield	3 /24/ '11	Email Phone
3. John Sorenson	John Sorenson	729 1/2 2nd Avenue Baraboo, WI 53913	☐ Town ☐ Village ☑ City Baraboo	3 /28/ '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, Claire Waldvogel (name of circulator), (certify):

I reside at 402 East Conant Portage WI 53901 (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 / 08 / 2011 (date)

Claire Waldvogel (signature of circulator)

Page No. # 3046

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Auchtung	Thomas Auchtung	N7744 Radio Rd	☒ Town ☐ Village ☐ City Ripon	4 / 5 / '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, Mary Gorman (name of circulator), (certify):

I reside at N. 8135 Fenske Rd Marcellon (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 / 8 / 2011 (date)

Mary Gorman (signature of circulator)

Page No. # 3047

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Michael R. Ferguson	Michael R Ferguson	356 N. Washington St	☐ Town ☑ Village ☐ City Wyocena	3 / 14 / '11	Email Phone
2. Brenda L. May	Brenda L May	513 W. Cook Street	☐ Town ☐ Village ☒ City Portage	4 / 4 / '11	Email Phone
3. Autumn M. Pease	Autumn M Pease	N6012 Hwy GG	☒ Town ☐ Village ☐ City Wyocena	4 / 4 / '11	Email Phone
4. ~~Jotham E. Pease~~	~~Jotham E Pease~~	N6012 Hwy GG	☒ Town ☐ Village ☐ City Wyocena	~~4 / 7~~ / '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, Jotham E. Pease (name of circulator), (certify):

I reside at N6012 Hwy GG, Wyocena, WI 53969 (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 / 8 / 2011 (date)

Jotham E. Pease (signature of circulator)

Page No. #3048

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Jotham E. Pease	Jotham E. Pease	N6012 Hwy GG	☐ Town ☐ Village ☐ City Wyocena	4 8 / '11	Email Phone
2. Brad Holly	Brad Holly	219 S Washington St	☐ Town ☐ Village ☐ City Wyocena	4 / 8 / '11	Email Phone
3. [illegible]			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4. Sarah Holly	Sarah Holly	219 South Washington St.	☐ Town ☒ Village ☐ City Wyocena	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, Elizabeth Trevino (name of circulator), (certify):

I reside at 808 E Johnson St Apt 1 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 / 08 / 2011 (date)

(signature of circulator)

Page No. #349

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Sobginski	Linda Sobginski	W14733 Kurtz Dr Wis Dells WI 53965	☒ Town ☐ Village ☐ City Newport	4/1/'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, Deborah Kinder (name of circulator), (certify):

I reside at 1510 River Rd WI Dells 53965 (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 / 8 / 2011 (date)

Deborah Kinder (signature of circulator)

Page No. #3050

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Parks	[signature]	3266A Lane Wis Dells	☑ Town ☐ Village ☐ City Springville	4-6-11 / /'11	Email Phone 6
2. Robert Bond	[signature]	5462 Lyndon	☐ Town ☐ Village ☑ City Wisc. Dells	/ /'11 4 6 11	Email Phone 6
3. Lydia Hill	Lydia Hill	890 Meadow Ln	☐ Town ☐ Village ☑ City Wisconsin Dells	4 6 /'11	Email Phone 60
4. MICHAEL REEVES	[signature]	630 E. Lake Ave	☐ Town ☑ Village ☐ City Lake Delton	4 6 /'11	Email Phone 60
5. Kristen Gonzales	Kristen Gonzales	W1440 Valley View Ct.	☑ Town ☐ Village ☑ City Wis. Dells	4 6 /'11	Email Phone 60
6. TERESA DEEMS	Teresa Deems	Wisconsin Dells 4164 6th Lane	☑ Town ☐ Village ☐ City Dell Prairie	4 7 /'11	Email Phone 6
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, Deborah Kinder, (certify):
(name of circulator)

I reside at 1510 River Rd Wi Dells
(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 / 8 / 2011 (date) Deborah Kinder (signature of circulator)

Page No. # 3051

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Janice R. Cloud	Janice R. Cloud	PO Box E10370 Painters Lane ~~Lake Delton~~ Wis Dells, WI 53940	☒ Town Delton ☐ Village ☐ City	4 / 5 / '11	Email / Phone
2.	Owen Cloud Sr	Owen Cloud Sr	E10370 Painters Lane Wi. 53940	☒ Town Delton ☐ Village ☐ City	4 / 5 / '11	Email / Phone
3.	Ruth K. Dobush	Ruth K. Dobush	S2508 Hastings Rd Reedsburg WI 53959	☒ Town ☐ Village ☐ City Delton	4 / 5 / '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, JOE O'BRIEN (name of circulator), (certify):

I reside at E10140 Shady Ln. Rd - Reedsburg, WI 53959 (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 5th / 2011 (date)

Joseph M. O'Brien (signature of circulator)

Page No. 3 #3052

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Katie Chandler	Katie Chandler	N8517 Fox Run Rd Wisconsin Dells, WI	☐ Town ☒ Village ☐ City Newport	4 / 8 / '11	Email Ste Phone 60
2. Steve Schill	[signature]	N8517 Fox Run Rd Wisconsin Dells, WI	☐ Town ☒ Village ☐ City Newport	4 / 8 / '11	Email Ste Phone (
3. William Cross	William Cross	419 N. Maple North Freedom	☐ Town ☒ Village ☐ City North Freedom	4 / 8 / '11	Email Will Phone
4. Marilyn Birkholz	Marilyn A Birkholz	N8443 Pine View Dr Wis. Dells, Wi. 53965	☐ Town ☐ Village ☐ City Newport	4 / 08 / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

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

I reside at Bert C Sylvander W1717 Smith Rd Th/Lyndon
(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 / 8 / 2011 (date) [signature] (signature of circulator)

Page No. # 3053

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Violet Bono	Violet J. Bono	615 Prospect Ave.	☐ Town ☐ Village ☑ City Portage, WI.	3/19/'11	Email / Phone
2. Monica Schultz	Monica Schultz	407 Silver Lake	☐ Town ☐ Village ☑ City Portage, WI	3/18/'11	Email / Phone
3. Denise Crawford	Denise Crawford	508 DeForest St	☐ Town ☑ Village ☐ City DeForest, WI	3/18/'11	Email / Phone
4. JAMES POETTER	James H Poetter	DeForest WI 53532 → PO Box 267 OXFORD, WI →	☐ Town ☑ Village ☐ City OXFORD	3/18/'11 3-18-11	Email / Phone
5. Rixanne Poetter	Rixanne Poetter	P.O. Box 267 Oxford, WI →	☐ Town ☑ Village ☐ City Oxford	3/18/'11 //	Email / Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email / Phone

Certification of Circulator

I, Catherine Stephens (name of circulator), (certify):

I reside at 204 Division St., Madison, WI 53704 (circulator's residence -- including number, street and municipality)

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

3 / 18 / 2011 (date)

Catherine Stephens (signature of circulator)

305A

Page No. #

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Earl Atkinson	Earl Atkinson	218 Wauona Trail Portage, Wisc 53901	☐ Town ☐ Village ☒ City CR6	3/16/'11	Email Phone 74
2. Angela Bowers	Angela Bowers	410 Wauona Trl Portage, WI 53901	☐ Town ☐ Village ☒ City CR6	3/16/'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, Colin Gillis (name of circulator), (certify):

I reside at 1242 Morrison Court, Apt. 2 (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 / 16 / 2011 (date)

Colin K. Gillis (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Gray	Barb Gray	408 Collins St. #5 Portage	☐ Town ☐ Village ☒ City Portage	3/16/'11 20	Email Phone
2.	Dick Shields	Dick Shields	408 Collins #5	☐ Town ☐ Village ☒ City Portage	3/16/'11 20	Email Phone
3.	Ralph Taylor	Ralph Taylor	408 Collins St	☐ Town ☐ Village ☒ City CR6 Portage WISC	3/16/'11 CR6	Email Phone
4.	Eugene Hintz	Eugene J. Hintz	540 W. Collins St	☐ Town ☐ Village ☒ City CR6 Portage, WI	3-16-11	Email Phone
5.	Larry Poteete	Larry Poteete	540 W Collins St	☐ Town ☐ Village ☒ City CR6 Portage	3-16-11	Email Phone
6.	Eunice Poteete	Eunice Poteete	540 W Collins ST	☐ Town ☐ Village ☒ City CR6 Portage	3/16/'11	Email Phone
7.	Ruth Dickow	RUTH DICKOW	2685 Airport Rd.	☐ Town ☐ Village ☒ City CR6 Portage	3-16-11	Email Phone
8.	Wayne Duncan	Wayne Duncan	2685 Airport Rd	☐ Town ☐ Village ☒ City CR6 Portage	3/16/'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Colin Gillis (name of circulator), (certify):

I reside at 1242 Morrison Court, Apt. 2 (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 / 16 / 2011 (date)

Col R. Gill (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Orris Cook	Orris Cook	W6466 E North St	☐ Town ☑ Village ☐ City Dalton	3/15/'11	Email Phone
2.	Robert Luedke	Robert Luedke	6531 W North St.	☐ Town ☑ Village ☐ City Dalton, WI	3/15/'11	Email Phone
3.	Cory Campbell	C Cgll	W6549 W North St	☐ Town ☑ Village ☐ City Dalton, WI	3/15/'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, Justin Horn (name of circulator), (certify):

I reside at 40 Lakewood Gardens Ln, Madison, WI JH (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 / 15 / 2011 (date)

Justin M. Horn (signature of circulator)

Page No. # 3051

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Alan J. Bennett	Alan J Bennett	W2046 Golden Rd Dalton, WI 53926	☒ Town ☐ Village ☐ City Buffalo	03/21/'11	Email Phone
2. Jeff Deakin	Jeff Deakin	W2434 Grouse Rd Dalton WI 53926	☒ Town ☐ Village ☐ City Buffalo	3/21/'11	Email Phone
3. Linda Harrison	Linda Harrison	W2371 Grouse Rd Dalton WI 53926	☒ Town ☐ Village ☐ City Buffalo	3/21/'11	Email Phone
4. Amy Riddle	Amy Riddle	W2281 Grouse Rd Dalton WI 53926	☒ Town ☐ Village ☐ City Buffalo	3/21/'11	Email Phone
5. Jamie Riddle	Jamie Riddle	W2281 Grouse Rd Dalton WI 53926	☒ Town ☐ Village ☐ City Buffalo	3/21/'11	Email Phone
6. Claire Warnke	Claire Warnke	N114 State Rd 22 Pardeeville WI 53954	☒ Town ☐ Village ☐ City Buffalo	3/21/'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Karen Wallenberg (name of circulator) Buffalo township (certify):

I reside at W2540 Grouse Rd Dalton WI 53926
(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 / 30th / 2011
(date)

Karen Wallenberg
(signature of circulator)

3558 R

Page No. #

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Ken Norton	Ken Norton	103. N Main St Big Falls Wi 54926	☐ Town ☒ Village ☐ City	4/7/'11	Email Phone
2. FAYE KRAUSE	Faye Krause	P.O. Box 25 / 215 Main Big Falls WI 54926	☐ Town ☒ Village ☐ City	4-7 /'11	Email Phone
3. ANDY MEHLBERG	Andy Mehlberg	BIG FALLS WI 54926 Box 11 / 211 S. Main St	☐ Town ☒ Village ☐ City	4/7/'11	Email Phone
4. DAVID Mehlberg	David Mehlberg	330 Bridge St Manawa, WI 54949	☐ Town ☒ Village ☐ City	4/7/'11	Email Phone
5. Karen Zuehl	Karen Zuehl	120 E Chester St. Big Falls, WI 54926	☐ Town ☒ Village ☐ City	4/7/'11	Email Phone
6. BRANDA ZUEHL	Branda Zuehl	120 E Chester St Big Falls WI 54926	☐ Town ☒ Village ☐ City	4/7/'11	Email Phone
7. ~~Kate Love~~ Kate Love	~~Kate Love~~ Kate Love	215 Meyer St Marion WI 54950	☒ Town ☐ Village ☐ City	4/7/'11	Email Phone
8. Robert Miller	Robert Miller	264 Chester St. Big Falls Wi. 54926.	☐ Town ☒ Village ☐ City	4/7/'11	Email Phone
9. JOHN MC CARVILLE	John McCarville	133 E. Harrison St BIG FALLS, WI 54926	☐ Town ☒ Village ☐ City	4/7/'11 11	Email Phone
10. Ruth McCarville	Ruth McCarville	133 E. Harrison St Big Falls, WI 54926	☐ Town ☒ Village ☐ City	4/7/'11 11	Email Phone

Certification of Circulator

I, Karen B. Christen (name of circulator), (certify):

I reside at 124 Center St / Big Falls WI 54926 P.O. Box 37 (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 / 8 / 2011 (date)

Karen B. Christen (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. ~~Kelly~~ Kloehn	~~Kelly~~ Kloehn	105 E Spring New London WI	☐ Town ☐ Village ☒ City New London	3/30/'11	Email Phone
2. ~~Nicole~~ Stenz ~~Nicole~~ Stenz	Nicole Stenz	412 W. Beacon Ave. New London	☐ Town ☐ Village ☒ City New London	3/30/'11	Email Phone
3. Sue Tripp	Sue Tripp	1918 Nassau St New London WI	☐ Town ☐ Village ☒ City New London	3/30/'11	Email Phone
4. Heidi Maurits	Heidi Maurits	N4571 Ferry St New London WI	☒ Town ☐ Village ☐ City Manawa	3/31/'11	Email Phone
5. Courtney Barth	Courtney Barth	229 Progress Rd #14 Manawa, WI 54949	☐ Town ☐ Village ☒ City Manawa	3/31/'11	Email Phone
6. Mike Maurits	Mike Maurits	N4571 Ferry St New London, Wis.	☒ Town ☐ Village ☐ City Manawa	3/31/'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, Mary B. Abbe (name of circulator), (certify):

I reside at E9159 County Rd X Newlondon WI 54961 (circulator's residence - including number, street and municipality)

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

4 / 5 / 2011 (date)

Mary Abbe (signature of circulator)

Page No. #3060

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Kristi Hohlstein	Kristi Hohlstein	4699 Willow St. PO Box 34 Morrisonville, WI 53571	☐ Town ☐ Village ☒ City DeForest/ Morrisonville	3/31/'11	Em Kr Pho
2. James Hohlstein	James Hohlstein	4699 Willow St. PO Box 34 Morrisonville, WI 53571	☐ Town ☐ Village ☒ City DeForest/ Morrisonville	3/31/'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, Beryl Gribbon Fago (name of circulator) (certify)

I reside at B15607 Butts Corners Rd, Cambridge 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.

3/31/2011 (date)

Beryl Gribbon Fago (signature of circulator)

Page No. #30[illegible]

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 GORDON	Gerald Gordon	N4791 CTY A	☑ Town OXFORD ☐ Village ☐ City	3/12/'11	Email Phone
2.	Richard Nesbit	Richard Nesbit	N4667 Cty A	☑ Town Oxford ☐ Village ☐ City	3/12/'11	Email Phone
3.	Frances Nesbit	Frances Nesbit	N4667 Cty Rd A	☑ Town ☐ Village ☐ City Oxford	3/12/'11	Email Phone
4.	Barbara Holtz	Barbara Holtz	W8086 Fawn Ave	☑ Town ☐ Village ☐ City Westfield	3/12/'11	Email Phone
5.	Ronald Holtz	Ronald J. Holtz	W 8086 FAWN AV.	☐ Town ☐ Village ☐ City WESTFIELD	3 12 11	Email Phone
6.	~~ROLAND I MINTER~~	Robert T. Minter	~~396 FOX LN~~ ~~Oxford, WI.~~	☑ Town Jackson ☐ Village ☐ City ~~Oxford~~	3/14/11	Email Phone
7.	JAGODA ANDRESKA	Jagoda Andreska	3863 5th Dr lot 25 Wis. Dells WI 53965	☑ Town ☐ Village ☐ City New Haven	3/14/'11	Email Phone
8.	DENNIS LARSON	Dennis Larson	3750 4TH DR Oxford WI	☑ Town ☐ Village ☐ City OXFORD	3/14/'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Ronald J. Holtz (name of circulator), (certify):

I reside at W 8086 FAWN AVE OXFORD, WI 53952
(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 / 08 / 2011
(date)

Ronald J. Holtz
(signature of circulator)

Page No. # 3062

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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	Email / Phone
1.	MARY J. REILLY	Mary J. Reilly	N2630 Bughs Lake Road Wautoma, Wi 54982	☒ Town ☐ Village Wautoma ☐ City	4/4/'11	5[illegible]
2.				☐ Town ☐ Village ☐ City	/ /'11	
3.				☐ Town ☐ Village ☐ City	/ /'11	
4.				☐ Town ☐ Village ☐ City	/ /'11	
5.				☐ Town ☐ Village ☐ City	/ /'11	
6.				☐ Town ☐ Village ☐ City	/ /'11	
7.				☐ Town ☐ Village ☐ City	/ /'11	
8.				☐ Town ☐ Village ☐ City	/ /'11	
9.				☐ Town ☐ Village ☐ City	/ /'11	
10.				☐ Town ☐ Village ☐ City	/ /'11	

Certification of Circulator

I, MARY J. REILLY (name of circulator), (certify):

I reside at N2630 BUGHS LAKE ROAD Wautoma, Wi 54982 (circulator's residence – including number, street and municipality)

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

APRIL / 4 / 2011 (date)

Mary J. Reilly (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	MARIANNE HINTZ		E7763 KNITT ROAD CLINTONVILLE, WI 54929	☒ Town ☐ Village ☐ City LARRABEE	3/27/'11	Email Phone
2.	SHERMAN HINTZ	Sherman Hintz	E7763 KNITT RD. CLINTONVILLE, WI.	☒ Town ☐ Village ☐ City LARRABEE	3/27/'11	Email Phone
3.	Jennifer Carrick	Jen Carrick	N10777 Hilltop Road Clintonville WI 54929	☒ Town ☐ Village ☐ City Larrabee	3/27/'11	Email Phone
4.	Steven Hintz	Steven L. Hintz	E8836 CTY. Rd. C Clintonville, WI 54929	☒ Town ☐ Village ☐ City Larrabee	3/27/'11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Diane R. Hintz (name of circulator), (certify):

I reside at 8 Springfield ct. 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.

04 / 11 / 2011 (date) Diane R. Hintz (signature of circulator)

Page No. #3004

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Brooke Dykstra	Brooke Dykstra	221 Watertower St.	☐ Town ☐ Village ☒ City Ripon WI	3/30/'11
2.	Rhonda Tebon	Rhonda Tebon	615 Woodside Ave	☐ Town ☐ Village ☐ City Ripon, WI	3/30/'11
3.	Ryan Vespia	Ryan Vespia	623 Woodside AVE.	☐ Town ☐ Village ☒ City Ripon	3/30/'11
4.	James A Rico	James A. Rico	623 Woodside ave	☐ Town ☐ Village ☒ City Ripon	3/30/'11
5.	Patti Adocta	Patti A. Docta	634 Park St.	☐ Town ☐ Village ☒ City Ripon	4/5/'11
6.	Kyle Bergevin	Kyle Bergevin	34 Warren St	☐ Town ☐ Village ☒ City Ripon	4/5/'11
7.	Amber Kay Prellwitz	Amber Kay Prellwitz	433 W. Fond Du Lac St.	☐ Town ☐ Village ☒ City Ripon	4/5/'11
8.	Ruth Cornwell	Ruth Cornwell	834 Congress St	☐ Town ☐ Village ☒ City Ripon	/'11 4-10
9.	Leland Cornwell	Leland Cornwell	339 Congress St	☐ Town ☐ Village ☒ City Ripon	/'11 4/10
10.				☐ Town ☐ Village ☐ City	/'11

Certification of Circulator

I, Mary A Filion-Zuelsdorf (name of circulator), (certify):

I reside at N4048 Amity Rd Brandon, WI 53919 (circulator's residence – including number, street and municipality)

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

4 / 10 / 2011 (date)

Mary A Filion-Zuelsdorf (signature of circulator)

Page No. # 3065

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Debra Dyson	Debra Dyson	532 Metomen Rdt	☐ Town ☐ Village ☐ City Ripon	3/19/'11	Email Phone
2.	Joshua Law		532 1/2 Metomen	☐ Town ☐ Village ☐ City Ripon	3/19/'11	Email Phone
3.	Norma L Acevedo	Norma L Acevedo	609 Metomen	☐ Town ☐ Village ☐ City Ripon	3/19/'11	Email Phone
4.	David Kanneman	David Kanneman	340 E. Sullivan	☐ Town ☐ Village ☐ City	3/19/'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, Mary A Filion-Zuelsdorf (name of circulator), (certify):

I reside at 4048 Amity Rd Brandon, 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.

3 / 19 / 2011 (date)

Mary A Filion-Zuelsdorf (signature of circulator)

Page No. #3 of 16

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Jesse Milne		N6952 City A Wisconsin WI 54958	☐ Town ☑ Village West Bloomfield ☐ City	4/2/'11	Email Phone
2.	Susan Laffin		W333 City Rd D Berlin WI 54923	☐ Town ☐ Village ☐ City Poysippi	4/2/'11	Email Phone
3.	JEFFERY MURPHY		W1433 EAGLE ROAD OSHKOSH WISC 54960	☒ Town ☐ Village ☐ City MECAN	4/2/'11	Email Phone
4.	Kevin Eichmann		Berlin WI 54923 N8230 County Rd F	☒ Town ☐ Village ☐ City	4/2/'11	Email Phone
5.	Lisa Sharpe		Ripon, WI 54971 in 27 Park St	☐ Town ☐ Village ☒ City	4/5/'11	Email Phone
6.	Kelly Bartlett		14 Union St Ripon, WI 54971	☐ Town ☐ Village ☒ City Ripon city	4/5/'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, Thomas J Zuelsdorf (name of circulator), (certify):

I reside at N4048 Amity Rd Brandon WI 53919 (circulator's residence – including number, street and municipality)

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

04 / 05 / 2011 (date)

Thomas J Zuelsdorf (signature of circulator)

Page No. # 3067

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Yolanda Wolaszyn	Yolanda Wolaszyn	N6527 Searle Rd. Ripon WI 54971	☒ Town ☐ Village ☐ City Metomen	3/7/'11	Em Pho
2. GLENN ZAHN	Glenn Zahn	W1305 BERG Rd Brandon, WI	☐ Town ☐ Village ☐ City Trut	/ /'11 3.14.11	Em Pho
3.			☐ Town ☐ Village ☐ City	/ /'11	Em Pho
4.			☐ Town ☐ Village ☐ City	/ /'11	Ema Pho
5.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
6.			☐ Town ☐ Village ☐ City	/ /'11	Ema Phor
7.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
8.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phon
9.			☐ Town ☐ Village ☐ City	/ /'11	Emai Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Laura J Keplin (name of circulator), (certify):

I reside at N6976 St Rd 44-49 Ripon, WI 54971 (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 / 28 / 2011 (date)

Laura J Keplin (signature of circulator)

Page No. # 20108

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Robert Heidger	Robert Heidger	N3147 CTY E Waupaca WI 54981	☒ Town ☐ Village ☐ City	4/2/'11	Em Phc
2.	LeRoy Lehman	LeRoy Lehman	825 Royalton St Waupaca WI 54981	☐ Town ☐ Village ☒ City Waupaca	4/2/'11	Em Pho
3.	Erika Wilson	Erika Wilson	E2298 Fawn Ridge Ct. Waupaca, WI 54981	☒ Town ☐ Village ☐ City Farmington	4/2/'11	Em Pho
4.	LOUISE L. BARTHEL	Louise L. Barthel	N7728 NETZLER RD IOLA WI 54945	☐ Town ☒ Village ☐ City IOLA	4/2/'11	Em Pho
5.	Roger W Barthel	Roger W Barthel	N7728 Netzler Rd Iola Wi 54945	☐ Town ☒ Village ☐ City IOLA	4/2/'11	Em Phon
6.				☐ Town ☐ Village ☐ City	/'11	Emai Pho
7.				☐ Town ☐ Village ☐ City	/'11	Emai Pho
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, Meldon Elgersma (name of circulator), (certify):

I reside at N8551 Hwy 44 Pardeeville, Wi 53954 (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 / 2 / 2011 (date)

Meldon Elgersma (signature of circulator)

Page No. #3069

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Joyce E. Schaaf	Joyce E. Schaaf	200 Quetuoak Baraboo 53913	☐ Town ☐ Village ☐ City LAKE DELTON	05/26/'11	Email JSCH Phone
2. Alvin Drucker	Alvin L. Drucker	W14617 Fox Run Rd. Wisconsin Dells 53965	☑ Town ☐ Village ☐ City Newport	05/26/'11	Email Phone 6
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, _____ (certify):
(name of circulator)

I reside at _____
(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.

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

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Matt Roble	Matt Roble	33B Grand Canyon Dr. Baraboo, WI 53913	☐ Town ☒ Village ☐ City Lake Delton	3 / 23 / '11	Email Phone
2.	Lindsay Marston	Lindsay Marston	115 Forest Dr. Apt. 1002 Wisconsin Dells, WI	☒ Town ☐ Village ☐ City Town of Delton	3 / 23 / '11	Email Phone
3.	Linda Marston	Linda Marston	1022 Indiana Ave. Wis. Dells, Wis. 53965	☐ Town ☐ Village ☒ City	3 / 23 / '11	Email Phone
4.	JAMES DONOVAN	James Donovan	N455 O'KEEFE Rd. ENDEAVOR, WI 53930	☒ Town ☐ Village ☐ City DOUGLAS	3 / 24 / '11	Email Phone
5.	BARBARA DONOVAN	Barbara Donovan	N 455 O'KEEFE RD ENDEAVOR WI 53930	☒ Town ☐ Village ☐ City DOUGLAS	3 / 24 / '11	Email Phone
6.	JILL CAPELLE	Jill Capelle	N9879 STOMNER DR Wisconsin Dells Wi 53965	☒ Town ☐ Village ☐ City NEWPORT	3 / 24 / '11	Email Phone
7.	C. Scott Rittmann	C. Scott Rittmann	N 606 3rd Ave Endeavor Wi. 53930	☒ Town ☐ Village ☐ City Douglas	4 / 4 / '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 L. Brancel (name of circulator), (certify):

I reside at W7995 State Rd 23 Endeavor 53930 (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 L Brancel (signature of circulator)

Page No. # 3071

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Coughlin	Michelle Coughlin	1620 Cole Ln Wis. Dells	☐ Town ☐ Village ☒ City Wis. Dells	3 / 23 / '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, James L. Brancel (name of circulator), (certify):

I reside at W7995 State Rd 23 Endeavor 53930 (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 L Brancel (signature of circulator)

Page No. # 3072

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Robert Walker	Robert Walker	1022 Hillside Ct Wi Dells, WI 53965	☐ Town ☐ Village ☒ City Dells	9/10/'11	Email Phone
2.	Raymond Donovan	Raymond Donovan	512 Pine Street Wi Dells, WI 53965	☐ Town ☐ Village ☒ City Dells	9/10/'11	Email Phone
3.	Destiny Taylor	Destiny Taylor	512 Pine St 53965 Wi Dells WI	☐ Town ☐ Village ☒ City Dells	9/10/'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, Lucille Davis (name of circulator), (certify):

I reside at 125 N Pine St. Adams, WI 53910 (circulator's residence – including number, street and municipality)

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

4 / 10 / 2011 (date)

Lucille Davis (signature of circulator)

Page No. 3 # 3073

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Jaime L. Buck	Jaime L. Buck	3160 Hwy 13 Wis. Dells, WI 53965	☐ Town ☐ Village ☐ City	4 / 10 / '11	Email Phone
2. Tom Sepkovich	Tom Sepkovich	3160 Hwy 13 Wis. Dells, WI 53965	☐ Town ☐ Village ☐ City	4 / 10 / '11	Email Phone
3. Josh Charbarneau	Josh Charbarneau	3863 5th Drive #22 Wis. Dells, WI 53965	☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	4 / 10 / '11	Email Phone
5. Marty McNew		2695 10th Ln Adams, WI 53910	☐ Town ☐ Village ☐ City	/ / '11 4-10	Email Phone
6. LORI McNew	Lori J. McNew	2695 10th Lane Adams, WI 53910	☐ Town ☐ Village ☐ City	4 / 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, Judith Sachs (name of circulator), (certify):

I reside at 1978 Cypress Dr. Arkdale (circulator's residence – including number, street and municipality)

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

4 / 10 / 2011
(date)

Judith Sachs
(signature of circulator)

Page No. # 374

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Jacqueline Blatchley	Jacqueline Blatchley	1301 River Rd	☐ Town ☐ Village ☒ City Wisconsin Dells	3 / 15 / '11	Ema Phor
2.	Kevin Flock	K. C. Flk	1407 BROADWAY	☐ Town ☐ Village ☒ City Wisconsin Dells	3 / 16 / '11	Ema Phor
3.	Janice Holig	Janice Holig	1625 E Broadway	☐ Town ☐ Village ☒ City Wi Dells	3 / 17 / '11	Ema Phor
4.	Amy Johnson	Amy Johnson	W14350 Lewis Rd.	☒ Town ☐ Village ☐ City Newport	3 / 18 / '11	Ema Phor
5.	Aaron Blatchley	Aaron Blatchley	237 B. West Highwath Dr	☐ Town ☑ Village ☒ City Wi Dells	3 / 21 / '11	Ema Phor
6.	Jerry Nichtel	Jerry Nichtel	W14898 Hwy 23 Wi. Dells	☒ Town ☐ Village ☐ City Newport	3 / 22 / '11	Ema Phor
7.	Diane Sanders	Diane Sanders	501 E Adams St. WD. WI. 53965	☐ Town ☒ Village Lake Delton ☐ City	3/29/11	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, Deborah Kinder (name of circulator) Deborah Kinder, (certify):

I reside at 1510 River Rd Wi Dells WI 53965
(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)

Deborah Kinder
(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Adam C Robinson	Adam Robinson	N5649 Oak Tree Acres Princeton, WI 54968	☐ Town ☐ Village ☑ City Princeton	3/14/'11	Email Phone
2. Janice Rahn	Janice Rahn	Markesan, Wisc. W3323 HWY 44/73	☐ Town ☑ Village ☐ City Markesan	3/17/'11	Email Phone
3. Jeff Molkentin	Jeff Molkentin	W3360 Main St. Manchester, WI. 5394	☐ Town ☑ Village Manchester ☐ City	3/18/'11	Email Phone
4. Gregory S. Strum	Gregory S. Strum	W5518 Lema Drive Pardeeville, WI. 53954	☑ Town ☐ Village ☐ City Pardeeville	3/18/'11	Email Phone
5. Steven J. Lenz	Steven J. Lenz	W5207 Haynes Rd. Pardeeville, WI 53954	☒ Town ☐ Village ☐ City Wyocena	3/30/'11	Email Phone
6. Cheryl Lenz	Cheryl Lenz	W5707 Haynes Rd Pardeeville WI 53954	☒ Town ☐ Village ☐ City Wyocena	3/30/'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, TARAH SCHULZ (name of circulator), (certify):

I reside at W2414 CTY I MARKESAN WI 53946 MARKESAN TOWNSHIP (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)

Tarah Schulz (signature of circulator)

Page No. # 306

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 G. Renner	Sally G Renner	W3962 Yonker Road Cambria WI 53923	☒ Town ☐ Village ☐ City Manchester	3/13/'11	Email Phone (
2. James B. Renner	James B. Renner	W3962 Yonker Rd Cambria Wi 53923	☒ Town ☐ Village ☐ City Manchester	3/13/'11	Email Phone 9
3. Kristy Zacho	Kristy Zacho	N824 County Rd M Cambria, WI 53923	☒ Town ☐ Village ☐ City Manchester	3/13/'11	Email k Phone 9
4. Brian Zacho	BJ Zacho	N824 Cty Rd M Cambria WI 53923	☒ Town ☐ Village ☐ City Manchester	3/13/'11	Email 16 Phone 9
5. Roy Draheim	Roy Draheim	W3561 Cty X Markesan, WI	☒ Town ☐ Village ☐ City Manchester	/'11 3/15/11	Email Phone 92
6. Diane Draheim	Diane Draheim	W3561 Cty Rd X Markesan WI	☒ Town ☐ Village ☐ City Manchester	3/15/'11	Email dra Phone 92
7. RICHARD BERNDT	Richard Berndt	W 3590 Hwy X Markesan, WI	☒ Town ☐ Village ☐ City Manchester	3/14/'11	Email Phone 6
8. Gordon J. Walker	Gordon J. Walker	N860 Salemville Rd. Cambria, Wi	☒ Town ☐ Village ☐ City Manchester	3/15/'11	Email Phone 92
9. Gayle A. Walker	Gayle A Walker	N8160 Salemville Rd Cambria, Wi	☒ Town ☐ Village ☐ City Manchester	3/16/'11	Email a Phone 92
10. BERNARD OOSTERWYK	Bernard Oosterwyk	W2746 COUNTYLINE Rd RANDOLPH WI 53956	☒ Town ☐ Village ☐ City MANCHESTER	3/17/'11	Email Phone

Certification of Circulator

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

I reside at W2414 Cty I Markesan WI 53946 MACKFORD TOWNSHIP (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)

Sarah Schultz (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Candy Olofson	Candice M Olofson	197 E. Moore St Berlin, WI	☐ Town ☐ Village ☑ City Berlin	3/14/'11	Email Phone
2. Lori Fairweather	Lori Fairweather	122 E. Cumberland St Berlin WI	☐ Town ☐ Village ☒ City Berlin	3/14/'11	Email Phone
3. [illegible]	[illegible]	146 E. Moore St Berlin WI 54923	☐ Town ☐ Village ☒ City Berlin	3/14/'11	Email Phone
4. JEFFREY D. MAXSON	[signature]	207 E MOORE ST BERLIN, WI 54923	☐ Town ☐ Village ☒ City BERLIN	3 15/'11	Email Phone
5. Karen Winkel	[signature]	121 Park Lane Berlin, WI 54923	☐ Town ☐ Village ☒ City Berlin	/'11 3 15	Email Phone
6. Ken Bultman	[signature]	205 Oak St. Berlin WI 54923	☐ Town ☐ Village ☒ City Berlin	3/16/'11	Email Phone
7. Karen Macauley	[signature]	W536 Exchange Berlin, WI	☐ Town ☐ Village ☐ City Aurora	3/12/'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, Ann Raeus Maxson (name of circulator), (certify):

I reside at 207 E. Moore St Berlin, WI 54923 (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 / 24 / 2011 (date)

Ann Maxson (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 Lee Hardel	Sarah Lee Hardel	151 N. Adams Ave. Berlin, WI. 54923	☐ Town ☐ Village ☒ City	3/22/'11
2. Jerry Luscher	Jerry Luscher	322 N. Kossuth St Berlin Wi. 54923	☐ Town ☐ Village ☐ City	3/25/'11
3. Tonia Strebelinski	Tonia Strebelinski	W2802 Czech Dr. Berlin WI 54923	☐ Town ☐ Village ☒ City	3/27/'11
4. JASON LUSCHER	Jason Luscher	322 N. Kossuth St. BERLIN, WIS 54923	☐ Town ☐ Village ☒ City	3/28/'11
5. Chris Luscher	Chris Luscher	522 N Kossuth St BERLIN, WI 5492	☐ Town ☐ Village ☒ City	3/28/'11
6. Amy Wagner	Amy Wagner	W[illegible] Ct Rd F Neshkoro, WI 54960	☐ Town ☐ Village ☐ City	3/25/'11
7. SUE LUSCHER Sue	Sue Luscher	322 N. Kossuth St Berlin, Wis 54923	☐ Town ☐ Village ☒ City	3/28/'11
8.			☐ Town ☐ Village ☐ City	/ /'11
9.			☐ Town ☐ Village ☐ City	/ /'11
10.			☐ Town ☐ Village ☐ City	/ /'11

Certification of Circulator

I, Sue Luscher (name of circulator), (certify):

I reside at 322 N. Kossuth St. BERLIN, 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.

MAR / 29 / 2011 (date)

Sue Luscher (signature of circulator)

3079

Page No. # 301

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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 A. CROW	Richard Crow	136 S Johnson ST.	☐ Town ☐ Village ☒ City BERLIN	3 /31/'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, Candace Neumeier (name of circulator), (certify):

I reside at N9526 Meadow Lark Lane Berlin WI 54923 (circulator's residence – including number, street and municipality)

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

4 / 10 / 2011 (date)

Candace R Neumeier (signature of circulator)

Page No. # 3080

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	Patricia Keske	Patricia Keske	N3657 State Rd 73 Wautoma Wis. 54982	☒ Town ☐ Village ☐ City Wautoma	4/4/'11	Email Phone
2.	Cindy Pisco	Cindy L. Pisco	N9136 Otter Ln Neshkoro wisc.	☒ Town ☐ Village ☐ City Neshkoro	4/6/'11	Email Phone
3.	Michael Simonsen	Michael Simonsen	N9136 otter ln Neshkoro wisc	☒ Town ☐ Village ☐ City Neshkoro	4-6-11	Email Phone
4.	Mary Jones	Mary Jones	W9537 Cypress Rd Wautoma WI 54982	☒ Town ☐ Village ☐ City Dakota	4/6/'11	Email Phone
5.	Merle Jones	Merle Jones	W9537 Cypress Rd Wautoma WI 54982	☒ Town ☐ Village ☐ City Dakota	4-6-11	Email Phone
6.	Jean Strack	Jean Strack	830 High St. W Wild Rose WI 54982	☐ Town ☐ Village ☒ City Wild Rose	4/8/'11	Email Phone
7.	Sunny Vahl	Sunny Vahl	N3948 20th Rd Redgranite WI 54970	☒ Town ☐ Village ☐ City Leon	4/8/'11	Email Phone
8.	Inke H. Jenkins	Inke H. Jenkins	W5449 Archer Lane Y27 Wild Rose, WI 54984	☐ Town ☐ Village ☐ City Wild Rose	04/08/'11	Email Phone
9.	Lyle Butterfield	Lyle Butterfield	830 High St #213 Wild Rose 54984	☐ Town ☐ Village ☒ City Wild Rose	4/8/'11	Email Phone
10.	Tim Miller	Tim Miller	N717 State Road 73 Neshkoro 54960	☒ Town ☐ Village ☐ City Neshkoro	4/8/'11	Email Phone

Certification of Circulator

I, Mary E.L. Jones (name of circulator), (certify):

I reside at W9537 Cypress Rd Wautoma WI 54982 (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 / April 8 / 2011 (date)

Mary E.L. Jones (signature of circulator)

Page No. 3 # 3081

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Terri Dahlstrom	Terri Dahlstrom	359 E Nayes ST Berlin WI 54923	☐ Town ☐ Village ☑ City Berlin	3 / 8 / '11	En I Ph
2. TRISTA NIGHBOR	Trista Nighbor	180 Rease St Berlin, WI 54923	☐ Town ☐ Village ■ City Berlin	3 / 9 / '11	En Ph
3. Ron Cutts	Ronald Cutts	W3068 Cty Rd H Pine River WI 54965	☐ Town ■ Village ☐ City Pine River	3 / 10 / '11	En Ph
4. Kay Cutts	Kay L Cutts	W3068 Cty Rd H Pine River WI 54965	■ Town ☐ Village ☐ City Pine River	3 / 10 / '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, _____, (certify):
(name *of* circulator)

I reside at _____
(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.

_____ / _____ / 2011
(date)

_____
(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Shelia Trochinski	Shelia Trochinski	W2243 Prospect ST. APT-3 Poy Sippi WI 54967	☐ Town ☒ Village ☐ City Poy Sippi	4 / 1 / '11	Ema Pho
2.			☐ Town ☐ Village ☐ City	/ / '11	Ema 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, _____ (name of circulator), (certify):

I reside at _____ (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.

_____ / _____ / 2011 (date)

_____ (signature of circulator)

Page No. #3083

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Katie Barzano	Katie Barzano	W2202 Spring Lake Rd	☑ Town ☐ Village ☐ City Green Lake	4/4/'11	Email Phone
2.	DENNIS KASUBOSKI	Dennis Kasuboski	W1791 DEAD END RD	☑ Town ☐ Village ☐ City BERLIN	4/4/'11	Email Phone
3.	MARK MONTAG	M Montag	W1436 E SPRINGBROOK RD	☑ Town ☐ Village ☐ City BERLIN	4/5/'11	Email Phone
4.	Susanne Nickolai-Mays	S. Nickolai-Mays	W4249 St. Rt 22-23	☑ Town ☐ Village ☐ City Princeton	4/6/'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, Janis Edwards (name of circulator), (certify):

I reside at N8226 County Rd F Berlin, WI 54923 (circulator's residence – including number, street and municipality)

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

4/10/2011 (date)

Janis Edwards (signature of circulator)

Page No. 3 # 3084

RECALL PETITION

o the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen om 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	CO
1. LISA STONE	Lisa Stone	W5447 Cumberland LN Neshkoro, WI 54960	☒ Town ☐ Village ☐ City Marion	3 / 26 '11	Email lston Phone 92
2. Jerry Paukstat	Jerry Paukstat	W5408 Cumberland Ln. Neshkoro, WI. 54960	☒ Town ☐ Village ☐ City Marion	4 / 2 '11	Email Jnfpa Phone 92
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

Mark Howlett (name of circulator), (certify):

reside at W5447 CUMBERLAND LN. NESHKORO WI MARION TOWNSHIP - WAUSHARA CO
(circulator's residence – including number, street and municipality)

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. 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 ertification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 8 / 2011
(date)

Mark Howlett
(signature of circulator)

Page No. #3085

RECALL PETITION

) the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen
)m 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	CO
1. Richard Lovstad	Richard Lovstad	267 E Hiawatha Dr. Wis. Dells, WI 53965	☐ Town ☒ Village ☐ City Lake Delton	4 / 15 / '11	Email Phone
2. RUTH LOVSTAD	Ruth N. Lovstad	267 E Hiawatha Dr Wis. Dells, WI	☐ Town ☒ Village ☐ City Lake Delton,	4 / 15 / '11	Email Phone
3. ~~Thomas Boyd~~	Thomas Boyd	770 Wisconsin Dells Pkwy Wisconsin Dells WI	☐ Town ☒ Village ☐ City Lake Delton ~~Wisconsin Dells~~	4 / 16 / '11	Email Phone
4. Anna Kwiatkowski	Anna Kwiatkowski	212 Foxes Crossing Baraboo, WI 53913	☒ Town ☐ Village ☐ City Delton	4 / 15 / '11	Email Phone
5. Judy A Bauer	Judy A Bauer	33A Grand Canyon Dr #113 Baraboo, Wi 53913	☐ Town ☒ Village ☐ City Lake Delton	/ / '11 4 5	Email Phone
6. MIKE D BAUER	Mike D Bauer	33A Grand Canyon Dr #113 Baraboo WI 53913	☐ Town ☒ Village ☐ City Lake Delton	4 / 5 / '11	Email Phone
7. Trina Harding	Trina Harding	83 Pilgrim Drive	☐ Town ☒ Village ☐ City Lake Delton	4 / 5 / '11	Email Phone
8. LAWRENCE R. LaKASAVAGE	Lawrence R LaKasavage	S1085 CLARA Ave Lot 4 Wisconsin Dells, WI 53965	☐ Town ☒ Village ☐ City Lake Delton	/ / '11 4 5	Email Phone
9. Thomas M WEAVER	Thomas M Weaver	136 Meadowview DR BARABOO WI 53913	☐ Town ☒ Village ☐ City LAKE DELTON	/ / '11 4 5	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

Padraic Durkin (name of circulator), (certify):

reside at 1030 19th Street South, Wisconsin Rapids, WI 54494 (circulator's residence – including number, street and municipality)

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. 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 rtification is punishable under S.12.13(3)(a), Wis. Stats.

4 / 6 / 2011 (date)

Padraic S Durkin (signature of circulator)

Page No. #0308

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Cherie Handrich	Cherie Handrich	210 W Spring St New London	☐ Town ☐ Village ☒ City New London	3/5/'11	Email Phone
2.	Pamela Kloehn	Pamela Kloehn	1413 Algoma St. New London	☐ Town ☐ Village ☒ City New London	4/5/'11	Email Phone
3.	Amalia Wegner	Amalia Wegner	711 W Jennings New London, WI 54961	☐ Town ☐ Village ☒ City N.L.	4/5/'11	Email Phone
4.	Barry Bender	BARRY BENDER	1703 DEXTER ST. NEW LONDON, WI. 54961	☐ Town ☐ Village ☒ City NEW LONDON	4/5/'11	Email Phone
5.	Cody Simonis	Cody	622 Wallace St. 54961 Apt. b New London WI	☐ Town ☐ Village ☒ City New London	4/5/'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, Dale Paul (name of circulator), (certify):

I reside at 605 W. Pleasant Street Portage, 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 / Fifth / 2011 (date)

Dale Paul (signature of circulator)

Page No. 3 # 3087

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Kim M. Navone	Kim M Navone	N4722 Hillside Rd Portage, Wi 53901	☒ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone
2.	Robert M. Navone	Robert Navone	N6722 Hillside Rd Portage, WI 53901	☒ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone
3.	LAWRENCE GROMER	Lawrence Gromer	N6748 BLACKHAWK RD. PORTAGE, WI 53901	☒ Town ☐ Village ☐ City CALEDONIA	4/5/'11	Email Phone
4.	Diana Shebel	Diana Shebel	N5158 Hwy 78 Portage, WI 53901	☒ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone
5.	Noralea Henn	Noralea Henn	N3998 Indianhead Rd. merrimac WI 53561	☒ Town ☐ Village ☐ City Caledonia	4 5 /'11	Email Phone
6.	Nancy McFarland	Nancy McFarland	N3160 Koepp Rd Merrimac, WI 53561	☐ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone
7.	Ron McFarland	Ron McFarland	N3160 Koepp Rd Merrimac WI 53561	☐ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone
8.	Margaret Pickarz	Margaret Pickarz	N4032 Hwy 11 Portage, WI 53901	☐ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone
9.	James E. Blake	James E. Blake	N6096 County Rd. W Portage, WI	☐ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone
10.	Tracie McCleary	Tracie McCleary	W11091 Lakeview Dr. Merrimac WI 53561	☐ Town ☐ Village ☐ City Caledonia	4/5/'11	Email Phone

Certification of Circulator

I, James Steinke (name of circulator), (certify):

I reside at N2737 Demynck Road, Lodi, WI 53555 (circulator's residence – including number, street and municipality)

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

4/5/2011 (date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Nolan Chapin	Helen E Chapin	S3125A Victoria Rd Baraboo Wis 53913	☐ Town ☐ Village ☐ City ~~Eato~~ Delton	4/3/'11	Email Phone
2. Samantha Barton	Samantha Barton	S3179 Victoria Rd Baraboo WI 53913	☐ Town ☐ Village ☐ City Delton	4/3/'11	Email Phone
3. Julie Greenwood	Julie Greenwood	S3069 N. Reedsburg Rd Baraboo W.I 53913	☐ Town ☐ Village ☐ City Delton	4/3/'11	Email Phone
4. James Miller	James Miller	E10264A Happy Lane Baraboo Wi 53913	☐ Town ☐ Village ☐ City Delton	4/3/'11	Email Phoue
5. Patricia McGrath	Patricia McGrath	E10239 Happy lane Baraboo, Wi	☐ Town ☐ Village ☐ City Delton	4/3/'11	Email Phone
6. Penny Crisafulli	Penny Crisafulli	E10249 HAPPY LN Baraboo WI 53913	☐ Town ☐ Village ☐ City Delton	4/3/'11	Email Phone
7. Julie Lange	Julie Lange	S3033 Deer Tr Baraboo WI 53913	☐ Town ☐ Village ☐ City Delton	4/3/'11	Email Phone
8. Michelle French	Michelle French	S-3087 Roselyn. Baraboo, WI 53913	☐ Town ☐ Village ☐ City Delton	4/3/'11	Email Phone
9. R. Ketelbalter	E10031 N Reedsburg Rd Baraboo, WI 53913		☐ Town ☐ Village ☐ City Delton	/'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/'11	Email Phone

Certification of Circulator

I, Susan M Williams (name of circulator), (certify):

I reside at 4702 Turner Ave Madison WI (circulator's residence – including number, street and municipality)

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

4 / 3 / 2011 (date)

(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Patrice F. Murphy	[signature]	132 Clinton St Ntonddu Lac WI	☐ Town ☒ Village ☐ City NOT IN DISTRICT DS	3/14/11	Email Phone
2. Lawrence D. Behlen	Lawrence D Behlen	491 Canal St Green Lake WI	☐ Town ☐ Village ☒ City Green Lake	3/13/'11	Email Phone
3. JANE F. BEHLEN	Jane Behlen	N3130 21st Lane Wautoma, Wi 54892	☐ Town ☐ Village ☐ City Green Lake	3/13/'11	Email Phone
4. Ruth C Emery	Ruth C Emery	W5447 Fox Ridge Dr Princeton, WI 54968	☒ Town ☐ Village ☐ City Princeton	3/16/'11	Email Phone
5. Christine Carroll	Christine Carroll	609 Illinois Ave Green Lake WI 5494	☐ Town ☐ Village ☒ City Green Lake	/ /'11 3/19/11	Email Phone
6. DENNIS E. CARROLL	[signature]	609 Illinois Ave. Green Lake, WI. 54941	☐ Town ☐ Village ☐ City Green Lake	3/19/'11	Email Phone
7. Leslie Trewyn	Leslie Trewyn	388 LAKE St Green Lake WI	☐ Town ☐ Village ☒ City Green Lake	3/29/'11	Email Phone
8. Thomas Detwyler	Thom Detwyler	388 Lake St. Green Lake, WI	☐ Town ☐ Village ☒ City Green Lake	/ /'11 3/29/11	Email Phone
9. Joan Irvine	Joan Irvine	N5611 Lac Verde Green Lake, WI.	☒ Town ☐ Village ☐ City Brooklyn	/ /'11 3/29/11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

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

I reside at N6120 N. Lawson Dr Green Lake, 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 / 29 / 2011 (date) [signature] (signature of circulator)

Page No. #3090

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 PLOEN	Gerald Ploen	3516 Briar	☐ Town ☒ Village ☐ City	1 / 1 '11 3-25	Email Phone
2.	Sarah Jacobs	Sarah C Jacobs	461 Memory Ct. Green Bay, WI 54301	☐ Town ☒ Village ☐ City	Green Bay Allouez 3 27 '11	Email Phone
3.	DALE H. VOLLRATH	Dale H Vollrath	432 Memory Ct Green Bay WI 54301	☐ Town ☒ Village ☐ City	Allouez 3 27 '11	Email Phone
4.	ELDORA I. VOLLRATH	Eldora I. Vollrath	432 Memory Ct Green Bay, WI 54301	☐ Town ☒ Village ☐ City	Allouez 3 27 '11	Email Phone
5.	Robert M. Gretzke	Robert M Gretzke	412 Memory Ct Green Bay, WI	☐ Town ☒ Village ☐ City	Allouez 3 27 '11	Email Phone
6.	Mike Mathieu	Mike Mathieu	500 Brookridge St Green Bay WI 54301	☐ Town ☒ Village ☐ City	Allouez 3 27 '11	Email Phone
7.	Sue A. Carmody	Sue A. Carmody	422 Brookridge Green Bay, WI 54301	☐ Town ☒ Village ☐ City	Allouez 3 27 '11	Email Phone
8.	Frank J. Carmody	Frank J Carmody	" " " "	☐ Town ☒ Village ☐ City	Allouez 3 27 '11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, TERRY TAPPA (name of circulator), (certify):

I reside at 2021 Regency Ct # 5 (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 / 27 / 2011 (date)

Terry Tappa (signature of circulator)

3021

Page No. # 1

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Annette M. Klein	Annette M. Klein	433 Murray Pk. Dr.	☐ Town ☐ Village ☒ City Ripon	3/18/'11	Email Phone
2. Donald R. Klein	[signature]	433 Murray Pk. Dr.	☐ Town ☐ Village ☒ City Ripon	3/18/'11	Email Phone
3. Brian Jones	[signature]	528 Union St	☐ Town ☐ Village ☒ City Ripon	3/18/'11	Email Phone
4. Al Bechda	Al Bechda	W13607 CTY AS Brandon	☐ Town ☒ Village ☐ City	3/18/'11	Email Phone
5. Bryan Reinke	[signature]	1197 W South Park Apt A Oshkosh	☐ Town ☐ Village ☒ City 543	3/18/'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, KENNETH H BASEL SR, (certify):
(name of circulator)

I reside at 915 W Liberty ST Ripon Wis 54971
(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)

[signature]
(signature of circulator)

Page No. #3092

RECALL PETITION

o the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen
om 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 Blackstone	Thomas Blackstone	N 395 Hwy A Briggsville, WI 53920	☐ Town ☒ Village Briggsville ☐ City	04/11/'11	Email Phone
2.	Mary C. Rhyme			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
3.	MARY C. RHYME	Mary C. Rhyme	W7173 E Northshore Portage WI 53901	☒ Town ☐ Village ☐ City Wyocena	4-11-11	Email Phone
4.	FRANK RHYME	Frank Rhyme	W7173 E Northshore Portage, WI 53901	☒ Town ☐ Village ☐ City Wyocena	4/11/'11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

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

I reside at 5152 Arlton Dr., Fitchburg, WI 53719 (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)

Marci N Scott (signature of circulator)

Page No. #3093

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	DARWIN BREHLOW	Darwin Brehlow	502 Liberty STREET Ripon, WIS. 54971	☐ Town ☐ Village ☒ City Ripon.	4/5/'11	Email Phone
2.	Terry Fude	Terry Fude	549 E. Oshkosh St	☐ Town ☐ Village ☒ City Ripon	4/5/'11	Email Phone
3.	Elizabeth McHone	Elizabeth McHone	600 Campus Dr ~~Ripon~~	☐ Town ☐ Village ☐ City Ripon	4/5/'11	Email Phone
4.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, George G. Findlen (name of circulator), (certify):

I reside at 1058 Rutledge Court, 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.

5 April 2011 (date) George G. Findlen (signature of circulator)

Page No # 3094

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Kelly M. Hoenecke	Kelly M. Hoenecke	W14500 Vera Dr.	☐ Town ☐ Village ☒ City Wisconsin Dells	03/10/'11	Email / Phone
2. Marcia L Hoenecke	Marcia L Hoenecke	W14500 Vera Drive	☐ Town ☐ Village ☒ City Wisconsin Dells	3/10/'11	Email / Phone
3. Keava L. Anderson	Keava Anderson	N8825 Peterson Rd	☐ Town ☐ Village ☒ City Wisconsin Dells	03/10/'11	Email / Phone
4. Kathy A. Anderson	Kathy A. Anderson	N8825 Peterson Rd	☐ Town ☐ Village ☒ City Wisconsin Dells	3/10/'11	Email / Phone
5. Richard C. Anderson	Richard C Anderson	N8825 Peterson Rd	☒ Town ☐ Village ☒ City Wis Dells	/ /'11 3-10-11	Email / Phone
6. Susan Phillips	Susan J. Phillips	W14392 Lewis Road Wis. Dells, WI 53965	☐ Town ☐ Village ☒ City Wis. Dells	3/13/'11	Email / Phone
7. Donna J. Wimann	Donna J. Wimann	N9961 Pine Aire Dr. Wisc. Dells, WI 53965	☒ Town - Newport ☐ Village ☒ City Wisc. Dells	3/13/'11	Email / Phone
8. JOHN D. WIMANN	John D. Wimann	N-9961 PINE AIRE Dr. WISCONSIN DELLS, WI. 53965	☒ Town NEWPORT ☐ Village ☒ City WIS. DELLS	3/13/'11	Email / Phone
9. JACK A. CAPELLE	Jack A. Capelle	N9879 STONNER AR WIS. DELLS, WI 53965	☒ Town NEWPORT ☐ Village ☐ City WIS. DELLS	3/20/'11	Email / Phone
10. James. M. Capelle	James Capelle	1009 VINE ST. WIS. DELLS, WI. 53965	☐ Town ☐ Village ☒ City Wis. Dells	3/20/'11	Email / Phone

Certification of Circulator

I, James L. Brancel (name of circulator), (certify):

I reside at W7995 State Rd 23 Endeavor 53930 Wisconsin
(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 L Brancel (signature of circulator)

Page No #3095

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Frank Fedic	Frank Fedic	1621 Valley Dr	☐ Town ☐ Village ☒ City Wisconsin Dells	3 / 22 / '11	Email Phone
2.	Jesse Philippi	Jesse Philippi	729 Race St	☐ Town ☐ Village ☒ City Wisconsin Dells	3/22/'11	Email St Phone 6
3.	Ryan Mitchell	~~Ryan Mitchell~~	S5631 E Glacier Drive	☐ Town ☐ Village ☒ City Baraboo	3/22/'11	Email Ryan Phone 85
4.	Brian Schwede		781 Co. A Apt 105	☐ Town ☐ Village ☒ City Wis Dells	3 / 29 / '11	Email Vee Phone 16
5.	Cory Rose	C Rose	53 Pilgrim Drive	☐ Town ☐ Village ☐ City Wis Dells	3 30 / '11	Email Phone
6.	Kimberly Hoenecke	Kimberly Hoenecke	W14500 Vera Drive	☐ Town ☐ Village ☒ City Wis Dells	4 / 11 / '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 L. Brancel (name of circulator), (certify):

I reside at W7995 State Rd 23 Endeavor 53930 Wisconsin
(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 L Brancel
(signature of circulator)

Page No. #3096

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Donald L. Helfer	[signature]	529 W. Pleasant St - Apt 2 Portage, WIS 53901	☐ Town ☐ Village ☒ City Portage	3 / 19 / '11	Email Phone
2. Laura J. Frederick	[signature]	431 Academy Bld Endeavor	☐ Town ☒ Village ☐ City Endeavor	3 / 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, Amy Zuber Seguin (name of circulator), (certify):

I reside at 601 W. Pleasant St. Portage WI 53901 (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 / 11 / 2011 (date)

Amy Zuber Seguin (signature of circulator)

Page No. #3097

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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.	Jeff Heesch	[signature]	614 West Pleasant St Portage WI 53901	☐ Town ☐ Village ☒ City Portage	03 / 26 / '11	Email Phone
2.	Jessica Heesch	[signature]	614 West Pleasant St. Portage WI 53901	☐ Town ☐ Village ☒ City Portage	4 / 1 / '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, JODY STEINHAUS (name of circulator), (certify):

I reside at W12247 BOOTS RD WISCONSIN DELLS WI 53965 LEWISTON TOWNSHIP (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 / 11 / 2011 (date)

Jody Steinhaus (signature of circulator)

Page No. #3098

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Patricia Penning	Patricia Penning	3228 Evergreen Dr Baraboo	☐ Town ☐ Village ☐ City Town of Delton	3-8 /'11	Email Phone
2. Dennis Penning	Dennis Penning	S5701 Pikes Peak Rd North Freedom WI 53951	☒ Town ☐ Village ☐ City BARABOO	3 8 /'11	Email Phone
3. SHANE WEBER	Shane Weber	S5701 PIKES PEAK RD. NORTH FREEDOM, WI 53951	☒ Town ☐ Village ☐ City BARABOO	3 9 /'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, Jeri J. Weber (name of circulator), (certify):

I reside at S5701 Pikes Peak Road North Freedom WI 53951 (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 / 6 / 2011 (date)

Jeri J. Weber (signature of circulator)

Page No. # 3099

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 14th State Senate District of Wisconsin petition for the recall of State Senator Luther Olsen 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. Jeffrey M Smith	Jeffy M Smith	N1020 Hy 22 Dalton, Wis 53926	☒ Town ☐ Village ☐ City Buffalo	3 /26/ '11	Email IRON Phone 262
2. Doris I Smith	Doris I Smith	N1020 State Hwy 22 Dalton Wis 53926	☒ Town ☐ Village ☐ City Buffalo	3 /26/ '11	Email Phone 920
3. Jodi M Smith	Jodi M Smith	N1020 St Hy 22 Dalton, Wis 53926	☐ Town ☐ Village ☐ City Buffalo	3-26 / / '11	Email 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, Don Smith (name of circulator), (certify):

I reside at N1020 State Hy 22 Dalton Wis 53926 Buffalo town (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 / 9 / 2011 (date)

Donald Smith (signature of circulator)

Page No. #3107