RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Kay M. Langer	N8171 Oak Lane Crivitz, WI 54114	☒ Town ☐ Village ☐ City Lake	3-1-11
2. Gwen Zimmerman	N7578 Birchwood Crivitz WI 54114	☒ Town ☐ Village ☐ City Lake	3-1-11
3. Claudia Kahn	N6434 Haguewood Ln Crivitz WI 54114	☒ Town ☐ Village ☐ City Beaver	3-1-11
4. Jan Franzen	W9632 Cty A Crivitz, WI 54114	☒ Town ☐ Village ☐ City Stephenson	3-1-11
5. Gary Franzen	W9632 Cty A Crivitz, WI. 54114	☒ Town ☐ Village ☐ City Stephenson	3-2-11
6. Judy Oleck	W8643 White Birch Crivitz	☒ Town ☐ Village ☐ City Stephenson	3-2-11
7. Jeanine Kowalski	W7255 Creek Rd Wausaukee WI 54177	☒ Town ☐ Village ☐ City Middle Inlet	3-2-11
8. George Kowalski	W7255 Creek Rd Wausaukee WI 54177	☒ Town ☐ Village ☐ City Middle Inlet	3-2-11
9. Mike Oleck	W8643 WHITE BIRCH CRIVITZ WI 54114	☒ Town ☐ Village ☐ City STEPHENSON	3-3-11
10. Kay Langer	N8171 OAK LANE CRIVITZ, WI 54114	☒ Town ☐ Village ☐ City LAKE	3-4-11

Certification of Circulator

I, Kay M. Langer (name of circulator), certify:

I reside N8171 Oak Lane Crivitz, WI 54114 (Town of Lake)
(circulator's residence - include number, street, and municipality)

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

3-4-2011
(date)

Kay M. Langer
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Brandon Peterson	W3656 Cty. Rd. C Merrill, WI 54452	☒ Town ☐ Village ☐ City Merrill	3-3-11
2. Mike Streed	W4555 CTH-R Merrill, WI 54452	☒ Town ☐ Village ☐ City Merrill	3/3/11
3. Craig Schroeder	N30 Mink Rd Merrill, Wi 54452	☒ Town ☐ Village ☐ City Corning	3/3/11
4. Mark Fowler	W4698 Golf DR Merrill Wis 54452	☒ Town ☐ Village ☐ City Scott	3-4-11
5. William Burgener	N2205 Prairie River Ave Merrill, wi 54452	☒ Town ☐ Village ☐ City Merrill	3-4-11
6. Joni Peterson	W4495 Cty Rd G Merrill, WI 54452	☒ Town ☐ Village ☐ City Pine River	3-4-11
7. Tyffany Peterson	W3656 Cty Rd C MERRILL, WI 54452	☒ Town ☐ Village ☐ City MERRILL	3-4-11
8. Marci VanDeHest	W7249 Rose-Len Cet. Merrill, WI 54452	☒ Town ☐ Village ☐ City MERRILL	3-6-11
9. Gene Bagley	W5145 SCHULZ Merrill, WI 54452	☒ Town ☐ Village ☐ City MERRILL	3-8-11
10. Mary Hoffman	W7068 Van Besser Dr Merrill, Wi 54452	☒ Town ☐ Village ☐ City Harding	3-8-11

Certification of Circulator

I, MAX PETERSON, certify:
(name of circulator)

I reside W4495 CTY RD G MERRILL WIS. 54452.
(circulator's residence - include number, street, and municipality)

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

3-8-11
(date)

Max Peterson
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2702

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. John Vanderkoy	8333 CO RD. II Elkhorn WI 54427	☑ Town ☐ Village ☐ City Elderon	4/18/11
2. Dennis Spranger	392 N. HUNTER Wittenberg, WI 54499	☐ Town ☒ Village ☐ City Wittenberg	4/18/11
3. John Vanderkoy III	PO 52 Elderon WI 54429	☐ Town ☒ Village ☐ City Elderon	4/18/11
4. Patricia Vanderkoy	8333 CO. Rd. II Eland WI 54427	☒ Town ☐ Village ☐ City Eland	4/18/11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside 8555 Hickory Road Eland, WI 54427 (circulator's residence - include number, street, and municipality).

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

4-18-2011 (date)

Alan VanderKooy (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2703

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Mary G Kuehn	7871 Palmer Lk Land O Lakes WI	☒ Town ☐ Village ☐ City Land O Lakes 54540	3/21/11
2.	7871 Palmer Lk Land O Lakes 54540	☒ Town ☐ Village ☐ City	4/1/11
3. Peter Kuehn	7871 Palmer Lk Land O Lakes 54540	☒ Town ☐ Village ☐ City	4/1/11
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 G Kuehn (name of circulator), certify:

I reside 7871 Palmer Lk Rd Land O Lakes WI 54540.
(circulator's residence - include number, street, and municipality)

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

4/1/2011 (date)

Mary G Kuehn (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2704

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12
(jurisdiction or district of officeholder)

petition for the recall of Senator Jim Holperin from office pursuant
(name of officeholder to be recalled and office)

to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	8741 Packing Pl. Minocqua Wis	☑ Town Minocqua ☐ Village ☐ City	3-1-11
2.	Minocqua	☐ Town ☐ Village ☐ City	
3. Randy [illegible]	8699 HC Richard Plat 18 Minocqua Wis	☑ Town ☐ Village ☐ City	3-3-11
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Roann Murphy, certify:
(name of circulator)

I reside at 10833 Buckhorn Cir. Arbor Vitae.
(circulator's residence - include number, street, and municipality)

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

3/3/11
(date)

[signature]
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James P. Samster	N11298 Mud Lake Rd	☑ Town ☐ Village ☐ City Wausaukee	3/15/11
2. [illegible]	619 Van Buren Ave	☑ Town ☐ Village ☐ City Wausaukee	3/22/11
3. Bonnie Borowitz	121 Tower Rd Athelstane	☑ Town ☐ Village ☐ City Athelstane	3-22-11
4. Daniel Vertz	Nesedah Wausaukee WI	☑ Town ☐ Village ☐ City Wausaukee	3-22-11
5. Andy Bales	54177 Wausaukee WI	☑ Town ☐ Village ☐ City Wausaukee	3 22 11
6. [illegible]	206 Maple Ave Wausaukee WI 54177	☐ Town ☑ Village ☐ City Wausaukee	3-23-11
7. [illegible]	W9330 H, C Wausaukee, WIS	☑ Town ☐ Village ☐ City Athelstane	3-23-11
8. David Collins	N10792 - HYXX Wausaukee WI 54177	☑ Town ☐ Village ☐ City Wausaukee WI	3-23-11
9. Jennifer Maquin	1 Dorlowen St Wausaukee WI	☑ Town ☐ Village ☐ City Wausaukee WI	3-21-11
10. Kenneth C. Limberg	N9328 Four Lakes Rd Wausaukee, WI	☑ Town ☐ Village ☐ City Wagner	3-21-11

Certification of Circulator

I, JAMES P. SAMSTER, certify:
(name of circulator)

I reside at N 11298 Mud LAKE Rd Wausaukee, WISC 54177.
(circulator's residence - include number, street, and municipality)

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

3-24-11
(date)

James P. Samster
(signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: The Wisconsin Government Accountability Board.

WE, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S. 9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

Conspiracy to intentionally interfere with the proper functioning of the Wisconsin Senate and gross dereliction of duty.

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City or Village	Date of Signing
1	1564 N. Gunlock Lake Rd	X Town Lac du Flambeau __ Village __ City	2/27/2011
2	2646 Vanderwort Rd	X Town St. Germain __ Village __ City	2-27-11
3	1584 White Pine Dr	+ Town Lincoln __ Village __ City	2-27-11
4	2781 CEDAR AVE SAYNER WI 54560	✓ Town ST GERMAIN __ Village __ City	2/27/11
5	8282 E. BAY RD.	✓ Town RESCUE ISLE __ Village __ City	2/27/11
6	11578 Rustic Retreat Dr	X Town MINOCQUA __ Village __ City	2/27/11
7	6258 Cty R E Land O'Lakes	✓ Town Land O'Lakes __ Village __ City	3/1/11
8	9218 Longs Road	X Town Sayner __ Village __ City	3/3/11
9	7649 Palmer Lk Rd	X Town Land O'Lakes __ Village __ City	3-3-11
10	4545 Evergreen Rd	X Town __ Village __ City Land O'Lakes	3-3-11

Michael P. Keintz

CERTIFICATION OF CIRCULATOR

I, Michael P. Keintz, certify that I reside at 6473 Spruce Meadows Lane, Land O'Lakes WI 54540

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

3/3/11 (date)

Michael P. Keintz (Signature of Circulator)

Page: 2707

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	N8264 PINE LN IRMA, WI 54442	☑ Town ☐ Village ☐ City Skowhegan	4-2-11
2. Jacklyn Arsenault	N2654 HWY 107 MERRILL WI 54452	☑ Town ☐ Village ☐ City MERRILL	4-2-11
3.	2045 NANCY DR COMMONWEALTH	☑ Town ☐ Village ☐ City NOKOMIS	4-2-11
4. John C. Holmes	W5636 Hoffmann Road Tomahawk 54487	☑ Town ☐ Village ☐ City Bradley	4-5-11
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Linda M. Kenworthy, certify:
(name of circulator)

I reside W5220 Terrace View Rd Tomahawk, WI 54487 TWN BRADLEY.
(circulator's residence - include number, street, and municipality)

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

April 12-2011
(date)

Linda M. Kenworthy
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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Page No. 2208

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

*(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. **No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.**)*

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. MKettterer	6360 E SNIPE LAKE RD EAGLE RIVER WI 54521	☒ Town ☐ Village ☐ City CLOVERLAND	2-25-11
2. Gay Ketterer	6360 E Snipe Lake RD Eagle River, WI 54521	☒ Town ☐ Village ☐ City Cloverland	2-25-11
3. John Cuffe	5562 ZEMAN Rd. EAGLE RIVER WI 54521	☒ Town ☐ Village ☐ City Cloverland	2-28-11
4. Marlene Cuffe	5562 ZEMAN Rd. EAGLE RIVER, WI 54521	☒ Town ☐ Village ☐ City Cloverland	2-28-11
5. Nettie A Fahr	PO BOX 1895 E RIVER WI 54521	☒ Town ☐ Village ☐ City Washington	3/1/11
6. Kenneth V. Fowler	4151 S Shore Dr. Rhinelander WI 54501	☒ Town ☐ Village ☐ City Pelican	3-2-11
7. Gerald A Versemann	7795 BIRCHWOOD DR. ST. GERMAIN WI 54558	☒ Town ☐ Village ☐ City ST. GERMAIN	3-2-11
8. Judy C Hill	PO BOX 1895 EAGLE RIVER WI 54521	☒ Town ☐ Village ☐ City WASHINGTON	3-2-11
9. Mike Brown	8089 NICKLA EAGLE RIVER 54521	☒ Town ☐ Village ☐ City Sug AR CAMP	3-2-11
10. Lonette Brown	8089 Nicks Ln Eagle River, WI 54521	☒ Town ☐ Village ☐ City Sugar Camp	3-2-11

Certification of Circulator

I. MARTIN KETTERER, certify:
(name of circulator)

I reside at 6360 E. SNIPE LAKE RD EAGLE RIVER WI 54521 CLOVERLAND.
(circulator's residence - include number, street, and municipality)

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

March 8, 2011
(date)

MKettterer
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http gab.wi.gov email gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	N9653 CTH DD PICKEREL WI. 54465	☒ Town ☐ Village ☐ City LANGLADE	3/10/11
2. Lori Studinski	N5954 BACHELORS AVE GLEASON, WI 54435	☒ Town ☐ Village ☐ City RUSSELL	3/10/11
3. Marlene Brien	N8461 Military Ln Lily, WI 54491	☒ Town ☐ Village ☐ City Langlade	3/17/11
4. [illegible]	318 East Towne Dr Antigo WI 54409	☐ Town ☐ Village ☒ City Antigo	3/19/11
5. Kelley Sieber	N8905 State Rd 55 Pickerel WI 54465	☒ Town ☐ Village ☐ City Langlade	3/19/11
6. [illegible]	N8905 ST. RD. 55 PICKEREL WI 54465	☒ Town ☐ Village ☐ City LANGLADE	3-19-11
7. Howard Cadle	N9546 HWY DD PICKEREL WIS	☒ Town ☐ Village ☐ City LANGLADE	3-20-11
8. [illegible]	W5064 Cty. A Lily WI 54491	☒ Town ☐ Village ☐ City Langlade	3-23-11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Helmut Kiesling (name of circulator), certify:

I reside W5164 Cty Rd A Lily WI 54491 (circulator's residence - include number, street, and municipality).

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

4-6-2011 (date) Helmut Kiesling (signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

FAILED TO CARRY OUT HIS DUTIES.

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [signature]	8656 AMERICAN Eagle Ct. LAKE TOMAHAWK, WI	☒ Town ☐ Village ☐ City	4/2/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, O. J. CRAIG, certify:
(name of circulator)

I reside 8656 AMERICAN Eagle Ct. LAKE TOMAHAWK, WI 54539.
(circulator's residence - include number, street, and municipality)

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

April 2, 2011
(date)

[signature]
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2011

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	6573 Ort dr. Rhinelander wi. 54501	☑ Town ☐ Village ☐ City Rhinelander	3/5/11
2.	6573 Ort Dr Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Rhinelander	3/5/11
3.	6411 Pelican St. RHINELANDER 54501	☑ Town ☐ Village ☐ City RHINELANDER	3-5-11
4.	506 E Division St Crandon WI 54520	☐ Town ☐ Village ☑ City Crandon	3-5-11
5.	5148 Heritage Rhinelander WI 54501	☑ Town ☐ Village ☐ City Pelican	03/05/11
6.	7235 WOODCREST DR. Rhinelander WI 54501	☑ Town ☐ Village ☐ City Crescent	03/05/11
7.	418 Lincoln Rhinelander 54501	☑ Town ☐ Village ☐ City Rhinelander	3/5/11
8.	3492 Stones Circle Dr Tomahawk WI 54487	☑ Town ☐ Village ☐ City Little Rice	3/5/11
9.	5079 W Lake Dam RD HAZELHURST, WI	☑ Town ☐ Village ☐ City LITTLE RICE	3/5/11
10.	3492 Stones Circle Dr Tomahawk, WI 54487	☑ Town ☐ Village ☐ City Little Rice	3/6/11

Certification of Circulator

I, Janet K Kimball (name of circulator), certify:

I reside at 11720 Burrows Lk Road Tomahawk WI 54487 LITTLE RICE TWN (circulator's residence - include number, street, and municipality)

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

3/12/11 (date)

(signature of circulator)

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2712

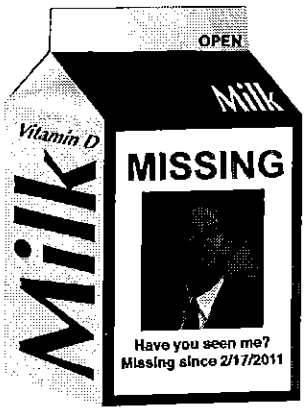
RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.



STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Eric Amundson	10996 Cty Rd M Crandon WI 54520	☒ Town ☐ Village ☐ City Mole Lake	3-22-11
2. Brian Rogalski	710 Hall Ave Crivitz, WI 54114	☐ Town ☒ Village ☐ City Crivitz	3-22-11
3. Ronald Florian	5836 Hwy 139 Tipler, WI	☒ Town ☐ Village ☐ City Tipler	3-22-11
4. Tom Garasha	Eagle River 616 E Pearl	☐ Town ☐ Village ☐ City Eagle River	3/23/11
5. Marie Anderson	P.O. Box 554	☐ Town ☐ Village ☐ City Eagle River	3/23/11
6. Leah R Eggan	PO Box 2276 Eagle River, WI 54521	☒ Town ☐ Village ☐ City Eagle River	3/23/11
7. Donald Decker	4234 Deerskin Rd Phelps, WI 54554	☒ Town ☐ Village ☐ City Phelps	3/23/11
8. [illegible]	3668 Oneil Rd Eagle River WI 54521	☒ Town ☐ Village ☐ City Eagle River	3/23/11
9. [illegible]	212 N Main ER WI 54521	☒ Town ☐ Village ☐ City Eagle River	3/23/11
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Jeff Kirschmann JEFF KIRSCHMANN, certify:
(name of circulator)

I reside at 3000 KENTUCK LANDING RD, EAGLE RIVER WI. 54521.
(circulator's residence - include number, street, and municipality)

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

3/23/2011 (date)

Jeff Kirschmann (signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

Page No. 27/13

RECALL PETITION

TO: Wisconsin Government Accountability Board

(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Kirk Klein	7869 Prairie Rd Eagle River WI 54521	☒ Town ☐ Village ☐ City Sugar Camp	2-25-11
2. Kim Faust	1716 E BASS LK RD EAGLE RIVER WI 54521	☒ Town WASHINGTON ☐ Village ☐ City	2-25-11
3. [illegible]	8576 Peninsula Rd Eagle River 54521	☒ Town Sugar Camp ☐ Village ☐ City	2-25-11
4. [illegible]	7860 SANCTUARY DR EAGLE RIVER 54521	☒ Town ☐ Village ☐ City SUGAR CAMP	2-25-11
5. [illegible]	7890 Sanctuary Dr Eagle River, WI. 54521	☒ Town ☐ Village ☐ City Sugar Camp	2-25-11
6. Loren Meyer	7821 PRAIRIE RD EAGLE RIVER, WI 54521	☒ Town ☐ Village ☐ City SUGAR CAMP	2-25-11
7. [illegible]	8400 Hwy 17 Eagle River WI 54521	☒ Town ☐ Village ☐ City Sugar Camp	2-25-11
8. [illegible]	1763 St Hwy 151 St. Germain, WI	☒ Town ☐ Village ☐ City St. Germain	2-25-11
9. [illegible]	111367 Trant Rd Minocqua, WI 54548	☒ Town ☐ Village ☐ City Minocqua	2-28-11
10. [illegible]	7615 E. Marie Ln.	☒ Town ☐ Village ☐ City Minocqua	3/1/11

Certification of Circulator

I, Kirk Klein (name of circulator), certify:

I reside at 7869 Prairie Rd Sugar Camp (circulator's residence - include number, street, and municipality).

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

4/11/11 (date)

Kirk Klein (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

*(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. **No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.**)*

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jan Helm	1507 W Fisher Ck Pkwy Niagara, WI 54151	☒ Town ☐ Village ☐ City Aurora	3-1-11
2. Selma Sothern	1896 Gary Road Niagara, WI 54151	☒ Town ☐ Village ☐ City Aurora	3/1/11
3. [illegible]	W824 CTY N Niagara, WI 54151	☒ Town ☐ Village ☐ City Aurora	3/1/11
4. Al Moore	W636 County N Niagara, WI 54151	☒ Town ☐ Village ☐ City AURORA	3-1-11
5. Jackie Moore	W636 County N Niagara, WI 54151	☒ Town ☐ Village ☐ City Aurora	3-1-11
6. Jim McCarthy	838 Wisconsin Ave Niagara WI 54151	☒ Town ☐ Village ☐ City Aurora	3-1-11
7. Jamie McCarthy	838 Wisconsin Ave Niagara, WI 54151	☒ Town ☐ Village ☐ City Aurora	3-1-11
8. Clarence Osterberg	733 Osterberg Pkwy Niagara, WI 54151	☒ Town ☐ Village ☐ City Aurora	3-2-2011
9. Shirley French	Niagara, WI 54151 1789 Grandview	☒ Town ☐ Village ☐ City Aurora	32-11
10. Hubert French	1789 Grandview Niagara, WI 54151	☒ Town ☐ Village ☐ City Aurora	3-2 11

Certification of Circulator

I, Lucille Anderson, certify:
(name of circulator)

I reside at 1850 Grandview Dr. Aurora, WI 54151.
(circulator's residence - include number, street, and municipality)

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

March 6, 2011
(date)

Lucille Anderson
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Brittany Deitche	1500 Wose Lake Rd	☐ Town ☐ Village ☒ City RHINELANDER	4/1/11
2. Sheryl Isham	~~PO Box 275~~ 2802 MISKWA DR Lac du Flambeau	☐ Town ☐ Village ☒ City 2802 MISKWA DR	4/1/11
3. Harvey Cignac	4718 Rhinelander	☐ Town ☐ Village ☒ City Rhinelander	4/1/11
4. Ralph Priebe	3455 Faust Rd	☐ Town ☐ Village ☒ City Rhinelander	4/1/11
5. Ena M. Priebe	3455 Faust Rd	☐ Town ☐ Village ☒ City Rhinelander WI	4-1-2011 5450
6. Bob Wallace	354 Hillside Rd Rhinelander	☐ Town ☐ Village ☒ City Rhinelander	4/1/11
7. [illegible]	53 Brown St	☐ Town ☐ Village ☒ City Rhinelander	4/1/11
8. Allan Simpson	16 E Randall	☐ Town ☐ Village ☒ City Rhine	4/1/11
9. Garret Shruck	107 Harmony Hills Ct	☒ Town ☐ Village ☐ City Pelican	4-01-11
10. [illegible]	N11046 City Rd A	☐ Town ☒ Village ☐ City Bradley	4-01-11

Certification of Circulator

I, SHERRI F FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922.
(circulator's residence - include number, street, and municipality)

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

4/2/11
(date)

Sherri F. Ferrell
(signature of circulator)

170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
n is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
'005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Bonnie Ike	5622 Jennie Webber Lk Road	☐ Town ☐ Village ☐ City Rhinelander	4-1-11
2. Brenne Busterud	1642 W. Davenport St	☐ Town ☐ Village ☒ City Rhinelander	4-1-11
3. Teresa Bey	5457 Wild Rose St	☒ Town ☐ Village ☐ City Newald	4-1-11
4. John J Woulfin	6145 Hwy K Rhinelander	☒ Town ☐ Village ☐ City CRESCENT	4-1-11
5. [illegible]	5720 Crystal Lk Rd	☒ Town ☐ Village ☐ City Pine Lake	4-1-11
6. [illegible]	350 McCandless CE	☐ Town ☐ Village ☒ City Rhinelander	4-1-11
7. John M Croker	202 E. Pine St Apt 220 Eagle River, WIS.	☐ Town ☐ Village ☐ City Eagle River	4-1-11
8. Heather Manthey	4508 Nith Branch St Wabeno WI 54566	☒ Town ☐ Village ☐ City Wabeno	4-1-11
9. R K Kurber	4928 Hwy 17 Rhinelander	☐ Town ☐ Village ☒ City RHINELANDER	4-1-11
10. Sharon Lunigan	205 STEPPING STONE L MANITOWISH WATERS WI	☒ Town ☐ Village ☐ City MANITOWISH WATERS	4-1-11

Certification of Circulator

I, SHERRI FERRELL (name of circulator), certify:

I reside 224 BERKSHIRE DR COCOA FL 32922 (circulator's residence - include number, street, and municipality).

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

4/1/11 (date)

Sherri E. Ferrell (signature of circulator)

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Connie Hostedler	405 Hwy C Rhinelander WI	☐ Town ☐ Village ☒ City RHINELANDER	4/2/11
2. Ray Elernicka	5166 MANOR RD. Rhinelander WI	☐ Town ☐ Village ☐ City RHINELANDER	4/2/11
3. Edith L Dillman	Woodruff WI	☒ Town ☐ Village ☐ City	4-2-11
4. James Schmidt	434 SPRING LAKE RD RHINELANDER	☐ Town ☐ Village ☒ City RHINELANDER	4-2-11
5. [redacted]	[redacted]	☐ Town ☐ Village ☐ City	
6. Pamela L. Trelevan	3770 Hwy 45 Eagle River	☐ Town ☐ Village ☒ City ~~3770 Hwy 45~~ EAGLE RIVER	4-2-11
7. Jon Skalecki	Eagle River 3770 HWY 45	☐ Town ☐ Village ☒ City ~~3770 Hwy~~ EAGLE RIVER	4-2-11
8. Todd Joan	4918 Rocky Run Rd Rhinelander	☒ Town ☐ Village ☐ City Pine Lake	4/2/11
9. Kevin Kohout	403 E. WASHINGTON TOMAHAWK WI	☒ Town ☐ Village ☒ City TOMAHAWK	4/2/11
10. Deborah Kohout	403 E. WASHINGTON TOMAHAWK	☒ Town ☐ Village ☒ City TOMAHAWK	4/2/11

Certification of Circulator

I, SHERRI FERRELL (name of circulator), certify:

I reside 224 BERKSHIRE DR COCOA FL 32922 (circulator's residence - include number, street, and municipality).

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

4/2/11 (date)

Sherrie E. Ferrell (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2718

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	310 W Leath St Tomahawk	☐ Town ☐ Village ~~☐ City~~ TOMAHAWK	4/2/11
2. Shelby Randall	W4679 Springlake Rd Merrill, WI	☒ Town ☐ Village ☐ City MERRILL	4/2/11
3. ~~Sharon Barker~~	~~T715 Michael Ln Merrill WI~~	~~☐ Town ☐ Village ☐ City Texas~~	
4. Rolf Wayne	1908 GRAND AVE MERRILL WI 54452	☐ Town ☐ Village ☒ City MERRILL	4-2-11
5. [illegible]	111 Park St Apt Merri	☐ Town ☐ Village ☐ City Merrill	4-2-11
6. [illegible]	W2109 Hwy C Merrill WI	☒ Town ☐ Village ☐ City [illegible]	4-2-11
7. [illegible]	W4724 Hwy 64 Merrill	☐ Town ☐ Village ☒ City Merrill	4-2-11
8. Rick Prange	MERRILL N3585 Hwy 107	☐ Town ☐ Village ☒ City MERRILL	4-2-11
9. Michelle Holdt	1009 E. 7th St Merrill	☐ Town ☐ Village ☒ City MERRILL	4-2-11
10. Noelle Kolan	W2201 Co Rd C Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	4/2/11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922
(circulator's residence - include number, street, and municipality)

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

4/2/11
(date)

Sherri E Ferrell
(signature of circulator)

GAB-170 (Rev 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2719

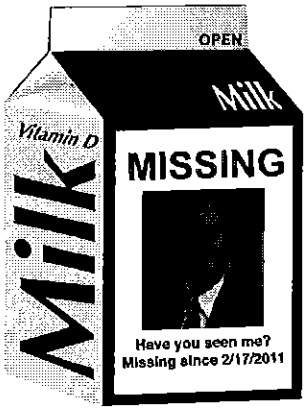
RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.



STATEMENT OF REASON FOR RECALL

*(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. **No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.**)*

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Ann E. Krenzke	7334 Spruce Ln. Eagle River, Wi 54521	☒ Town ☐ Village ☐ City Sugar Camp	3/26/2011
2. William C. Krenzke	7334 SPRUCE LN. Eagle River, Wi 54521	☒ Town ☐ Village ☐ City Sugar Camp	3-26-2011
3. Wallace D. Lent	14436 Mas Kellykhan Lac Du Flambeau	☒ Town ☐ Village ☐ City Lac Du Flam	4-5-11
4. Jon R. Tran	1491 Gunlock Shores Minocqua, WI 54548	☒ Town ☐ Village ☐ City Lac Du Flambeau	4-5-11
5. Carolyn R. Tran	1491 Gunlock Shores Ln Minocqua, WI 54548	☒ Town ☐ Village ☐ City Lac du Flambeau	4-5-11
6. Margaret Ann Schaus	12870 Hy D Lac Du Flambeau WI 54538	☒ Town ☐ Village ☐ City Lac du Flambeau	4-5-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Paula Visser, certify:
(name of circulator)

I reside at 6045 BEAVER TR ~~[illegible]~~ COVERLAND TOWNSHIP
(circulator's residence - include number, street, and municipality)

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

4/5/11 (date) Paula Visser (signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

Page No. 20

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Leonard Semanski		☒ Town ☐ Village ☐ City Florence	2/26/11
2. Sandy Seggelt	# 3558 U.S. 2	☒ Town ☐ Village ☐ City Florence	2/2
3. Stephen Blair	W4242 old Cty D	☒ Town ☐ Village ☐ City Florence WI	2/26/11
4. Jayne E Fall	4814 Hwy 70	☒ Town ☐ Village ☐ City Florence WI	2/26/11
5. Lin Bomberg	3861 Lagoon Rd	☒ Town ☐ Village ☐ City Florence WI	2/26/11
6. Jim Holperin	716 Florence Ave	☒ Town ☐ Village ☐ City Florence WI	2-26-11
7. Gilion Pilarski	2341 Florence	☒ Town ☐ Village ☐ City Florence WI.	2-26-11
8. Jim Petroff	1557 Point Brey Florence	☒ Town ☐ Village ☐ City Florence	2-26-11
9. Sandy Petroff	1557 Point Brey Florence	☒ Town ☐ Village ☐ City Florence	2-26-11
10. Ray Schute	PO Box 1185 Florence	☒ Town ☐ Village ☐ City Florence	2-26-11

Certification of Circulator

I, Russell H Tripp Jr, certify:
(name of circulator)

I reside 3656 Mud Lake Rd Florence WI 54121.
(circulator's residence - include number, street, and municipality)

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

03/02/11
(date)

Russell H Tripp Jr
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2721

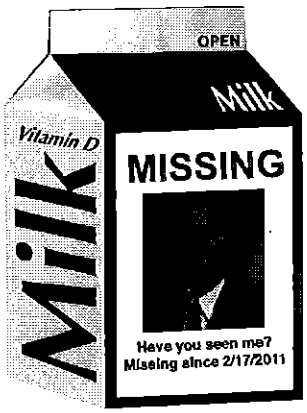
RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.



STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. [illegible]	W13208 CO J Peerbrook WIS	☒ Town ☐ Village ☐ City Summit	3/19/11
2. Louie Saotto	5738 Cty H Gleason WI 54	☒ Town ☐ Village ☐ City VILAS ~~[illegible]~~	3-19-011
3. Donald Ullman	620 North Ave Antigo WI	☒ Town ☐ Village ☐ City Antigo	3-19-11
4. Bert Pickard Jr	DeerBROOK WI	☒ Town ☐ Village ☐ City Peck	3-19-11
5. Joey A Pickey	N8795 ACKLEY RD Deerbrook WI 54424	☒ Town ☐ Village ☐ City ACKLEY	3-20-11
6. [illegible]	N2777 SCHILLKE RD GIBSON WI	☒ Town ☐ Village ☐ City SCHLEY	3/20/11
7. Laurie Pbzak	N6110 Rosedale Rd Deerbrook, WI 54424	☒ Town ☐ Village ☐ City Peck	4-4-11
8. Mike Pbzak	N6110 RosedaleRd Deerbrook, WI 54424	☒ Town ☐ Village ☐ City Peck	4-4-11
9. Tiffany Malnes	Deerbrook, WI 54424	☒ Town ☐ Village ☐ City Peck	4-5-11
10. Ryan Kowalke	Deerbrook WI 54424	☒ Town ☐ Village ☐ City Peck	4-5-11

Certification of Circulator

I, Kenneth Zupon, certify: (TOWN)
(name of circulator)

I reside at N5292 Townforest Rd. Deerbrook WIS 54424 ~~Town~~ VILAS
(circulator's residence - include number, street, and municipality)

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

April 5-11 (date) Kenneth Zupon (signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

Page No. 2722

RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

*(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. **No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.**)*

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James P Dunn	W10085 Pike Plains Dunbar WI 54119	☐ Town ☐ Village ☑ City Dunbar	3/29/11
2. Jason Anderson	10085 Pike Plains Dunbar WI 54119	☐ Town ☐ Village ☑ City Dunbar	3/29/11
3. Aaron Wright	W10085 Pike Plains Rd. #6 Dunbar, WI 54119	☐ Town ☐ Village ☑ City Dunbar	3/29/11
4. Andre Gazal	W10085 Pike Plains Rd Dunbar, WI	☐ Town ☐ Village ☐ City Dunbar	3/29/11
5. Michael Hoffman	W10085 Pike Plains Dunbar WI 54119	☑ Town ☐ Village ☐ City Dunbar	3/29/11
6. Luke Gerhart	W10085 Pike Plains Road Dunbar, WI 54119	☑ Town ☐ Village ☐ City Dunbar	3/29/11
7. Joshua W. Rottschafer Joshua W. Rottschafer	W10085 Pike Plains Road Dunbar, WI 54119	☑ Town ☐ Village ☐ City Dunbar	3/29/11
8. Jordan Oldham	W10085 Pike Plains Road Dunbar, WI 54119	☑ Town ☐ Village ☐ City Dunbar	3/29/11
9. Jeff Fed Sadler	W10085 Pike Plains Rd Dunbar, WI 54119	☑ Town ☐ Village ☐ City Dunbar	3/29/11
10. Seth Boreza	W10085 Pike Plains Rd. Dunbar, WI 54119	☐ Town ☐ Village ☐ City Dunbar	3-29-11

Certification of Circulator

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

I reside at 209 Mill St Goodman WI 54125.
(circulator's residence - include number, street, and municipality)

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

4/4/2011 (date) David Smail (signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Ramona G. Hornischer	N2660 ROW Rd Merrill WI 54452	☒ Town ☐ Village ☐ City MERRILL	03/31/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Herbert M Hornischer, certify:
(name of circulator)

I reside N2660 R.O.W. Rd Merrill WI 54452.
(circulator's residence - include number, street, and municipality)

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

4/1/11
(date)

Herbert M Hornischer
(signature of circulator)

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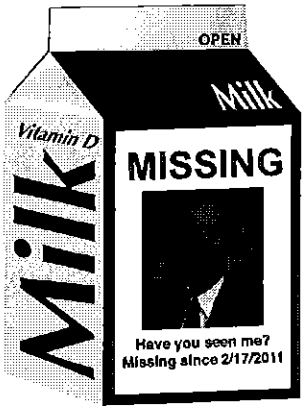
RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.



STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Barbara Ann Sziga	W11200 Horseshoe Bend Deerbrook, WI	☒ Town ☐ Village ☐ City Upham	3-17-11
2. Carl Tuecke	W10164 Ullman Rd Deerbrook WI 54424	☐ Town ☒ Village ☐ City Neva	3-17-11
3. Nathan Tuecke	W10164 Ullman Ln Deerbrook, WI 54424	☐ Town ☒ Village ☐ City Neva	3-17-11
4. Bernice Nature	1414 7th Ave Antigo WI 54409	☐ Town ☐ Village ☒ City Antigo City	3-17-11
5. Melissa Duffek	337 Spruce Lane Antigo, WI 54409	☒ Town ☐ Village ☐ City Antigo	3-17-11
6. Vera Benasystek	1118 S 12th Ave Wausau WI. 54401	☐ Town ☐ Village ☒ City Wausau	3-17-11
7. Joel B Barton	W1115 Hwy 64 Antigo WI 54409	☒ Town ☐ Village ☐ City Ackley	3-17-11
8. Julie Kapuster	636 Lincoln St. Antigo, WI 54409	☐ Town ☐ Village ☒ City Antigo	3-17-11
9. Terri Torgerson	221 Freiburger Antigo, WI	☐ Town ☐ Village ☒ City Antigo	3-17-11
10. Jackie Wuguit	W10512 Bluebell Rd. Deerbrook, WI	☒ Town ☐ Village ☐ City Peck	3-17-11

Certification of Circulator

I, Laurie Hottenstein, certify:
(name of circulator)

I reside at N3383 Meadow Rd, Antigo.
(circulator's residence - include number, street, and municipality)

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

3-17-11
(date)

Laurie A Hottenstein
(signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Austin Fitzhugh	4949 County Road D Eagle River, WI, 54521	☑ Town ☐ Village ☑ City Sugar Camp ~~Eagle River~~	2-24-11
2. [illegible]	6654 King Rd Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Rhinelander	2-24-11
3. [illegible]	5579 Zeman Rd Eagle River WI	☐ Town ☐ Village ☑ City Eagle River	2-24-11
4. [illegible]	8640 Peninsula Dr. Eagle River, WI	☐ Town ☐ Village ☑ City Eagle River	2-27-11
5. [illegible]	816 Sugarstone Rd Eagle River WI	☐ Town ☐ Village ☑ City Eagle River	2-24-11
6. [illegible]	9358 Jenny Lake Rd Tomahawk WI	☑ Town ☐ Village ☐ City Nokomis	2-24-11
7. Chad A Beaver	8129 Cottage Dr St. Germain WI	☐ Town ☐ Village ☐ City St. Germain	2-24-11
8. [illegible] Clouse	1760 Ontario St. 3-Lakes WI	☑ Town ☐ Village ☐ City 3-Lakes	2-24-11
9. [illegible] Walkowski	4660 Grand View Dr. Eagle River WI 54521	☑ Town ☐ Village ☐ City Sugar Camp	2-28-11
10. Joseph I. Hein [illegible]	7754 Hixon Rd. Minocqua, WI 54548	☐ Town ☐ Village ☐ City Minocqua	3/10/11

Certification of Circulator

I, Joseph I. Hein, certify:
(name of circulator)

I reside at 7754 Hixon Rd, Minocqua, WI 54548.
(circulator's residence - include number, street, and municipality)

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

3/10/11
(date)

[illegible]
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2726

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

*(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. **No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.**)*

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	W2789 Westview Rd Merrill WI	☒ Town ☐ Village ☐ City Schley	2/24/11
2. [illegible]	5216 Twilite Ln Eagle River	☒ Town ☐ Village ☐ City Lincoln	2/24/11
3. Paul Seyfert	1241 Catfish Lk Rd Eagle River	☒ Town ☐ Village ☐ City Lincoln	2-24-11
4. Frederick Schaff	778 State Hwy 17 So Eagle River, WI	☒ Town ☐ Village ☐ City Lincoln	2-24-11
5. [illegible]	870 Hwy 17 South Eagle River WI	☒ Town ☐ Village ☐ City Lincoln	2-24-11
6. Paul D Schaff	870 Hwy 17 South Eagle River, WI	☒ Town ☐ Village ☐ City Lincoln	2-24-11
7. [illegible]	4816 Ice St Eagle River	☒ Town ☐ Village ☐ City Lincoln	2-24-11
8. [illegible]	4486-1 Chapel Lake Rd Eagle River WI	☒ Town ☐ Village ☐ City Washington	2-24-11
9. [illegible]	8791 Cty K East Conover	☒ Town ☐ Village ☐ City Conover	2-24-11
10. Bill Shantz	~~[illegible]~~ 8301 Fawn Lake Ln Eagle River	☒ Town ☐ Village ☐ City Sugar Camp ~~Eagle~~	2-24-11

Certification of Circulator

I, CRAIG KLEIN (name of circulator) LINCOLN TW, certify:

I reside at 3861 GAFFNEY DRIVE EAGLE RIVER, WI. 54521 (circulator's residence - include number, street, and municipality).

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

2-24-11 (date)

Craig Klein (signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER 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 Schwentegor	1152 Chadwick Dr. Arbor Vitae 54568	☒ Town ☐ Village ☐ City Arbor Vitae	3/1/2011
2. Jay Little	7564 Trailwood Dr	☒ Town ☐ Village ☐ City Minocqua	3-1-11
3. Brent Wagner	9673 Oak Lane	☒ Town ☐ Village ☐ City Minoqua	3-1-11
4. Donald H. Ray	1797 N. Parkway Arbor Vitae, WI	☒ Town ☐ Village ☐ City Arbor Vitae	3-1-11
5. Jon Jantzen	2280 Dean Rd. St. Germain, WI 54558	☒ Town ☐ Village ☐ City St. Germain	3-1-11
6. Debbie Patkunich	7564 Trailwood Minocqua	☒ Town ☐ Village ☐ City Minocqua	3-1-11
7. Gary L. Rankin	5764 Airport Rd. Boulder Jct.	☒ Town ☐ Village ☐ City Boulder Jct.	3-1-11
8. Allen Stirling	8370 Mercer Lake Rd	☒ Town ☐ Village ☐ City Minocqua	3-1-11
9. Chad Rockwell	405 1st Ave Woodruff, WI 54568	☒ Town ☐ Village ☐ City Woodruff	3/1/11
10.		☒ Town ☐ Village ☐ City Woodruff	

Certification of Circulator

I, Bruce Kluever, certify:
(name of circulator)

I reside 9622 Oatwood Drive Minocqua Wi. 54548.
(circulator's residence - include number, street, and municipality)

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

March 13, 2011
(date)

Bruce Kluever
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§ 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 27-28

RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	5741 TIMBER RANGE RD RHINELANDER, WI 54501	☒ Town ☐ Village ☐ City NEWBOLD	3/18/11
2.	6061 Wildwood Hr. Cr. Rhinelander, WI 54501	☒ Town ☐ Village ☐ City NewBold	3/18/11
3.	5741 Timber Range Rd. Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Newbold	3/18/11
4.	6295 Spider Lake Rd McNaughton, WI 54543	☒ Town ☐ Village ☐ City Newbold	3/25/11
5.	5520 River Rd. McNaughton, WI 54543	☒ Town ☐ Village ☐ City Newbold	3/25/11
6.	6433 Tom Doyle Lake Rd. Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Newbold	3/25/11
7.	5746 Blackbear Rhinelander, WI 54501	☒ Town ☐ Village ☐ City New Bold	3/25/11
8.	4723 Spruce Meadow Ln Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Sugar Camp	3/25/2011
9.	6691 SPIDER LAKE RD RHINELANDER, WI 54501	☒ Town ☐ Village ☐ City NEWBOLD	3/25/11
10.	5850 Timber Range Rd Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Newbold	3/25/11

Certification of Circulator

I, SCOTT KOVAL, certify:
(name of circulator)

I reside at 5741 TIMBER RANGE RD, RHINELANDER, WI 54501 TOWN OF NEWBOLD.
(circulator's residence - include number, street, and municipality)

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

3/28/2011
(date)

(signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
[illegible]	N5143 Wolf Rd Iola, WI 54442	■ Town ☐ Village ☐ City	4/4/11
2. [illegible]	N5143 Wolf Rd Iola, WI 54442	■ Town ☐ Village ☐ City	4/4/11
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, Nikki Helen N. Jensen, certify:
(name of circulator)

I reside N5143 Wolf Rd Iola, WI 54442.
(circulator's residence - include number, street, and municipality)

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

April 4, 2011
(date)

[illegible]
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Ronald J. Van Swol	4040 W. Stormy Lk. Rd.	☒ Town ☐ Village ☐ City CONOVER, WI	4/2/11
2. Georgene A. VanSwol	4040 W Stormy Lk Rd	☒ Town ☐ Village ☐ City Conover WI	4/2/11
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, Ronald J. VAN SWOL (name of circulator), certify:

I reside 4040 W. Stormy Lake Rd. Conover, WI. 54519 (circulator's residence - include number, street, and municipality).

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

4-2-11 (date)

Ronald J. Van Swol (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2731

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER 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 Fraker	3424 Co Hwy C Florence	☑ Town ☐ Village ☐ City Homestead	4/5/11
2. Dublin Fraker	3424 Co Hwy C	☑ Town ☐ Village ☐ City Homestead	4/5/11
3. Arleigh Yaeger	4447 River Tr Rd. Cavour, WI	☑ Town ☐ Village ☐ City Cavour	4/5/11
4. Jara Yaeger	4447 Rivertrl Rd Cavour, WI	☑ Town ☐ Village ☐ City Cavour	4/5/11
5. Linda Zellmer	W6730 Co Rd T Pearson, WI 54462	☒ Town ☐ Village ☐ City Ainsworth	4/5/11
6. Robert Fraker	2360 Co Rd B FLORENCE WI.	☒ Town ☐ Village ☐ City AURORA	4/5/11
7. Linda Fraker	2360 Cty Rd B FLORENCE, WI 54121	☒ Town ☐ Village ☐ City AURORA	4/5/11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside 3424 County Hwy C Florence, WI 54121 (circulator's residence - include number, street, and municipality).

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

April 5, 2011 (date)

David Fraker (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Steven R Hoffmaner	265 Hwy 17S Eagle River, WI 54521	☒ Town ☐ Village ☐ City Lincoln	4/5/11
2. Judi J Holperin	265 Hwy 17S Eagle River WI 54521	☒ Town ☐ Village ☐ City	4/6/11
3. Robert Doman	247 Hwy 17S Eagle River	☒ Town ☐ Village ☐ City Lincoln	4/6/11
4. Gladia J Doman	247 Hwy 17 S. Eagle River	☒ Town ☐ Village ☐ City Lincoln	4/6/11
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, Robert Doman (name of circulator), certify:

I reside 247 Hwy 17S Eagle River WI 54521 (circulator's residence - include number, street, and municipality).

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

4-5-11 (date)

Robert Doman (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

Job desertion

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.

SIGNATURES OF ELECTORS	STREET & NUMBER 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 A. Babitch	8944 Forest Lane Minocqua, Wi.	☒ Town ☐ Village ☐ City Minocqua	3/30/11
2. [illegible]	8944 FOREST LANE MINOCQUA, WI.	☒ Town ☐ Village ☐ City MINOCQUA	04/02/11
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, Cheryl A. Babitch (name of circulator) CHERYL A. BABITCH, certify:

I reside 8944 Forest Lane, Minocqua (circulator's residence - include number, street, and municipality).

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

4/30/11 (date)

Cheryl A. Babitch (signature of circulator)

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Page No: 2734

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Carol M Berger	11530 Shoreview Dr Minocqua WI 54548	☒ Town ☐ Village ☐ City Minocqua	4/15/11
2. Carol S. Bergin	11530 Shoreview Dr Minocqua WI 54548	☒ Town ☐ Village ☐ City Minocqua	4/15/11
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, Harry S. Griswold, certify:
(name of circulator)

I reside 11414 Spruce Rd, Arbor Vitae.
(circulator's residence - include number, street, and municipality)

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

4/05/11
(date)

Harry S. Griswold
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 12735

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER 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 Kanallo	705 5th St Apt 7 Goodman	☑ Town ☐ Village ☐ City Goodman	2/25/11
2. Jesse McPherson	305 Mill St Goodman	☑ Town ☐ Village ☐ City Goodman	2/25/11
3. Veronica McPherson (Mc Pherson)	305 Mill St. Goodman WI.	☑ Town ☐ Village ☐ City Goodman	2.25.11
4. David Smail	209 Mill St Goodman	☑ Town ☐ Village ☐ City Goodman	2/25/11
5. Stewart Schauman	9673 W. Owen Tayor Dr. Armstrong Creek	☑ Town ☐ Village ☐ City Armstrong	2/26/11
6. James Goffin	Goodman 203 Mill St.	☒ Town ☐ Village ☐ City Goodman	2-26-11
7. Patrick Kowalkowski	Goodman 312 MILL ST	☑ Town ☐ Village ☐ City Goodman	2/26/11
8. J.C. Webster	103 Mill St Goodman WI	☑ Town ☐ Village ☐ City Goodman	2/26/11
9. Jerry Revis	109 4th St. Goodman WI 54125	☑ Town ☐ Village ☐ City Goodman	2/26/11
10. Robert R.E. Patrow	Goodman 206 4th	☑ Town ☐ Village ☐ City Goodman	2/26/11

Certification of Circulator

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

I reside at 209 Mill St. Goodman WI
(circulator's residence - include number, street, and municipality)

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

2/28/2011
(date)

David Smail
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2736

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Beverly Hemuchis	N6759 County Rd E Tomahawk WI 54487	☐ Town ☐ Village ☒ City Rock Falls	2-28-11
2. Brad Dittmar	200 Elst St Apt. A Merrill WI, 54452	☐ Town ☐ Village ☒ City Merrill	2-28-11
3. Susan Lark	310 pine St Merrill WI 54452	☐ Town ☐ Village ☒ City merrill	2-28-11
4. Jon H. Anderson	108 ½ So. Forest St. Merrill, WI. 54452	☐ Town ☐ Village ☒ City merrill	2-28-11
5. Josh Wenzel	W8110 Cedar Rd Merrill WI 54452	☒ Town ☐ Village ☐ City Corning	2-28-11
6. Bruce Wendt	N2604 Hwy E Merrill WIS 54452	☒ Town ☐ Village ☐ City Harding	2-28-11
7. Katie Bonis	N5398 Hwy 17 Gleason, WISC.	☒ Town ☐ Village ☐ City Russell	2-28-11
8. David E. Dulette	907 N STATE ST	☐ Town ☐ Village ☒ City MERRILL	2-28-11
9. [illegible]	W3011 Sarrisa Rd MERRILL WI	☒ Town ☐ Village ☐ City Schley	2-28-11
10. James R Dupke	1120 Jackson St Merrill WI.	☐ Town ☐ Village ☒ City Merrill	2-28-11

Certification of Circulator

I, Terry Kottke, certify:
(name of circulator)

I reside at 7150 13th lane athens WIS 54411.
(circulator's residence - include number, street, and municipality)

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

2-28-11
(date)

Terry Kottke
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2737

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER 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 Koehler	W11496 Van Beek Rd Crivitz WI	☒ Town ☐ Village ☐ City Stephenson	3-17-11
2. Charles D	N14200 Cty A Amberg, WI	☒ Town ☐ Village ☐ City Athelstane	3-17-11
3. Bridget Drew	N14200 Cty A Amberg, WI	☒ Town ☐ Village ☐ City Athelstane	3-17-11
4. Tamara A Chalkenning	N7901 Pine Ridge Sky Crivitz	☐ Town ☐ Village ☐ City Stephenson	3-17-11
5. Cheryl L. Wurth	W11591 Archer Ln Crivitz, WI 54114	☒ Town ☐ Village ☐ City Stephenson	3-17-11
6. Edward Wurth	W11591 ARCHER LN CRIVITZ WI 54114	☒ Town ☐ Village ☐ City STEPHENSON	3-17-11
7. Tim BRITTAIN	Crivitz WI 54114 1102 2nd AVE	☐ Town ☐ Village ☐ City Crivitz	3-18-11
8. Sheryl Brittain		☐ Town ☐ Village ☐ City	
9. Andrew Kegel	W8028 Marshline Hill Rd Crivitz WI 54114	☐ Town ☒ Village ☐ City Stephenson Crivitz	3/18/11
10. Ted Jan	1221 5th Ave Crivitz	☐ Town ☒ Village ☐ City Crivitz	3/18/11

Certification of Circulator

I, Gerald F Koehler, certify:
(name of circulator)

I reside W11496 VanBeek Rd Crivitz, WI 54114 Town of Stephenson.
(circulator's residence - include number, street, and municipality)

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

18 March 2011
(date)

G Koehler
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Regan Kovacich	W1527 Country Squire Gleason WI 54435	☒ Town ☐ Village ☐ City HARRISON	2/26/11
2. Alex M. Lindsay	28 W. Spirit Ave. Tomahawk, WI 54487	☐ Town ☐ Village ☒ City Tomahawk	02.26.11
3. Amanda Bergma	N8090 Hwy 17 Gleason, WI 54435	☒ Town ☐ Village ☐ City Harrison	2-26-11
4. Karen Langlerbey	N7745 Gartman Rd Gleason WI 54435	☒ Town ☐ Village ☐ City Harrison	2-27-11
5. Evelyn Grunse	W1499 Lonbasco Lane Gleason Wisc	☒ Town ☐ Village ☐ City Harrison	2-27-11
6. Gerald Grunse	W1499 Lonbasco Ln Gleason Wisc	☒ Town ☐ Village ☐ City Harrison	2-27-11
7. Louise Mascorro	W1660 Bear Trail Gleason, Wi	☒ Town ☐ Village ☐ City Harrison	2-27-11
8. Hector Mascorro	W1660 BEAR TRAIL RD. GLEASON, WISC. 54435	☒ Town ☐ Village ☐ City HARRISON	2-27-11
9. John Schuster	W1676 BEAR TRAIL GLEASON WI 54435	☒ Town ☐ Village ☐ City HARRISON	2-27-11
10. John Schuster	W1676 Bear Trail Gleason, WI 54435	☒ Town ☐ Village ☐ City Harrison	2-27-11

Certification of Circulator

I, REGAN KOVACICH, certify:
(name of circulator)

I reside W1527 COUNTRY SQUIRE RD, GLEASON, WI 54435 TOWN OF HARRISON.
(circulator's residence - include number, street, and municipality)

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

2/27/11
(date)

(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Elmer A Banaszak	806 Kloppman St Crivitz WI 54114	☐ Town ☒ Village ☐ City Crivitz wi	3/30/11
2. [illegible]	806 KLOPPMAN ST CRIVITZ WI.	☐ Town ☒ Village ☐ City Crivitz	3/30/11
3. [redacted]	6488 Kuehta [redacted]	☒ Town [redacted] ☐ Village ☐ City	[redacted]
4. [redacted]	[redacted] [redacted]	☒ Town [redacted] ☐ Village ☐ City	[redacted]
5. [illegible]	W8610 Kuehta Rd Crivitz WI 54114	☒ Town Stephenson ☐ Village ☐ City	3/30/11
6. [illegible]	808 Pfall ave Crivitz wi 54114	☐ Town ☒ Village ☐ City Crivitz	3/30/11
7. Sandy Fischer	W7750 Wayside RD Crivitz WI 54114	☒ Town ☐ Village ☐ City Middle Inlet	3/31/11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Elmer Banaszak, certify:
(name of circulator)

I reside 806 Kloppman St Crivitz wi 54114.
(circulator's residence - include number, street, and municipality)

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

3-31-2011
(date)

Elmer A Banaszak
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Judy A. Bleier	18430 Neuman Lane Lakewood WI 54138	☒ Town ☐ Village ☐ City Lakewood	4/1/11
2. James W Bleier	18430 Neuman Lane Lakewood WI 54138	☒ Town ☐ Village ☐ City Lakewood	4/1/11
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, Judy A. Bleier, certify:
(name of circulator)

I reside 18430 Neuman Lane, Lakewood, WI 54138.
(circulator's residence - include number, street, and municipality)

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

April 1, 2011
(date)

Judy A. Bleier
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Brittany P. Kehl	427 Cranberry BLVD Manitowish Waters	☒ Town ☐ Village ☐ City Manitowish Waters	3/14/11
2. Calvin G. La Porte	95 Ely Rd Manitowish Waters, Wi.	☒ Town ☐ Village ☐ City Manitowish Waters	3/14/11
3. [illegible]	658 PELICAN ST. RHINELANDER WI	☐ Town ☐ Village ☒ City RHINELANDER	3/15/11
4. Crystal Weber	658 pelican st Rhinelander, WI	☐ Town ☐ Village ☒ City Rhinelander	3/15/11
5. [illegible]	7541 Forest Trail Lake Tomahawk WI	☐ Town ☐ Village ☐ City Woodruff	3-15-11
6. Steve Perry	10854 Old Hwy 51N Arbor Vitae	☒ Town ☐ Village ☐ City Arbor Vitae	3/15/11
7. Lynda Perry	10854 Old Hwy 51N Arbor Vitae	☒ Town ☐ Village ☐ City Arbor Vitae	3/15/11
8. [illegible]	1140 Blue Island Rd Arbor Vitae	☒ Town ☐ Village ☐ City Arbor Vitae	3/15/11
9. Erica Adams	1140 Blue Island Rd Arbor Vitae	☒ Town ☐ Village ☐ City Arbor Vitae	3/15/11
10. [illegible]	8171 Timber CN ST. Germain	☒ Town ☐ Village ☐ City ST. Germain	3-15-11

Certification of Circulator

I, Ronald A. Fox Sr (name of circulator), certify:

I reside at 5349 Island Lake Rd Boulder Junction WI (circulator's residence - include number, street, and municipality).

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

3/15/11 (date)

(signature of circulator)

Page No. 2742

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	8867 Woodridge Ln Woodruff WI 54568	☐ Town ☒ Village ☐ City Woodruff	3/15/11
2. Cathy Iverson	8867 Woodridge Ln Woodruff, WI 54568	☐ Town ☒ Village ☐ City Woodruff	3/15/11
3. Richard Fox	8230 Dam Rd Minocqua WI	☐ Town ☒ Village ☐ City Minocqua	3/15/11
4. Douglas McCoy	9615 Sky Pond Rd Minocqua, WI	☒ Town ☐ Village ☐ City Minocqua	3/15/11
5. [illegible]	4207 Lakewood Rd Harshaw WI 54529	☒ Town ☐ Village ☐ City Cassian	3/15/11
6. Christin Velhuet	7391A Forest Trail Rd Lake Tomahawk WI 54529	☐ Town ☒ Village ☐ City Woodruff	3/15/11
7. [illegible]	8128 Constellation Dr. Minocqua WI 54548	☒ Town ☐ Village ☐ City Minocqua	3-15-11
8. [illegible]	125 Front St. P.O. Box 649 minocqua WI	☒ Town ☐ Village ☐ City Minocqua	3-15-11
9. Nora E Wattelet	125 Front St., PO Box 649 Minocqua WI 54548	☒ Town ☐ Village ☐ City minocqua	3-15-11
10. [illegible]	1730 Thunderbird Ln. PO Box 1094 Lac du Flambeau WI. 54538	☐ Town ☒ Village ☐ City Lac du Flambeau	3/15/11

Certification of Circulator

I, Ronald A. Freys Sr., certify:
(name of circulator)

I reside at 5349 Eagle Lake Rd Boulder Junction, WI.
(circulator's residence - include number, street, and municipality)

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

3-15-11 (date)

(signature of circulator)

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2743

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Denise Einhorn	200 N Lake Ave Apt 5 Crandon WIS 54520	☑ Town ☐ Village ☐ City Crandon WIS	4-9-11
2. Kacy Vanzo	Crandon 3218 Krystal Lane	☑ Town ☐ Village ☐ City Crandon WI	4-9-11
3. Olivia Runway	100A WEST BLEN ST Crandon	☑ Town ☐ Village ☐ City Crandon WI	4-9-11
4. Louis Barth	Wabeno 1776 cecil AVE	☑ Town ☐ Village ☐ City Wabeno WI	4-9-11
5. [illegible]	Argonne 9309 County Road NN WI. 54511	☑ Town ☐ Village ☐ City Argonne WI	4-9-11
6. [illegible]	10048 Airport RD Crandon WI 54520	☑ Town ☐ Village ☐ City Crandon WI	4-9-11
7. [illegible]	~~Crandon~~ Crandon	☑ Town ☐ Village ☐ City Crandon	4-9-11
8. Kelly Kerslis	4914 1st Laona	☑ Town ☐ Village ☐ City Laona	4-9-11
9. Lacey N. Voss	5525 Plantation Ln Crandon	☑ Town ☐ Village ☐ City Crandon	4-9-11
10. Robert Adkins	3604 CTY Rd Lu Crandon	☑ Town ☐ Village ☐ City Crandon	4-9-11

Certification of Circulator

I, Larry W. Schumacher (name of circulator), certify:

I reside 4621 S. 72nd E. Pl., Tulsa OK. (circulator's residence - include number, street, and municipality)

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

4-11-11 (date)

Larry W. Schumacher (signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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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.

SIGNATURES OF ELECTORS	STREET & NUMBER 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 Mann	W7372 Cty T Pearson WI 54462	☒ Town ☐ Village ☐ City Ainsworth	4/9/11
2. [illegible]	100 N. LAKE AVE #2 CRANDON, WI 54520	☐ Town ☐ Village ☒ City CRANDON	4/9/11
3. [illegible]	Crandon, WI 54520 604 N Prospect	☐ Town ☐ Village ☒ City Crandon	4/09/11
4. Maggie Pierrotti	PO Box 305 Wabeno, WI	☒ Town ☐ Village ☐ City Wabeno	4/9/11
5. Lauren Manner	2175 Wildcat lane Lac Du Flambeau	☒ Town ☐ Village ☐ City Lac Du Flambeau	4/9/11
6. [illegible]	7662 MARQUARDT LANE Pickerel, WI	☒ Town ☐ Village ☐ City Nashville	4/09/11
7. [illegible]	703 N. PROSPECT Crandon WI	☐ Town ☐ Village ☒ City Crandon	4/09/11
8. Scott Schubert	PO BX 344 WABENO WI	☒ Town ☐ Village ☐ City WABENO	4/9/11
9. Mary Falla	4332 Pelican River Laona WI 54541	☒ Town ☐ Village ☐ City Laona	4/9/11
10. Ron Dennis	41028 Roberts Lake Rd Laona WI	☒ Town ☐ Village ☐ City Laona	4/9/11

Certification of Circulator

I, Larry W. Schumacher (name of circulator), certify:

I reside 4621 S. 72nd E. Pl. Tulsa, OK (circulator's residence - include number, street, and municipality).

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

4-11-11 (date)

Larry W. Schumacher (signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER 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 Falue	5397 Beech St Laona	☒ Town ☐ Village ☐ City Laona	4.9.11
2. James V. Sheldon	901 East Grant St Crandon WI 54520	☐ Town ☐ Village ☒ City Crandon	4-9-11
3. Crystal Getzinger	8249 North La. Argonne WI	☒ Town ☐ Village ☐ City Argonne	4/9/11
4. Brad Walden	9053 Timberlane Rd Woodruff, WI 54568	☒ Town ☐ Village ☐ City Woodruff	4/9/11
5. Andrea Lavandowski	5586 Hwy 17 P.O. Box 263 Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4-9-11
6. David Zagen	401 E Glen St. Crandon WI, 54520	☐ Town ☐ Village ☒ City Crandon	4-9-11
7. Amber L. Lund	4788 Cty R.D. H Laona WI 54541	☒ Town ☐ Village ☐ City Laona	4-9-11
8. Lee Ohlgerowes	~~[illegible]~~ 5461 Eagle Newald WI 54511	☒ Town ☐ Village ☐ City Newald	4-9-11
9. April Ocie	5220 Spruce St #1 Laona, WI 54541	☒ Town ☐ Village ☐ City Laona	4-9-11
10. Britney Allen	5746 West Shore Dr Laona WI 54541	☒ Town ☐ Village ☐ City Laona	4-9-11

Certification of Circulator

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4-11-11 (date)

Larry W. Schumacher (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2746

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	5450 KAK YOT LANE P.O. BOX 125 CRANDON WIS 54523	☐ Town ☐ Village ☒ City CRANDON	4-9-11
2. [illegible]	1248 ~~Pine~~ Garfield Niagara WI 54151	☐ Town ☐ Village ☒ City Niagara	4-9-11
3. [illegible]	Niagara WI 54151 1301 Wilser St	☐ Town ☐ Village ☒ City Niagara	4-9-11
4. Betty Jones	1008 Main St Niagara WI 54151	☐ Town ☐ Village ☒ City Niagara	4-10-11
5. Noel Wilson	1301 Wilser St Niagara WI 54151	☐ Town ☐ Village ☒ City Niagara	4-10-11
6. Kathy Santagaw	1804 Ridge Niagara, Wi 54151	☐ Town ☐ Village ☒ City Niagara	4-10-11
7. Shannon Holmes Shannon Holmes	824 Vine St. Niagara, WI	☐ Town ☐ Village ☒ City Niagara	4-10-11
8. David Dunlap	1011 Pierce St Niagara Wi	☐ Town ☐ Village ☒ City Niagara	4-10-11
9. Donna Bauer	Niagara ~~WI 1812 Scott St~~	☐ Town ☐ Village ☐ City Niagara WI	4-10-11
10. Wayne Crotteau	1872 Ledge St Niagara	☐ Town ☐ Village ☒ City Niagara WI	4/10/11

Certification of Circulator

I, Larry W. Schumacher, certify:
(name of circulator)

I reside 4621 S. 72nd E Pl. Tulsa OK
(circulator's residence - include number, street, and municipality)

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4-11-11
(date)

Larry W. Schumacher
(signature of circulator)

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Cindy Wagner	7584 Glacier Park Ct.	☒ Town ☐ Village ☐ City Woodboro	3-15-11
2. Larry Mahay	W 2489 Stamper Road.	☒ Town ☐ Village ☐ City White Lake	3-16-11
3. [illegible]	7584 Glacier Park Ct	☒ Town ☐ Village ☐ City Woodboro	3-16-11
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Brian Wagner (name of circulator), certify:

I reside 7584 Glacier Park Court, Woodboro (circulator's residence - include number, street, and municipality).

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

4-3-11 (date) [illegible] (signature of circulator)

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RECALL PETITION

TO: Wisconsin Government Accountability Board
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STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Terry Waldvogel	N10884 Cresent DR Birnamwood Wis	☒ Town ☐ Village ☐ City ANIWA	3-14-11
2. [illegible]	354 CHURCH ST BIRNAMWOOD, WI	☐ Town ☒ Village ☐ City BIRNAMWOOD	3/14/11
3. [illegible]	N10884 Cresent Dr Birnamwood WI	☐ Town ☒ Village ☐ City Aniwa	3/14/11
4. Gary Lobedsch	W18102 Hill Rd. Birnamwood, wis	☒ Town ☐ Village ☐ City ANIWA	3/22/11
5. Anton Koshuch	Birnamwood, wis	☒ Town ☐ Village ☐ City Aniwa	3/22/11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at N10884 Cresent DR Birnamwood Wi 54414 ANIWA (circulator's residence - include number, street, and municipality).

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

4-4-11 (date)

Terry Waldvogel (signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jennifer Reid	2068 The Pine Rd. West Tomahawk, WI	☐ Town ☐ Village ☐ City Nokomis	4/6/11
2. [illegible]	2267 Lee Rd Tomahawk WI 54487	☑ Town ☐ Village ☐ City Nokomis	4/6/11
3. Brian Hakala	914 CHARLEVAUX	☐ Town ☐ Village ☑ City TOMAHAWK	4/6/11
4. Diane Bigsole	N8596 COUNTY RD B	☐ Town ☑ Village ☐ City GLEASON	4/6/11
5. [illegible]	209 E. Wisconsin Ave	☐ Town ☐ Village ☑ City Tomahawk	4/6/11
6. [illegible]	W4263 Apartment St	☑ Town ☐ Village ☐ City Pine River	4/6/11
7. [illegible]	408 East St Merrill, WI	☐ Town ☐ Village ☑ City MERRILL	4/6/11
8. Stephanie Bergman	W4603 Emils Ave Gleason, WI 54435	☑ Town ☐ Village ☐ City Schley	4/6/11
9. Judy Chartier	1900 E. Main St	☐ Town ☐ Village ☑ City Merrill	4/6/11
10. [illegible]	W835 County D Gleason, WI 54435	☑ Town ☐ Village ☑ City Gleason	4-6-11

Certification of Circulator

I, SHERRY FERRELL, certify:
(name of circulator)

reside 224 BERKSHIRE DR COCOA FL 32922.
(circulator's residence - include number, street, and municipality)

ersonally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or ict represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated site his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 13(3)(a), Wis. Stats.

4/6/11
(date)

Sherrie E. Ferrell
(signature of circulator)

(Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
005, http://gab.wi.gov email: gab@wi.gov

Page No. 2750

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	3881 Trails End Loop Rhinelander WI	☐ Town ☐ Village ☐ City Rhinelander	4/19/11
2.	802 A Mason St Rhinelander, WI	☐ Town ☐ Village ☐ City Rhinelander	4/19/11
3.	Rhinelander 4994 Oldhwy 8	☐ Town ☐ Village ☐ City Rhinelander	4-19-11
4.	646 W Davenport St # Rhinelander WI	☐ Town ☐ Village ☐ City Rhinelander	4/19/11
5.	Rhinelander WI 634 Carr St	☐ Town ☐ Village ☐ City Rhinelander	4/19/11
6.	528 S Pelham	☐ Town ☐ Village ☐ City Rhinelander	4/19/11
7.	2480 Bergman rd.	☐ Town ☐ Village ☐ City Rhinelander	4/19/11
8.	7450 Knowles Dr.	☐ Town ☐ Village ☐ City Eagle River	4/19/11
9.	4227 trails end Rd. unit B	☐ Town ☐ Village ☐ City Rhinelander	4/19/11
10.	116 Harmony Hills ct	☐ Town ☐ Village ☐ City Rhinelander	4/19/11

Certification of Circulator

I, Jacqueline Morales, certify:
(name of circulator)

I reside 7271 NW 177 Terr. Hialeah, FL 33015.
(circulator's residence - include number, street, and municipality)

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

4-19-11
(date)

(signature of circulator)

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RECALL PETITION

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We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	1550 Rivergate	☐ Town ☐ Village ☑ City Rhinelander	4/18/11
2. [illegible]	28 N BROWN ST 302	☐ Town ☐ Village ☑ City Rhinelander	4/18/11
3. Richard W Williams	64 N BROWN ST APT 4	☐ Town ☐ Village ☑ City Rhinelander	4/18/11
4. Marla Cuhemmy	28 N. BROWN ST #305	☐ Town ☐ Village ☑ City Rhinelander	4/19/11
5. [illegible]	26 N Brown ST	☐ Town ☐ Village ☑ City Rhinelander	4/19/11
6. Anna Brouillard	507 a Mason street	☐ Town ☐ Village ☑ City Rhinelander	4/19/11
7. John R Raabe	1028 Lincoln lane	☑ Town ☐ Village ☐ City ST. GERMAIN	4-19-11
8. [illegible]	6181 HARMONY HILL	☐ Town ☐ Village ☑ City Rhinelander	4-19-11
9. Ed Schaul	9651 WAYNE DRIVE	☐ Town ☐ Village ☐ City WOODRUFF	4/19/11
10. [illegible]	28 N. Brown ST	☐ Town ☐ Village ☑ City Rhinelander	4-19-11

Certification of Circulator

I, Jacqueline Morales, certify:
(name of circulator)

I reside 7271 NW 174 terr. Hialeah, FL. 33015.
(circulator's residence - include number, street, and municipality)

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

4-19-11
(date)

J. Morales
(signature of circulator)

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RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible] Hunter	417 Brownstreet Ave. Tomahawk	☐ Town ☐ Village ☒ City Tomahawk	4-18-11
2. Brad E Bishop	W3012 Co. Rd A	☐ Town ☐ Village ☐ City TOMAHAWK	4-18-11
3. [illegible]	1411 E RING	☐ Town ☐ Village ☒ City TOMAHAWK	4/18/11
4. [illegible]	1828 Theiler Dr	☐ Town ☐ Village ☒ City Tomahawk	4-18-11
5. [illegible]	N11812 Deer LK RD	☒ Town ☐ Village ☐ City TOMAHAWK	4-18-11
6. [illegible]	N11321 Frontage	☒ Town ☐ Village ☐ City TOMAHAWK	4-18-11
7. [illegible]	N11016 CTHM A	☒ Town ☐ Village ☐ City Tomahawk	4-18-11
8. [illegible]	N10170 PINE SHORE LN ~~TOMAH~~	☒ Town ☐ Village ☐ City TOMAHAWK	4-18-11
9. [illegible]	118 W LINCOLN AVE	☐ Town ☐ Village ☒ City TOMAHAWK	4/18/11
10. [illegible]	8690 State HWY 86	☒ Town ☐ Village ☐ City Tomahawk	4/18/11

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4-18-11 (date)

[signature] (signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	9748 Island Estates Pl. Apt 312 Minocqua WI 54548	☒ Town ☐ Village ☐ City Minocqua	4/18/2011
2.	7997 Heron Rd LK. Tomahawk, WI 54539	☒ Town ☐ Village ☐ City LK. Tomahawk	4-18-11
3.	2224 CTY L	☒ Town ☐ Village ☐ City Nokomis	4/18/11
4.	617 Bronsted Ave	☐ Town ☐ Village ☒ City Tomahawk	4/18/11
5.	8½ W. WIS. AVE	☐ Town ☐ Village ☒ City TOMAHAWK	4-18-11
6.	W9992 Sunset Point Rd Sunset Point Rd	☐ Town ☐ Village ☒ City Tomahawk	4-18-11
7.	N11964 City Rd U Town	☒ Town ☐ Village ☐ City Bradley	4-18-11
8.	4832 Prairie Tr.	☐ Town ☐ Village ☒ City Rhinelander	4-18-11
9.	127 N Steven St #1	☐ Town ☐ Village ☒ City Rhinelander	4-18-11
10.	4426 Valley Ct.	☐ Town ☐ Village ☒ City Rhinelander	4/18/11

Certification of Circulator

I, Jacqueline Morales, certify:
(name of circulator)

I reside 7271 NW 174 Ter. Hialeah, Fl. 33015.
(circulator's residence - include number, street, and municipality)

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

4-18-11
(date)

(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2754

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Charles Bolden	W4448 Biscayne Bay Merrill, Wi. 54452	☒ Town ☐ Village ☐ City Merrill	2/24/11
2. [illegible] Johnson	W4448 Biscayne Bay Merrill, WI 54452	☒ Town ☐ Village ☐ City Merrill	2/24/11
3. Mary Bolden	W4448 Biscayne Bay Merrill, WI. 54452	☒ Town ☐ Village ☐ City Merrill	2/24/11
4. Madeline Collins	W4243 Schuelke Rd Gleason, WI 54435	☒ Town ☐ Village ☐ City Schley	2-24-11
5. [illegible] (Kelly Collins)	North 4243 Schuelke Rd Gleason, WI 54435	☒ Town ☐ Village ☐ City Schley	2-24-11
6. [illegible] SR	804 CEDAR STO MERRILL, WIS	☐ Town ☐ Village ☒ City MERRILL	2-24-11
7. [illegible]	1602 E 1st Merrill	☐ Town ☐ Village ☒ City Merrill	2-24-11
8. John A [illegible]	W4490 POPE RD MERRILL WI	☒ Town ☐ Village ☐ City MERRILL	3/1/11
9. Valerie J Schlueter	W4495 POPE ROAD MERRILL, WI 54452	☒ Town ☐ Village ☐ City MERRILL	3/2/11
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Charles Bolden (name of circulator), certify:

I reside at W4448 Biscayne Bay Merrill, Wi. 54452 (circulator's residence - include number, street, and municipality).

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

3/3/11 (date)

Charles Bolden (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2755

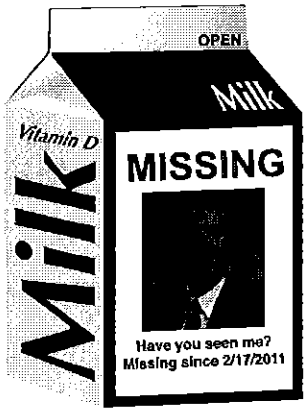
RECALL PETITION

TO: Government Accountability Board, Wisconsin
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin's 12th Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Jim Holperin Wisconsin's 12th State Senate District
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.



STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	926 City Hwy Y Hatley, WIS 54440	☒ Town ☐ Village ☐ City Reid	4/3/11
2. [illegible]	2228 Edison St Antigo WI 54409	☐ Town ☐ Village ☒ City Antigo	4/3/11
3. [illegible]	N3246 WESTERN ANTIGO, WI	☒ Town ☐ Village ☐ City ACKLEY	4/3/11
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, JAMES R BUCKLEY, certify:
(name of circulator)

I reside at 615 4TH AVE ANTIGO, WI. 54409.
(circulator's residence - include number, street, and municipality)

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

4-3-11
(date)

James R Buckley
(signature of circulator)

Please mail this form to: Recall Jim
P.O. Box 961 • Eagle River, WI 54521
www.recalljim.com • admin@recalljim.com

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Lynne Zickert	10464 Leisure Dr. Hazelhurst, WI 54531	☒ Town ☐ Village ☐ City Hazelhurst	3/25/11
2. PAUL SINGH	9958 RIDGEWOOD DR MINOCQUA WI 54548	☒ Town ☐ Village ☐ City MINOCQUA	3-25-11.
3. Geraldine Bowman	7164 Asn Rd Lake Tomahawk 54539	☒ Town ☐ Village ☐ City Lake Tomahawk	3-25-11
4. Meena Arora	9958 Ridgewood Dr. Minocqua WI 54548	☒ Town ☐ Village ☐ City Minocqua	3-25-11
5. Howard M Derth	8189 Rainbow Rd. Lake Tomahawk 54539	☐ Town ☐ Village ☐ City Lake Tomahawk	3-25-11
6. Peggy Nikolai	11917 Thoma Dr. Presque Isle WI 54557	☒ Town ☐ Village ☐ City Presque Isle	3-25-11
7. Barbara Roper	8706 TAPPA WIN DR LAKE TOMAHAWK WI 54539	☒ Town ☐ Village ☐ City LAKE TOMAHAWK	3-25-11
8. Erin Sirt	6181 HARMONY HILL DR. Rhinelander WI 54501	☐ Town ☐ Village ☒ City RHINELANDER	3-25-11
9. [illegible]	10977 HWY 70 East Arbor Vitae WI 54568	☒ Town ☐ Village ☐ City Arbor Vitae	3-25-11
10. [illegible] Arbor Vitae	1849 FAWN CT Arbor Vitae WI 54568	☐ Town ☐ Village ☐ City Woodruff	3-25-11

Certification of Circulator

I, Duane Schumacher (name of circulator), certify:

I reside 13528 290 Ave, Detroit Lakes, MN 56501 (circulator's residence - include number, street, and municipality).

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

3-28-11 (date)

Duane Schumacher (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	509 Mill St White Lake WI 54491	☒ Town ☐ Village ☐ City WhiteLake	4/1/11
2. [illegible]	N880 Christie Rd Antigo WI 54409	☒ Town ☐ Village ☐ City Rolling	4/1/11
3. Mary Pinke	N4280 Schiebke Coleason WI 54435	☐ Town ☐ Village ☐ City Shely	4-1-11
4. Sam Grace	208 Mary St. Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	4-1-11
5. Mitch Swiona	1309 Clermont St. Antigo W.I. 54409	☒ Town ☐ Village ☐ City Antigo	4-1-11
6. Melissa Olson	726 2nd Ave Antigo WI 54409	☐ Town ☐ Village ☒ City Antigo	4-1-11
7. Joe Zeronek	701 Deresch St. Antigo 54409 WI	☐ Town ☐ Village ☒ City Antigo	4-1-11
8. Maria Maddio	N2955 E 6st Rd White Lake, WI	☐ Town ☒ Village ☐ City Wolf River	4-1-11
9. Donna Stahler	W10429 City Rd T Summit Lake 54485	☒ Town ☐ Village ☐ City Summit Lake	4-1-11
10. Lisa Ullman	W9581 Hwy F Antigo	☐ Town ☐ Village ☐ City Antigo	4-1-11

Certification of Circulator

I, Duane Schumacher, certify:
(name of circulator)

I reside 13528 290 Ave, Detroit Lakes, MN 56501.
(circulator's residence - include number, street, and municipality)

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

4-4-11
(date)

Duane Schumacher
(signature of circulator)

GAB-170 (Rev 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2758

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	8423 N. VIEW DR. CRANDON, WI 54520	☒ Town ☐ Village ☐ City LINCOLN	4-1-11
2.	Crandon WI 54520. 306 N. Boulevard Ave; Apt 7	☐ Town ☐ Village ☒ City Crandon	4-1-11
3.	306 N Boulevard ave Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4-1-11
4.	400 WEST ~~GRANT~~ GRANT APT 1 Crandon 54520	☒ Town ☐ Village ☒ City Crandon	4-1-11
5.	7650 Old Hwy 8 Cavour WI 54511	☐ Town ☒ Village ☐ City Caswell	4-1-11
6.	307 N. Metonga Ave #2 Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4-1-11
7.	307 N. Metonga Ln Crandon, WI 54520	~~☐ Town~~ ☐ Village ☒ City Crandon	4-1-11
8.	307 N Metonga Ave #4 Crandon, WI. 54520	~~☐ Town~~ ☐ Village ~~☒ City~~ Crandon	4-1-11
9.	5909 Wolf River Dam Ln Crandon WI 54520	☒ Town ☐ Village ☐ City Crandon	4-1-11
10.	108 GLEN ST APT 2 CRANDON, WI 54520	☒ Town ☐ Village ☐ City CRANDON	4-1-11

Certification of Circulator

I, Duane Schumacher, certify:
(name of circulator)

I reside 13528 290 Ave; Detroit Lakes, MN 56501
(circulator's residence - include number, street, and municipality)

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

4-4-11
(date)

Duane Schumacher
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Maureen Martin	710 W. Pioneer St. Crandon WI 54520	☐ Town ☐ Village ☒ City Crandon	4/1/11
2. Sarah Adler	7030 State Hwy 32 Argonne WI 54511	☒ Town ☐ Village ☐ City Lincoln	4/1/11
3. Ron DeLeeuw Sr	507 S Lake Ave Crandon WI 54520	☒ Town ☐ Village ☐ City Crandon	4-1-11
4. Shawnaway T. Malone	116th W. Glen St. Apt #3 Crandon, WI 54520	☒ Town ☐ Village ☐ City Crandon	4-1-11
5. STEVE LARSON	7981 Pine St. Argonne WI 54511	☒ Town ☐ Village ☐ City Argonne	4-1-11
6. Stan Fishler	4407 Airport Rd. Crandon, WI	☒ Town ☐ Village ☐ City 54520 NASHVILLE	4-1-11
7. Brian Geiser	7979 Main St. Argonne WI 54511	☒ Town ☐ Village ☐ City Argonne	4-1-11
8. Jerry Lewis	4563 Lily Bass Rd Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4-1-11
9. Elaine Petrowski	1061 Valley Lane Armstrong Creek 54103	☒ Town ☐ Village ☐ City ARMSTRONG CREEK	4-1-11
10. Steph Steger	4565 Smith St. Wabeno 54566	☒ Town ☐ Village ☐ City Wabeno	4-1-11

Certification of Circulator

I, Duane Schumacher, certify:
(name of circulator)

I reside 13528 290 Ave; Detroit Lakes, MN 56501.
(circulator's residence - include number, street, and municipality)

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

4-4-11
(date)

Duane Schumacher
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2760

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Marvin Shelley	4909 Lone Lane Laona WI 54541	☑ Town ☐ Village ☐ City Laona	4-1-11
2. Martin Kadubek	7812 KADUBEK LANE Laona 54541	☑ Town ☐ Village ☐ City ARMSTRONG CREEK	4-1-11
3. Mary LeFon	Laona WI 54541 5413 Beech St	☑ Town ☐ Village ☐ City Laona	4.1.11
4. Terry Montgomery	4746 CHERRY ST Laona WI 54541	☑ Town ☐ Village ☐ City Laona	4-1-11
5. Jean Tiede	1231 Range Ln Rd Wabeno WI 54566	☑ Town ☐ Village ☐ City Freedom	4/1/11
6. Cheryl Bauer	~~Blackwell~~ - Laona Hwy 32 #3896	☑ Town ☐ Village ☐ City Blackwell 54541	4/1/11
7. Mich[illegible]	5220 Spruce St #2 Laona WI 54541	☑ Town ☐ Village ☐ City Laona	4/1/11
8. Donald Schroeder	2645 OAKLANE DR RHINELANDER WI	☑ Town ☐ Village ☐ City WOODBURO 54501	4-1-11
9. Mary Terry	5217 Linden St Laona WI 54541	☑ Town ☐ Village ☐ City Laona	4/1/11
10. Jim Retzlaff	LAONA WI 54541 5172 Hilderbrand	☑ Town ☐ Village ☐ City LAONA	4/1/11

Certification of Circulator

I, Duane Schumacher, certify:
(name of circulator)

I reside 13528 290 Ave, Detroit Lakes, MN 56501.
(circulator's residence - include number, street, and municipality)

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

4-4-11
(date)

Duane Schumacher
(signature of circulator)

Page No. 2761

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	~~801~~ 108 W Glen #2 Crandon	☐ Town ☐ Village ☒ City Crandon	4/1/11
2. [illegible]	5397 Beech St Laona WI 54541	☒ Town ☐ Village ☐ City LAONA	4/1/11
3. Amy Matuszewski	4828 Cypress St Laona WI 54541	☒ Town ☐ Village ☐ City Laona	4-1-11
4. [illegible]	108 W Glen #5 Crandon WI 54520	☐ Town ☐ Village ☒ City Crandon	4-1-11
5. [illegible]	107 S. Central Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4-1-11
6. [illegible]	607 N. Hazeldell Ave Crandon WI 54520	☐ Town ☐ Village ☒ City Crandon	4-1-11
7. Lori Lippen	107 S. Central Crandon WI 54520	☐ Town ☐ Village ☒ City Crandon	4-1-11
8. [illegible]	711 S Park Ave Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4/1/11
9. Amy Collins	8124 N. Lane Argonne, WI 54511	☒ Town ☐ Village ☐ City Argonne	4/1/11
10. Dennis Schuenemann	8822 Crandon Ave, Argonne, WI 54511	☒ Town ☐ Village ☐ City Argonne	4/1/11

Certification of Circulator

I, Duane Schumacher, certify:
(name of circulator)

I reside 13528 290 Ave, Detroit Lakes, MN 56501.
(circulator's residence - include number, street, and municipality)

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

4-4-11
(date)

Duane Schumacher
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§ 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Holly Hawley	6612 Buck Run Waberno WI 54520	☐ Town ☒ Village ☐ City Freedom	4/1/11
2. Kathryn Matter	700 S. Park Ave Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4/1/11
3. Diana Michlic	5711 Karl LN Laona, WI 54541	☒ Town ☐ Village ☐ City Laona	4/1/11
4. Amanda Swanson	3149 Indain Rowe Hill Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4/1/11
5. Dave Caphell	11638 CTY. RD B CRANDON, WI 54520	☒ Town ☐ Village ☐ City NASHVILLE	4/1/11
6. Carl Capbell	11638 CTY RD. B Crandon, WI 54520	☒ Town ☐ Village ☐ City Nashville	4/1/11
7. Mary French	122 E Randall Ave Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4/1/11
8. Martin Lynch	116 W. Glen St. Apt 3 Crandon, WI 54520	☐ Town ☐ Village ☒ City CRANDON	4/1/11
9. [illegible]	305 E. Pioneer St. Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon	4/1/11
10. Britney Weber	600 E. Jefferson St Crandon WI 54520	☐ Town ☐ Village ☐ City Crandon	4/1/11

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4-4-11
(date)

Duane Schumacher
(signature of circulator)

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(official with whom nomination papers or declaration of candidacy for the office is filed)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	5916 Hwy 8 Laona, WI 54541	☒ Town ☐ Village ☐ City Laona	4/1/11
2. [illegible]	303 E Roosevelt St Crandon WI 54520	☐ Town ☐ Village ☒ City Crandon	4-1-11
3. [illegible]	Laona WI 54541 5229 Linden St	☒ Town ☐ Village ☐ City Laona	4-1-11
4. Danielle Beck	Laona WI 54541 5356 A Street	☒ Town ☐ Village ☐ City Laona	4-1-11
5. Austin Gardner	4606 Smith St. Wabeno, WI 54566	☒ Town ☐ Village ☐ City Wabeno	4-1-11
6. [illegible]	Laona, WI 54541 4606 → Roberts Lake Rd.	☒ Town ☐ Village ☐ City Laona	4-1-11
7. Lisa Krauel	4746 Cherry St Laona WI 54541	☒ Town ☒ Village ☐ City LAONA	4-1-11
8. Charlie Matuszewski	4828 Cypress St Laona WI 54541	☐ Town ☒ Village ☐ City Laona	4-1-11
9. Amanda Reeter	424 2nd Ave Antigo WI 54409	☐ Town ☐ Village ☒ City Antigo	4-11-11
10. [illegible]	640 Eggerger St White Lake WI	☒ Town ☐ Village ☐ City White Lake	4-1-2011

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(date)

Duane Schumacher
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Craig Weller	445 Lennox St. Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	04/03/11
2. Jodi Robinson	727 S Keenan St Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4-3-11
3. [illegible]	4269 Lily Bass Rd Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4-3-11
4. [illegible]	125 W. Hill Dr. 107 Rhinelander 54501	☐ Town ☐ Village ☒ City Rhinelander	4-3-11
5. [illegible]	2939 Oneida Lake Rd Harshaw WI 54529	☒ Town ☐ Village ☐ City Woodboro	4-3-11
6. [illegible]	619 MOEN St, RHINELANDER	☐ Town ☐ Village ☒ City 54501 RHINE	4-3-11
7. Arie Fuch	401 Hemlock St Rhinelander WI 54501	☐ Town ☐ Village ☒ City 54501 Rhinelander	4-3/11
8. [illegible]	3655 Sunset Dr. Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Crescent	4-3-11
9. [illegible]	4197 Cty W #2 Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4-3-11
10. Loren Alloway	5493 Wejbgesnok Ct. Crandon WI 54520	☒ Town ☐ Village ☐ City Forest, Crandon	4-3-11

Certification of Circulator

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4-4-11
(date)

(signature of circulator)

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1. [illegible]	6102 Lassig Rd Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4/3/2011
2. Stacy Bradoff	W11268 Enterprise LK Rd Elcho WI 54428	☒ Town ☐ Village ☐ City Elcho	4/3/11
3. [illegible]	7606 US Hwy 8W Rhinelander WI 54501	☒ Town ☐ Village ☐ City Crescent ~~[illegible]~~	4/3/11
4. Robin Gaskow	522 Vaughn St Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4/3/11
5. Sarah Tschannen	714 A S. Keenan Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4/3/11
6. Eric Gaul	517 Maple ST Rhinelander, WI	☐ Town ☐ Village ☒ City Rhinelander	4/3/11
7. Michele Gale	538 Wisconsin Ave Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4/3/11
8. Michael DePew	5840 Pine View Dr Rhinelander WI 54501	☒ Town ☐ Village ☐ City Newbold	4/3/11
9. Jacob Jensen	527 Shepard St Rhinelander	☒ Town ☐ Village ☐ City Rhinelander	4/3/11
10. Troy Foote	~~1033 [illegible]~~ 54501 Rhinelander Mason St.	☒ Town ☐ Village ☐ City Rhinelander	4-3-11

Certification of Circulator

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(name of circulator)

I reside 13528 290 Ave; Detroit Lakes, MN 56501.
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4-4-11
(date)

Duane Schumacher
(signature of circulator)

RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Brent Nyberg	725 W Leuther Tomahawk WI	☐ Town ☐ Village ☒ City Tomahawk	2/26-11
2. Nicki Myre	2185 White Rd Tomahawk, WI	☒ Town ☐ Village ☐ City Nokomis	2/26-11
3. Tim Nowak	105 Van Rensselaer Merrill, WI	☐ Town ☐ Village ☒ City Merrill	2/26/11
4. Bill Morgan	205 N. Prospect ST MERRILL WI	☐ Town ☐ Village ☐ City MERRILL	2/26/11
5. Beatrice A Zeise	5388 Bertland Rd Harshaw, WI	☒ Town ☐ Village ☐ City 4C Tomahawk ~~Harshaw~~	2-27-11
6. James L Zeise	5388 Bertland Rd HARSHAW, WI	☒ Town ☐ Village ☐ City Lake Tomahawk	2-27-11
7. Paul E Fuhrman	9858 CDR FALLS RD HAZELHURST	☒ Town ☐ Village ☐ City HAZELHURST	2/27/11
8. Lillian Fuhrman	9858 CDR FALLS Rd. Hazelhurst	☒ Town ☐ Village ☐ City HAZELHURST	2/27/11
9. Janet Scheeler	609 Arbutus Rhinelander WI	☐ Town ☐ Village ☒ City RHINELANDER	2/27/11
10. Jean L Bard	609 ARBUTUS RHINELANDER WI	☐ Town ☐ Village ☒ City RHINELANDER	2-27-11

Certification of Circulator

I, Iva J. Fernholz, certify:
(name of circulator)

I reside at 3570 Klimek Dr Tomahawk Wi 54487 — Little Rice.
(circulator's residence - include number, street, and municipality)

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

03-04-11
(date)

Iva J Fernholz
(signature of circulator)

RECALL PETITION

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(official with whom nomination papers or declaration of candidacy for the office is filed)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Bart Wick	7413 Birch Tree Dr Eagle River, Wi 54521	☑ Town ☐ Village ☐ City Sugar Camp	2-24-11
2. GLENN SPRESS	3377 OLD 26 RD CONOVER WI 54519	☒ Town ☐ Village ☐ City CONOVER	2/24/11
3. MAY HUMBRAUGH	5539 HWY D EAGLE RIVER WI 54521	☐ Town ☐ Village ☒ City EAGLE RIVER	2-24-11
4. ANDREW BOERS	7749 Beloff Ct 3 Lakes, WI 54562	☒ Town ☐ Village ☐ City THREE LAKES	2/24/11
5. Brian Stefonik Brian Stefonik	7995 Hwy. D Eagle River, WI 54521	☒ Town ☐ Village ☐ City Sugar Camp	2/24/11
6. Joseph H. Shorn	4345 Camp Four RD RHINELANDER WI 54501	☒ Town ☐ Village ☐ City SUGAR CAMP	2/25/11
7. Mary Pitlik	4949 Co Rd D Eagle River WI 54521	☒ Town ☐ Village ☐ City Sugar Camp	2-28-11
8. William W. Anderson	4821 SAND BEACH DR. EAGLE RIVER, WI 54521	☒ Town ☐ Village ☐ City SUGAR CAMP	2-28-11
9. William G. Anderson	4724 Grand View Dr EAGLE River WI, 54521	☒ Town ☐ Village ☐ City Sugar Camp	3-1-11
10. Lavergne J. Anderson	4724 Grand View Dr. Eagle River, Wisc.	☒ Town ☐ Village ☐ City Sugar Camp	3-1-11

Certification of Circulator

I, GEORGE LUMVEY LINCOLN, certify:
(name of circulator)

I reside at 8304 EVERGREEN DR. EAGLE RIVER, WI 54521 TWN SUGAR CAMP.
(circulator's residence - include number, street, and municipality)

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

3/10/11 (date)

George Lumvey (signature of circulator)

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Page No. 2768

Tolowski

RECALL PETITION

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1. [illegible]	4555 Shepard Lake Rd Rhi	☐ Town ☐ Village ☒ City Rhinelander	3/30/11
2. Tammy Olakas	~~3987~~ Shepard Lake Rd 3987	☐ Town ☐ Village ☒ City Rhinelander	3/30/11
3. Melinda Brown	3987 Shepard Lake Rd.	☐ Town ☐ Village ☒ City Rhinelander	3/30/11
4. Jenny Olson	4410 Ranger Rd	☐ Town ☐ Village ☒ City Eagle River	3/30/11
5. [illegible]	4849 Apperson	☐ Town ☐ Village ☒ City Rhinelander	3/30/11
6. Jason Meckel	6363 Hwy 17	☒ Town ☐ Village ☐ City Sugar Camp	3/30/11
7. Jessica Meckel	6363 Hwy 17	☒ Town ☐ Village ☐ City Sugar Camp	3/30/11
8. Jeremy J. Greene	6217 W. Phillips St.	☐ Town ☐ Village ☒ City Rhinelander	3/30/11
9. Jonathan Reynolds	N11278 Riordan St. PO Box 104 Elcho, WI	☒ Town ☒ Village ☐ City Elcho	3-30-11
10. Sarah Slack	828 Arbutus St Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	3-30-11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922.
(circulator's residence - include number, street, and municipality)

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

3/30/11
(date)

Sherri E. Ferrell
(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Bob Turner	4622 Hwy B	☒ Town ☐ Village ☐ City LAND O' LAKES	3/30/11
2. Sue [illegible]	510 East Pine St	☒ Town ☐ Village ☐ City Eagle River	3/31/11
3. Amy Ellery	W2173 Hill Rd	☐ Town ☐ Village ☒ City Antigo	3/31/11
4. [illegible]	W2173 Hill Rd	☐ Town ☐ Village ☒ City Antigo	3/31/11
5. Marilyn Sarelton	6065 St. Hwy 52 Wabeno	☐ Town ☐ Village ☒ City Wabeno	3/31/11
6. Judith Allen	9320 ~~Rohr Ln.~~ ROHR LN ~~Cra~~	☐ Town ☐ Village ☒ City Crandon	3/31/11
7. John W. Kent	434 E. PARK AVE	☐ Town ☐ Village ☒ City TOMAHAWK	3/31/11
8. Becky Pom	N10257 Baymill Rd Tomahawk WI	☒ Town ☐ Village ☐ City Bradley	3/31/11
9. Jan E Motz	6180 Hwy H 7	☒ Town ☐ Village ☐ City LAKE TOMAHAWK WI	3/31/11
10. Ashley Krum	1255 Bloom Rd Eagle River, WI 54521	☐ Town ☐ Village ☒ City Eagle River	3/31/11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922.
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3/31/11
(date)

Sherri E. Ferrell
(signature of circulator)

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1. Steve Lawrence	3104 Spring Dr	☐ Town ☐ Village ☒ City RHINELANDER	3-31-11
2. A.M. Kammer Jr	1490 Silver Lake Rd CA	☐ Town ☐ Village ☒ City EAGLE RIVER	3/31/11
3. Sandra Kilkenny	15655 Hwy 70 West Ldf	☐ Town ☒ Village ☐ City Lac du Flambeau	3/31/11
4. Barbara Borbonich	4689 Beach Ln Wabeno WI	☒ Town ☐ Village ☐ City WABENO	3/31/11
5. Maria Chaulkin	6634 Pelican	☐ Town ☐ Village ☒ City Rhinelander	3-31-11
6. Mary Cox	4713 Barbara Pelican	☐ Town ☐ Village ☐ City PELICAN	3-31-11
7. William Gibson	1210 Woodland Dr	☐ Town ☐ Village ☒ City Rhinelander	3-31-11
8. Chastity Garcia	10681-A Hwy 17 N.	☐ Town ☐ Village ☒ City Rhinelander	3-31-11
9. Holly Pitzen	215B Albert St	☐ Town ☐ Village ☒ City Rhlder	3-31-11
10. Claude Mackey	2651-S. River Rd	☐ Town ☐ Village ☒ City RHINELANDER	3-31-11

Certification of Circulator

I, SHERRI FERRELL (name of circulator), certify:

I reside 224 BERKSHIRE DR COCOA FL 32922 (circulator's residence - include number, street, and municipality).

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

3/31/11 (date)

Sherri E. Ferrell (signature of circulator)

GAB-170 (Rev 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jean M. Opper	N9057 US Hwy 45	☑ Town ☐ Village ☐ City Birnamwood	4/8/11
2. Glenn Opper	N9057 US Hwy 45	☑ Town ☐ Village ☐ City Birnamwood	4/8/11
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, Glenn Opper, certify:
(name of circulator)

I reside N9057 US Hwy 45 Birnamwood.
(circulator's residence - include number, street, and municipality)

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

4/8/11 (date)

Glenn Opper (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 3772

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	W4658 Prairie Crest Ln	☐ Town ☐ Village ☐ City Merrill	3-18-11
2. Steve P. Willis	1400 E. 10th St	☐ Town ☐ Village ☒ City Merrill	3/18/11
3. Dan [illegible]	906 W 7TH	☐ Town ☐ Village ☒ City MERRILL	3-18-11
4. Julie Osmunson	W3184 Stevenson Rd. Irma	☐ Town ☐ Village ☐ City Irma	3-18-11
5. Richard Osmunson	W-3184 STEVENSON RD IRMA	☒ Town ☐ Village ☐ City IRMA	3-18-11
6. Ann Lee	N8523 Cty Hy 13 Gleason / WI	☒ Town ☐ Village ☐ City Gleason	3-18-11
7. [illegible]	N5315 Bradley St. Gleason WI	☒ Town ☐ Village ☐ City Gleason	3-18-11
8. Jackie Peterson	107 N Genesee St	☐ Town ☐ Village ☒ City Merrill	3-18-11
9. Carrie Fowler	1600 E 2nd St	☐ Town ☐ Village ☒ City Merrill	3-18-11
10. Dulcine Hedstrom	N4775 City Line C	☒ Town ☐ Village ☐ City Gleason	3-18-11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922.
(circulator's residence - include number, street, and municipality)

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

3/18/11
(date)

Sherri E. Ferrell
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2773

(10)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	N4442 Hwy K	☒ Town ☐ Village ☐ City Merrill	3/18-11
2. [illegible]	N1137 Hwy 64	☒ Town ☐ Village ☐ City Pine River	3/18/11
3. [illegible]	201 N. Mill St	☒ Town ☐ Village ☐ City Merrill	3-18-11
4. Ann Pinnow	N975 Hwy N #4-7	☒ Town ☐ Village ☐ City Pine River	3-18-11
5. Joanne Scarpelli	N4665 Old Hwy N	☒ Town ☐ Village ☐ City Pine River	3-18-11
6. Kyle H. Wolff	2301 W JACKSON ST. #28 MERRILL WI.	☐ Town ☐ Village ☒ City MERRILL	3-18-11
7. Jennie Gridap	504 N Prospect St. Merrill	☐ Town ☐ Village ☒ City Merrill	3-18-11
8. Katherine Gisvee	N2066 High Ridge Rd Merrill, WI	☒ Town ☐ Village ☐ City Pine River	3-18-11
9. Roxann Schadrigen	W6542 Hwy F Tomahawk WI	☐ Town ☐ Village ☒ City Tomahawk	3-18-11
10. [illegible]	2009 E. Main St. Merrill, WI. 54452	☒ Town ☐ Village ☐ City Merrill	3/18/11

Certification of Circulator

I, SHERRI FERRELL (name of circulator), certify:

I reside 224 BERKSHIRE DR COCOA FL 32922
(circulator's residence - include number, street, and municipality)

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

3/18/11
(date)

Sherri E. Ferrell
(signature of circulator)

Page No. 2774

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

(1D)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. John [illegible]	W6667 EGGERT DR TOMAHAWK, WI 54487	☐ Town ☐ Village ☐ City Town of Rock Maple	3-18-2011
2. Rob Mode	206 Hendricks St Merrill, WI	☑ Town ☐ Village ☐ City Merrill	3-18-11
3. Susan Lloyd	800 Cottage St. Merrill, WI	☐ Town ☐ Village ☑ City Merrill	3-18-11
4. Roy Albright	W2456 W Prairie Drive	☐ Town ☑ Village ☐ City Merrill	3-18-11
5. Darlene Wimmer	W5380 Hwy FF	☑ Town ☐ Village ☑ City Scott ~~Merrill~~	3-18-11
6. Arlene Krueger	1500 West 1 St	☑ Town ☐ Village ☑ City merrill	3-18-11
7. Sue Ann Hanson	1505 W 1st St Merrill	☐ Town ☐ Village ☑ City Merrill	3-18-11
8. Mary A Rieck	Conty Road K	☐ Town ☐ Village ☑ City MERRILL	3-18-11
9. Michelle Park	300 East St Merrill, WI	☐ Town ☐ Village ☑ City Merrill	3-18-11
10. John DuPont	N2816 OT21	☐ Town ☐ Village ☑ City MERRILL	3-18-11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922.
(circulator's residence - include number, street, and municipality)

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

3/18/11
(date)

Sherri E. Ferrell
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2775

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	1505 W. 1st St Merrill WI	☐ Town ☐ Village ☒ City Merrill	3/18/11
2. Joyce K. Rind	N2398 County Rd. K Merrill	☒ Town ☐ Village ☐ City Merrill	3-18-11
3. Tom [illegible]	300 East S St Merrill	☒ Town ☐ Village ☐ City Merrill	3-18-11
4. ~~[illegible]~~	[illegible]	☐ Town ☐ Village ☐ City [illegible]	[illegible]
5. Florence [illegible]	4873 Winkelman	☐ Town ☒ Village ☐ City Irma	3-18-11
6. Alan Rankin	1009 E Reverside	☐ Town ☐ Village ☒ City Merrill	3-18-11
7. [illegible] Ramth	414 Esker Heights	☐ Town ☐ Village ☒ City Tomahawk	3-18-11
8. Terrance [illegible]	W5477 Park Ave Merrill WI 54452	☒ Town ☐ Village ☐ City Scott	3-18-11
9. Michele Verran	N2780 Tesch Rd 54452	☐ Town ☐ Village ☒ City Merrill	3/18/11
10. [illegible]	W5398 Taylor St	☒ Town ☐ Village ☐ City Merrill	3/18/11

Certification of Circulator

I, SHERRI FERRELL (name of circulator), certify:

I reside 224 BERKSHIRE DR COCOA FL 32922 (circulator's residence - include number, street, and municipality).

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

3/18/11 (date)

Sherri E. Ferrell (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2776

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. John N	W6667 EGGERT DR TOMAHAWK, WI 54487	☐ Town ☐ Village ☐ City Town of Rock Maple	3-18-2011
2. Todd Moore	266 Hendricks St Merrill, WI	☑ Town ☐ Village ☐ City Merrill	3-18-11
3. Susan Lloyd	800 Cottage St. Merrill WI	☐ Town ☐ Village ☑ City Merrill	3-18-11
4. Roy Allegant	W2456 W Prairie Drive	☐ Town ☑ Village ☐ City Merrill	3-18-11
5. Darlene Wimmer	W5380 Hwy FF	☑ Town ☐ Village ☑ City Scott Merrill	3-18-11
6. Allen Krueger	1508 West 1 St	☑ Town ☐ Village ☑ City merrill	3-18-11
7. Sue Ann Hanson	1505 W 1st St Merrill	☐ Town ☐ Village ☑ City Merrill	3-18-11
8. Mary A Rivard	County Road K	☐ Town ☐ Village ☑ City MERRILL	3-18-11
9. Michelle Park	300 East St Merrill, WI	☐ Town ☐ Village ☑ City Merrill	3-18-11
10. John DuPont	N2816OT21	☐ Town ☐ Village ☑ City MERRILL	3-18-11

Certification of Circulator

I, SHERRI FERRELL (name of circulator), certify:

I reside 224 BERKSHIRE DR COCOA FL 32922
(circulator's residence - include number, street, and municipality)

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

3/18/11 (date)

Sherri E. Ferrell (signature of circulator)

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Page No. 2777

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER 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 E Bruno	4179 Hwy 17 Rhinelander, Wi.	☐ Town ☐ Village ☐ City Rhinelander	2/27/2011
2. Ruby Bruno	4179 Hwy 17 N Rhinelander Wis.	☑ Town ☐ Village ☐ City Rhinelander	2/27/2011
3. [illegible]	4600 Shepard Lake Rd Rhinelander Wis	☑ Town ☐ Village ☐ City Rhinelander	2/27/2011
4. [illegible]	4600 Shepard Lake Rd RHLDR	☐ Town ☐ Village ☐ City RHLDR	2/27/11
5. Patti [illegible]	2849 E. Oneida Ln. Rhine WI 54501	☐ Town ☐ Village ☐ City Pelican	3-28-11
6. Steve [illegible]	2849 E ONEIDA LN Rhinelander, WI 54501	☐ Town ☐ Village ☐ City PELICAN	3/28/11
7. Ali BRUSO	5790 Hwy 17 N. Rhinelander, WI 54501	☐ Town ☐ Village ☐ City Sugarcamp	3/28/11
8. Jason Kral	4230 County W Rhinelander, WI 54501	☐ Town ☐ Village ☐ City Pine Lake	3.28.11
9. Deb BRUSO	4137 Birchwood Rhinelander WI	☐ Town ☐ Village ☐ City Pine Lake	3-28-11
10. Richard L Bruno	4137 Birchwood Dr. Rhinelander	☐ Town ☐ Village ☐ City Pine Lake	4-12-11

Certification of Circulator

I, Richard L Bruno (name of circulator), certify:

I reside 4137 Birchwood Drive, Rhinelander TWP Pine Lake
(circulator's residence - include number, street, and municipality)

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

4-12-11
(date)

Richard L. Bruno
(signature of circulator)

Page No. 2778

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RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Brittany Pamonicutt	N6010 Chief Shunien Keshena P.O Box 180 Keshena	☒ Town ☒ Village ☐ City Keshena	3/28/11
2. [illegible]	PO Box 354 Keshena Wis 54135	☐ Town ☒ Village ☐ City Keshena	3/28/11
3. Charlene Olson	W2916 Lake W773E City Rd. M Suring, Wi. 54174	☐ Town ☒ Village ☐ City	3-28-11
4. Wayne Pecore	N695 Brooks Lane Keshena Wis	☐ Town ☒ Village ☐ City Keshena	3-28-11
5. [illegible]	W2248 Joe Summers Rd	☐ Town ☒ Village ☐ City Keshena	3/28/11
6. [illegible]	M681 Hwy 47-55	☐ Town ☒ Village ☐ City Keshena	3/28/11
7. [illegible]	N706 Brooks Lane	☐ Town ☒ Village ☐ City Keshena	03/28/11
8. [illegible]	N5162 Brookes Lane	☐ Town ☒ Village ☐ City Keshena	3/28/11
9. [illegible]	N2026 Anepahtek Neopit WI 54150	☒ Town ☒ Village ☐ City Neopit	3/28/11
10. [illegible]	N2026 Anepahtek Neo	☐ Town ☒ Village ☐ City Neopit	3/28/11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922
(circulator's residence - include number, street, and municipality)

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

3/28/11
(date)

Sherri E Ferrell
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

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(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	N3437 Cottage Ave Neopit	☐ Town ☒ Village ☐ City Neopit	3/28/11
2. [illegible]	PO BOX 824 KESHENA	☐ Town ☒ Village ☐ City Keshena	3/28/11
3. [illegible]	W1076 Twin Oak Rd	☐ Town ☐ Village ☐ City Keshena	3/28/11
4. Bertha Stechhauer	N901 Lyons Rd.	☐ Town ☐ Village ☐ City KESHENA	3/28/11
5. [illegible]	N5238 Co AA Suring	☐ Town ☐ Village ☐ City Suring	3/28/11
6. S. Malay	Hwy 47 Pulaski, WI 7308	☐ Town ☒ Village ☐ City Norwood	3/29/11
7. Mary Cimawood	W7498 Hwy 47 Antigo WI 54409	☒ Town ☐ Village ☐ City Norwood	3/28/11
8. Dennis Waldvogel	N997 Trout Rd Antigo WI 54409	☒ Town ☐ Village ☐ City Norwood	3-28-11
9. [illegible]	N1342 Sugarbush Rd Antigo, WI 54409	☒ Town ☐ Village ☐ City Rolling	3-28-11
10. Kateri Merino	W2241 Medicine Hat Tr. Keshena, WI 54135	☒ Town ☐ Village ☐ City Menominee	3-28-11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922.
(circulator's residence - include number, street, and municipality)

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

3/28/11
(date)

Sherri E. Ferrell
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Russell D Weber	9083 JENNY PL ST GERMAIN WI 54558	☑ Town ☐ Village ☐ City ST GERMAIN	3/30/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, RUSSELL D. WEBER, certify:
(name of circulator)

I reside 9083 JENNY PLACE ST GERMAIN WI 54558.
(circulator's residence - include number, street, and municipality)

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

30 MARCH 2011 — (date)

Russell D Weber — (signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Gerhardt Wychest	N. 1322 Redwing Tr Keshena, Wis	☐ Town ☐ Village ☒ City Keshena	3/28/11
2. Emerin Waupose	N3426 Hwy 47 Neopit WI 54150	☐ Town ☒ Village ☐ City Neopit	3/28/11
3. Crystal Tellez	N4208 St Hwy 55	☐ Town ☒ Village ☐ City Keshena	3/28/11
4. Ellen Pewatonie	N3488 Cottage Ave	☐ Town ☒ Village ☐ City Neopit	3/28/11
5. Randy Chevalier	2820 Lakeview Keshena	☐ Town ☒ Village ☐ City Keshena	3/28/11
6. Charlotte Pigeon	N910 Hwy 55/47 Kt	☐ Town ☒ Village ☐ City Keshena	3/28/11
7. [illegible]	N769 Tom Oak Keshena	☐ Town ☒ Village ☐ City Keshena	3/28/11
8. Ken Lepien	N839 Burnett Ln Keshena	☐ Town ☒ Village ☐ City Keshena	3/28/11
9. Gilbert Boxman	14294 Ridge St	☒ Town ☐ Village ☐ City Mountain	3-28-11
10. Sophia Lyons	N2857 Morrin Ln Keshena	☐ Town ☒ Village ☐ City Keshena	3-28-11

Certification of Circulator

I, SHERRI FERRELL (name of circulator), certify:

I reside 224 BERKSHIRE DR COCOA FL 32922 (circulator's residence - include number, street, and municipality).

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

3/28/11 (date)

Sherri E. Ferrell (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2782

RECALL PETITION

To: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	N618 Chief Shunien RD N618 CHIEF SHUNIEN	☐ Town ☒ Village ☐ City Keshena	3-28-11
2. Kevin Schlieter	W1843 Bent Arrow Rd	☐ Town ☒ Village ☐ City Keshena WI	3-28-11
3. Paul Tomrow	W2200 Keshena Lake Rd	☐ Town ☒ Village ☐ City Keshena WI	3/28/11
4.	3409 Cottage Ave	☐ Town ☒ Village ☐ City Neopit	3/28/11
5. Rebecca Johnson	N613 Chief Shunien	☐ Town ☒ Village ☐ City Keshena	3/28/11
6.	W1634 Council Hill Trail	☐ Town ☒ Village ☐ City Keshena	3/28/11
7. Mary Ruth Moore	N3636 N. 3rd Ave. Neopit WI 54150	☒ Town ☒ Village ☐ City Neopit Keshe	3/28/11
8. Dolores Martin	N3550 Riverview Rd Neopit WI 54150	☒ Town ☒ Village ☐ City Neopit	3-28-11
9. Michael R James SR	N1253 Big Sky Rd Keshena WI 54135	☐ Town ☒ Village ☐ City Keshena	3-28-11
10.	N1173 Old 96 Blvd Keshena	☐ Town ☒ Village ☐ City Keshena	3-28-11

Certification of Circulator

I, SHERRI FERRELL, certify:
(name of circulator)

I reside 224 BERKSHIRE DR COCOA FL 32922.
(circulator's residence - include number, street, and municipality)

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

3/28/11
(date)

Sherri E. Ferrell
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12
(jurisdiction or district of officeholder),

petition for the recall of Senator Jim Holperin from office pursuant
(name of officeholder to be recalled and office)

to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Margaret Bruner	8897 Mid Lake Woodruff WI	☒ Town ☐ Village ☐ City WOODRUFF	3/7/11
2. [illegible]	1578 Cindy Lane St Germain WI 54558	☒ Town ☐ Village ☐ City ST. GERMAINE	3/7/11
3. [illegible]	Minocqua 9845 Wood Lane	☒ Town ☐ Village ☐ City MINOCQUA	3/7/11
4. [illegible]	8574 Pine Aire Drive Lk Tom WI 54539	☒ Town ☐ Village ☐ City LAKE TOMAHAWK	3/7/11
5. [illegible]	8574 Pine Aire LN Woodruff WI 54568	☒ Town ☐ Village ☐ City WOODRUFF	3/7/11
6. Diane Steger	P.O Box 1104 Woodruff WI 54568	☒ Town ☐ Village ☐ City ARBOR VITAE	3/7/11
7. Jodi Stellhammer	8644 Bambi Court Woodruff, WI, 54568	☒ Town ☐ Village ☐ City Woodruff	3/7/11
8. [illegible]	9533 County Club Minocqua	☐ Town ☐ Village ☐ City MINOCQUA	3/7/11
9. Mary Jeanette Bauer	9533 Country Club Rd Minocqua WI 54548-9316	☐ Town ☐ Village ☐ City Minocqua	3-7-11
10. [illegible]	9769 West LK AVE	☐ Town ☐ Village ☐ City MINOCQUA	3/08/11

Certification of Circulator

I, NORMAN "ED" BRUNER (name of circulator), certify:

reside at 8897 MID LAKE ROAD WOODRUFF, WI
(circulator's residence - include 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 istrict represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated pposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under .12.13(3)(a), Wis. Stats.

3-8-11 (date)

Norman Ed Bruner (signature of circulator)

AB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
his form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
08-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2784

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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SIGNATURES OF ELECTORS	STREET & NUMBER 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 R. Kadlec	8133 Kadlec Dr Eagle River, WI 54521	☑ Town Sugar Camp ☐ Village ☑ City Eagle River	2/28/11
2. [illegible]	8133 Kadlec Dr Eagle River, WI 54521	☑ Town Sugar Camp ☐ Village ☑ City Eagle River	2/28/11
3. Melanie Randall	5025 Sundstein Rd Eagle River WI 54521	☑ Town Lincoln ☐ Village ☑ City Eagle River	2/28/11
4. Rick Bozic	1533 Sandstone Circle Eagle River WI 54521	☑ Town Lincoln ☐ Village ☑ City Eagle River	2/28/11
5. Kristy Bozic	1533 Sandstone Circle Eagle River WI 54521	☑ Town Lincoln ☐ Village ☑ City Eagle River	2-28-11
6. James Randall	5025 Sundstein Rd Eagle River WI 54521	☑ Town Lincoln ☐ Village ☑ City Eagle River	2-28-11
7. [illegible]	105 Hwy 17 Eagle River, WI 54521	☑ Town Lincoln ☐ Village ☑ City Eagle River	2/28/11
8. [illegible]	1095 Chickaree Lake Eagle River, WI 54521	☑ Town Cloverland ☐ Village ☑ City Eagle River	2/28/11
9. Susan Shufelt	5041 Hideaway Dr Eagle River WI 54221	☑ Town Sugar Camp ☐ Village ☐ City Cloverland	2/28/11
10. Rose Fleck	Eagle River WI 54521 5990 RIVER RD.	☐ Town ☐ Village ☐ City CLOVERLAND	2-28-11

Certification of Circulator

I, Dawn M. Bowman (name of circulator), certify:

I reside at 7953 Prairie Rd Eagle River WI 54521 (circulator's residence - include number, street, and municipality).

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

2/28/11 (date)

Dawn Bowman (signature of circulator)

Page No. 2785

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Bruce W Staedler	W8743 TOWNLINE Rd CRIVITZ, WIS	☑ Town ☐ Village ☐ City	3/29/11
2. Judith A. Staedler	W8743 Townline Rd. Crivitz, Wi	☑ Town ☐ Village ☐ City	3/29/11
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, BRUCE W STAEDLER, certify:
(name of circulator)

I reside W8743 TOWNLINE Rd CRIVITZ.
(circulator's residence - include number, street, and municipality)

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

3/29/11
(date)

Bruce W Staedler
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

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STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Denis E. Thimm	6549 CARDINAL LANE LAKE TOMAHAWK WI 54539	☒ Town ☐ Village ☐ City LAKE TOMAHAWK	3/29/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, DENNIS E. THIMM, certify:
(name of circulator)

I reside 6549 CARDINAL LANE LAKE TOMAHAWK WI 54539.
(circulator's residence - include number, street, and municipality)

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

3-31-11 (date)

Denis E. Thimm (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
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Page No. 82787

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Susan Matuszewski	1209 Delighlin St	☐ Town ☐ Village ☑ City Antigo	4-10-11
2. [illegible]	W9528 North Ave	☑ Town ☐ Village ☐ City Antigo	4-10-11
3. Cristie Moser	711 Lincoln St	☑ Town ☐ Village ☐ City Antigo	4-10-11
4. Jessica Barnett	711 Lincoln St	☑ Town ☐ Village ☐ City Antigo	4-10-11
5. Jean Ross	1227 N Superior St	☐ Town ☐ Village ☑ City Antigo	4-10-11
6. Becky Ross	1227 N Superior St	☐ Town ☐ Village ☑ City Antigo	4-10-11
7. Bob Ostrop	627 North Ave Apt 1	☐ Town ☐ Village ☑ City Antigo	4-10-11
8. Stephanie Ostrop	627 North Ave Apt 6	☐ Town ☐ Village ☑ City Antigo	4-10-11
9. [illegible]	627 North Ave #15 ~~Apt~~	☐ Town ☐ Village ☑ City Antigo	4-10-11
10. Randy Dellert	820 2nd Ave Apt. 5	☐ Town ☐ Village ☑ City Antigo	4-10-11

Certification of Circulator

I, Richard A Madrid, certify:
(name of circulator)

I reside 1065 S Ames St Lakewood Colorado 80226
(circulator's residence - include number, street, and municipality)

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

4-12-11
(date)

Richard A Madrid
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Rhonda Husnick	1509 N. Superior St. Antigo, WI 54409	☐ Town ☐ Village ☒ City Antigo	4/10/11
2. Cathy Prins	134 S. Park St. Antigo, WI 54409	☐ Town ☐ Village ☒ City Antigo	4-10-11
3. Tim Prins	134 S Park St Antigo WI 54409	☐ Town ☐ Village ☒ City ANTIGO	4/10/11
4. Susan Brooks	716 Badger Av, Antigo, WI 54409	☒ Town ☐ Village ☐ City Antigo	4/10/11
5. Karen Anderson	727 Badger Ave Antigo	☒ Town ☐ Village ☐ City Antigo	4-10-11
6. Matthew Amundson	Antigo 1121 Clermont	☒ Town ☐ Village ☐ City Antigo	4-10-11
7. Charlotte Bluhm	Antigo 1121 Clermont	☒ Town ☐ Village ☐ City Antigo	4/10/11
8. [illegible]	913 McKinnie	☒ Town ☐ Village ☐ City Antigo	4/10/11
9. Kathleen Morley	1220 Edison St.	☒ Town ☐ Village ☐ City Antigo	4/10/11
10. Sarah Schrabel	1450 Clermont st.	☒ Town ☐ Village ☐ City Antigo	4\10\11

Certification of Circulator

I, Richard A Madill, certify:
(name of circulator)

I reside 1065 S Ames St Lakewood Colorado 80226
(circulator's residence - include number, street, and municipality)

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

4-12-11
(date)

Richard A Madill
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2789

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Larry E Winter	N7796 RASPBERRY ROAD WITTENBERG WI 54499	☒ Town BIRNAMWOOD ☐ Village ☐ City	02/28/11
2. Mary Beversdorf	W18486 Hemlock Rd Wittenberg WI 54499	☒ Town Wittenberg ☐ Village ☐ City	2/28/11
3. [illegible]	W10810 East Hill Rd Elcho WI	☒ Town ☐ Village Elcho WI. ☐ City	3/1/11
4. David R Schmidt	W18211 BASSWOOD LANE WITTENBERG, WI 54499	☒ Town Wittenberg ☐ Village ☐ City	3-2-11
5. Scott W. Lechner	W17627 MAPLE RD WITTENBERG, WI 54499	☒ Town ☐ Village WITTENBERG ☐ City	3-2-11
6. [illegible]	N6196 [illegible] Wittenberg WI. 54499	☒ Town ☐ Village ☐ City Wittenberg	3-5-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, LARRY E WINTER, certify:
(name of circulator)

I reside N7796 RASPBERRY ROAD, TOWN OF BIRNAMWOOD, (WITTENBERG, WI 54499).
(circulator's residence - include number, street, and municipality)

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

03/14/11
(date)

Larry E Winter
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Cynthia A. Guenthner	937½ Clermont Street Antigo	☐ Town ☐ Village ☒ City Antigo	2-24-11
2. Jeanette A Guenthner	937 Clermont Street Antigo	☐ Town ☐ Village ☒ City Antigo	2-24-11
3. Robert J. Guenthner	224 5th Ave Antigo	☐ Town ☐ Village ☒ City Antigo	2-Mar, 2011
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Cynthia A. Guenthner, certify:
(name of circulator)

I reside at 937½ Clermont Street, Antigo, WI.
(circulator's residence - include number, street, and municipality)

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

3-14-2011
(date)

Cynthia A. Guenthner
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12
(jurisdiction or district of officeholder)

petition for the recall of Senator Jim Holperin
(name of officeholder to be recalled and office)
from office pursuant

to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

*(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. **No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.**)*

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Sharon Stachowicz	3420 N. Carpenter Lake Rd Eagle River WI	☒ Town ☐ Village ☐ City Washington	3-2-11
2. Kristi Pasquale	7815 Alva Lake Rd Lake Tomahawk, WI	☒ Town ☐ Village ☐ City Lake Tomahawk	3-2-11
3. [illegible]	7358 Hwy 47 PO Box 646 Woodruff WI 54568	☒ Town ☐ Village ☐ City Woodruff	3-2-11
4. [illegible]	158 Woodland Ln Woodruff WI 54568	☒ Town ☐ Village ☐ City Woodruff	3-2-11
5. [illegible]	158 Woodruff LN Woodruff, WI 54568	☒ Town ☐ Village ☐ City Woodruff	3-2-11
6. [illegible]	9712 Milky Way Minocqua, WI 54548	☐ Town ☐ Village ☐ City Minocqua	3/2/11
7. [illegible]	7815 Alva Lake RD Lake Tomahawk WI 54539	☒ Town ☐ Village ☐ City Lake Tomahawk	3/2/11
8. Michael A. Stachowicz	3420 N Carpenter LK. Rd. Eagle River WI 54521	☒ Town ☐ Village ☐ City Washington	3/10/11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

Sharon Stachowicz, certify:
(name of circulator)

reside at 3420 N. Carpenter Lk Rd Eagle River WI 54521.
(circulator's residence - include number, street, and municipality) WASHINGTON TOWN

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

3/2-11
(date)

[signature]
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Russell L Schea	204 E. Riverside Ave	☐ Town ☐ Village ☒ City Merrill	3/31/11
2. Donna M Schea	204 E. Riverside Ave	☐ Town ☐ Village ☒ City Merrill	3/31/11
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, Russell L. Schea, certify:
(name of circulator)

I reside 204 E Riverside Ave, Merrill, WI 54452.
(circulator's residence - include number, street, and municipality)

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

3/31/11
(date)

Russell L Schea
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jean Lotte	8694 PACKING PLANT RD	☑ Town ☐ Village ☐ City Minocqua	4-5-11
2. Jim Brown	8384 Pagan Dr.	☑ Town ☐ Village ☐ City Minocqua	4/5/11
3. Mary Pat Hallock	9246 Golf View DR Minocqua, WI 54548	☑ Town ☐ Village ☐ City Minocqua	4/5/11
4. Harriet Gordon	7626 Bass Lake Rd.	☑ Town ☐ Village ☐ City Minocqua	4/5/11
5. Roger Jolly	11616 WOODLAND HTS RD HAZELHURST, WI 54531	☑ Town ☐ Village ☐ City MINOCQUA	4/5/11
6. Gisela Usa	8622 HANSEN Rd MINOCQ, WI 54548	☑ Town ☐ Village ☐ City MINOCQUA	4/5/11
7. Kathleen Lenung	10049 Woodcrest Dr. Minocqua, WI 54548	☑ Town ☐ Village ☐ City Minocqua	4/5/11
8. Ann Arnt	6271 ~~Hazelhurst~~ Interlocken	☑ Town ☐ Village ☐ City Hazelhurst	4/5/11
9. Kenneth Stoedler	11080 Interlocken	☑ Town ☐ Village ☐ City Hazelhurst	4-5-11
10. John Thompson	8061 Squirrel Wood	☑ Town ☐ Village ☐ City Minocqua	4/5/11

Certification of Circulator

I, ROBERT V. ARMSTRONG, certify:
(name of circulator)

I reside 2571 So. 59th W. Ave, Tulsa OK 74107
(circulator's residence - include number, street, and municipality)

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

4-6-11
(date)

(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis Stats.
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608-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	7997 Heron Rd Lake Tomahawk Wis	☒ Town ☐ Village ☐ City LAKE TOMAHAWK	4-5-11
2. Ronald Russell	7844 Hixon Rd MINOCQUA WI	☒ Town ☐ Village ☐ City MINOCQUA WI	4-5-11
3. James Jordan	7626 BLUE LAKE RD	☒ Town ☐ Village ☐ City MINOCQUA	4-5-11
4. Lynn Jaigo	318 W Park	☒ Town ☐ Village ☐ City Minocqua	4-5-11
5. Donald Treibenhorn	8487 SQUIRREL LK RD	☒ Town ☐ Village ☐ City MINOCQUA	4-5-11
6. Jon [illegible]	7405 GOLFWAY CT. MINOCQUA, WI 54548	☒ Town ☐ Village ☐ City MINOCQUA	4-5-11
7. Connie Kozy	10338 Blue Lk Rd Minocqua	☒ Town ☐ Village ☐ City minocqua	4-5-11
8. [illegible]	9145 Point Dr	☐ Town ☐ Village ☐ City Minocqua WI	4-5-11
9. Terri Lynn	11886 Franklin Lk Rd	☒ Town ☐ Village ☐ City Minocqua, WI	4-5-11
10. June Burchardt	2507 HANSE DRIVE TOMAHAWK WI. 54487	☒ Town ☒ Village ☐ City Tomahawk WI Nokomis WI.	4-5-11

Certification of Circulator

I, ROBERT V. ARMSTRONG, certify:
(name of circulator)

I reside 2511 So. 59th W. Ave. TULSA OK 74107.
(circulator's residence - include number, street, and municipality)

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

4-6-11
(date)

(signature of circulator)

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 2795

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	1412 ERIC DR ARBOR VITAE, WI 54568	☒ Town ☐ Village ☐ City ARBOR VITAE	3/1/11
2. Carol Webb	10137 BLUE LAKE RD	☒ Town ☐ Village ☐ City MINOCQUA	3/1/11
3.	9160 KATIE CIRCLE MINOCQUA, WI 54548	☒ Town ☐ Village ☐ City MINOCQUA	3-1-11
4. LZ PANZER	12593 EISLE LK LN LAC DU FLAMBEAU WI 54538	☒ Town ☐ Village ☐ City LAC DU FLAMBEAU	3-1-11
5. Jeff Friedlan	8672 Buckskin Tr Minocqua, WI 54548	☒ Town ☐ Village ☐ City Minocqua	3-1-11
6. Jeff McKnight	1191 Blue Island Rd Arbor Vitae, 54568	☒ Town ☐ Village ☐ City Arbor Vitae	3-1-11
7.	L1225 W. HARRIS LK RD WINCHESTER, WI 54557	☒ Town ☐ Village ☐ City WINCHESTER	3-1-11
8. Thomas F. Hoban	1791 E. TIPPECANOE RD. LDF., WI. 54538	☒ Town ☐ Village ☐ City Flambeau	3/2/2011
9. Mary Hoban	1791 E. Tippecanoe Rd. LDF, WI 54538	☒ Town ☐ Village ☐ City Flambeau	3/2/2011
10.	9525 COUNTRY CLUB RD MINOCQUA, WI 54548	☒ Town ☐ Village ☐ City MINOCQUA	3-2-11

Certification of Circulator

I, Ronald D Booth (name of circulator), certify:

I reside at 1785 E Tippecanoe R.D. Lac Du Flambeau Wisc 54538
(circulator's residence - include number, street, and municipality)

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

3-2-11
(date)

Ronald D Booth
(signature of circulator)

RECALL PETITION

TO: The Wisconsin Government Accountability Board.

WE, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S. 9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

Conspiracy to intentionally interfere with the proper functioning of the Wisconsin Senate and gross dereliction of duty.

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City or Village	Date of Signing
1	3266 S. River Road Rhinelander, WI 54501	X Town Village City Crescent	3/2/11
2	7243 Mildred Pkwy Rhinelander WI 54501	X Town Village Newbold City	3/2/11
3	5155 Pine Creek Rd. Rhinelander, WI 54501	X Town Village Pine Lake City	3/2/11
4	4748 SPAFFORD Rhinelander, WI 54501	X Town Village STELLA City	3-2-11
5	Pelican Lk WI 54463 (999 CORD G)	X Town Village Enterprise City	3-2-11
6		Town Village City	
7		Town Village City	
8		Town Village City	
9		Town Village City	
10		Town Village City	

CERTIFICATION OF CIRCULATOR

X I, JANETTE SARKAUKAS, certify that I reside at X

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

X 3-11-11
(date)

X Janette Sarkaukas
(Signature of Circulator)

4748 SPAFFORD Road
Rhinelander, WI
Town of STELLA

Page: 2797

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Chris Wagner	W8755 Cty O Bryant Wi 54418	☑ Town ☐ Village ☐ City Neva	4-9-11
2. [illegible]	128 Milton st Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	4-9-11
3. Beulah Boileau	225 State Hwy 47 Lac du Flambeau	☒ Town ☐ Village Lac du Flambeau ☐ City	4-9-11
4. Angela Young	225 State Hwy 47 Lac du Flambeau, WI	☐ Town ☐ Village Lac du Flambeau ☒ City	4/9/11
5. [illegible]	N370 Hwy D Crandon WI	☐ Town ☒ Village Norrie ☐ City Norrie Norrwood	4-9-11
6. Jana Ginter	E7183 Cty R&C Iola WI 54945	☐ Town ☒ Village Harrison ☐ City	4-9-11
7. Amy [illegible]	108 South Hudson Antigo WI 54409	☐ Town ☐ Village ☒ City Antigo	4-9-11
8. [illegible]	303 2nd Street Mattoon WI 54450	☐ Town ☒ Village Mattoon ☐ City	4-9-11
9. Chris Smith	Elcho WI 54428 County X	☒ Town ☐ Village Elcho ☐ City	4-9-11
10. Emily Tierney	Laona WI Laona WI	☒ Town ☐ Village ☐ City	4-[illegible]-11

Certification of Circulator

I, Richard A Madill III, certify:
(name of circulator)

I reside 1065 S Ames St Lakewood Colorado 80226
(circulator's residence - include number, street, and municipality)

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

4-12-11
(date)

Richard A Madill III
(signature of circulator)

RECALL PETITION

TO: Wisconsin Government Accountability Board
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Wisconsin Senate District 12, petition for the recall of Senator Jim Holperin from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

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.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James F. Sprague	7051 E RAPIDS Rd. Newbold Wis.	☒ Town ☐ Village ☐ City	3/30/11
2. Eileen J Sprague	7051 E. RAPIDS Rd. Newbold, Wis	☒ Town ☐ Village ☐ City	3/30/11
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, JAMES F. Sprague, certify:
(name of circulator)

I reside 7051 E RAPIDS Rd. NEWBOLD.
(circulator's residence - include number, street, and municipality)

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

3/30/11
(date)

James F. Sprague
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James H. Krawczyk	6632 D+L Lake Rd Lake Tomahawk, WI 54539	☒ Town ☐ Village ☐ City	3/28/11
2. Helen M Krawczyk	6632 D+L Lake Rd Lake Tomahawk WI 54539	☒ Town ☐ Village ☐ City	3/28/11
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, JAMES H. KRAWCZYK, certify:
(name of circulator)

I reside 6632 D+L LAKE RD., LAKE TOMAHAWK, WI 54539.
(circulator's residence - include number, street, and municipality)

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

3-28-11
(date)

James H. Krawczyk
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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