

# RECALL PETITION

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

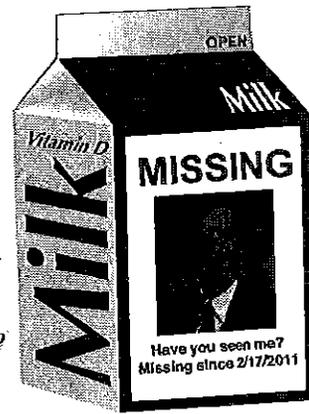
We, the undersigned qualified electors of the Wisconsin's 12<sup>th</sup> Senate District  
(Jurisdiction or district of officeholder)

petition for the recall of Jim Halperin Wisconsin's 12<sup>th</sup> 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village.</small>	DATE OF SIGNING
1. <u>John Day Avery</u>	<u>6565 C.W. Smith</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Three Lakes</u>	<u>03/25-11</u>
2.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

I, TOBIN AVERY, certify:  
(name of circulator)

I reside at 6565 C.W. Smith Rd Three Lakes, 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 district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his 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.

03/25-11  
(date)

John Day Avery  
(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. 2801

# RECALL PETITION

TO: Wisconsin Government Accountability Board

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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.

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1. <i>Stygnia Parnonicki</i>	N 550 Burnett LN PO BOX 1172 Keshena	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City KESHENA	4-7-11
2. <i>Mahreen Reza-Fernandez</i>	N 3706 State Hwy 55	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City KESHENA	4-7-11
3. <i>Ashley A Bear</i>	<del>Keshena WI</del> 419 CHIEF ST KESHENA WI 53044	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City KESHENA	4-7-11
4. <i>Kayla Munn</i>	W 2475 Chief Wis-Keshena Keshena, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Keshena	4-7-11
5. <i>Wayne Peterson</i>	Hwy 47/55 N 856	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Keshena	4-7-11
6. <i>Jameson Penkan</i>	N 3419 WHITT NEOPIT WIS 54156	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City NEOPIT	4-7-11
7. <i>Marisha Peters</i>	W 72036 Chief Josephine St Keshena	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Keshena	4-7-11
8. <i>James Peter</i>	2526 Keshena RD Keshena, WI 53044	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Keshena	4/7/11
9. <i>Julia J Lane</i>	<del>Box 75</del> N 1727 Leafy Grove Keshena WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Keshena	4/7/11
10. <i>Michelle Schutte</i>	PO Box 901	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Keshena	4/7/11

### Certification of Circulator

I, SHERRI FERRELL, 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.

4/7/11  
(date)

*Sherri E. Ferrell*  
(signature of circulator)

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1. <i>Deb Sporkke</i>	<i>5888 Hwy M</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>P.O. Box 275 Bt. WI 51</i>	<i>Boulder Jct.</i>	<i>2/28/11</i>
2. <i>Julia Clancy</i>	<i>PO BOX 248</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>Boulder Jct WI 51</i>	<i>Boulder Jct</i>	<i>2/28/11</i>
3. <i>[Signature]</i>	<i>Box 515</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>Boulder Jct, WI 54512</i>	<i>Presque Isle</i>	<i>2/28/11</i>
4. <i>Thonda Christenson</i>	<i>P.O. Box 754</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>Land O Lakes, WI 54540</i>	<i>Land O Lakes</i>	<i>2/28/11</i>
5. <i>Michael Christenson</i>	<i>P.O. Box 754</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>LAND O LAKES, WI 54540</i>	<i>LAND LAKES</i>	<i>2/28/11</i>
6. <i>Donald E. Wood</i>	<i>12479 LAFAVER RD</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>Manitowish WI 54545</i>	<i>Boulder Jct</i>	<i>2/28/11</i>
7. <i>Jana Juch</i>	<i>285 Squirrel Lake Rd</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>Minocqua WI 54558</i>	<i>Minocqua</i>	<i>3-1-2011</i>
8. <i>[Signature]</i>	<i>9699 STATE HWY 70</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>MINOCQUA, WI 54548</i>	<i>MINOCQUA</i>	<i>3-2-11</i>
9. <i>Tommy Law</i>	<i>P.O. Box 317</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>Hazelhurst WI 54548</i>	<i>Hazelhurst</i>	<i>3/2/11</i>
10. <i>Bernard Wall</i>	<i>14327 WINIFRED LN.</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	<i>Lac Du Flambeau 54538</i>	<i>Lac Du Flambeau</i>	<i>3-2-11</i>

### Certification of Circulator

I, *Rudolph A. Puy Jr*, certify:  
(name of circulator)

I reside at *5349 ISLAND LAKE RD, BOULDER JUNCTION*  
(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.

*3-2-2011*  
(date)

*[Signature]*  
(signature of circulator)

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1. <u>Jessica Schemelhorn</u>	<u>301 Logan St Merrill WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4/18/11</u>
2. <u>Brian Schwartz</u>	<u>813 Grand Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4/18/11</u>
3. <u>Ken Olson</u>	<u>209 HENDRICKS MERRILL</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MERRILL</u>	<u>4-18-11</u>
4. <u>[Signature]</u>	<u>3640 Gopper Lake</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Glossop</u>	<u>4/18/11</u>
5. <u>[Signature]</u>	<u>4247 Smith M</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4-18-11</u>
6. <u>Samir R. Staley</u>	<u>304 N. Genesee St. Merrill</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4-18-11</u>
7. <u>Cytle Oddy</u>	<u>T8981 County Line Rd Merrill</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4-18-2011</u>
8. <u>Kerry O'Connell</u>	<u>119 N. State # 3 Merrill, WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4-18-2011</u>
9. <u>Henry M Bie</u>	<u>100 Stuyvesant Merrill</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4-18-11</u>
10. <u>Barb Bie</u>	<u>101 Stuyvesant Merrill</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>4-18-11</u>

I, Michael Alexander, Certification of Circulator, certify:  
(name of circulator)  
 I reside 56 Murdock St Brighton, MA 02135  
(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] (signature of circulator)

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1. <i>Jan A. Panek</i>	<i>2165 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>
2. <i>Joseph Panek</i>	<i>2165 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>
3. <i>Tom Moore</i>	<i>2264 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>
4. <i>Andy Moore</i>	<i>2256 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>
5. <i>Hilary Moore</i>	<i>2256 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>
6. <i>Bonnie Moore</i>	<i>2264 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>
7. <i>Roy Moore</i>	<i>2266 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3/27/11</i>
8. <i>Patricia Moore</i>	<i>2266 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3/27/11</i>
9. <i>Douglas Edmund</i>	<i>23507 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>
10. <i>Lucille Anderson</i>	<i>2337 River Dr Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-11</i>

### Certification of Circulator

I, *Lucille Anderson*, certify:

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 27, 2011*  
(date)

*Lucille Anderson*  
(signature of circulator)

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1. <i>Valerie J. March</i>	232 Spruce St <del>Rhinelander</del>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Rhinelander	3/31/11
2. <i>C. Wagner</i>	6634 Spider Lk Rd. Newbold	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Rhinelander	3-31-2011
3. <i>Michelle</i>	203 E Kemp St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3-31-2011
4. <i>Haley Benish</i>	901 Deresch St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Antigo	3-31-2011
5. <i>Mandi</i>	N9156 Chip N Dale Dr Pickrege WI. 54465	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Ainsworth	4-1-2011
6. <i>Milly Parise</i>	Elcho WI W10699 Cole St	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elcho	4-1-11
7. <i>J.P. Lind</i>	2954 State Hwy 55	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Crandon	4-1-11
8. <i>Brianne</i>	110551 Hwy 55	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Plover	4-1-11
9. <i>Ken Swant</i>	N5244 39th RD Plover WI 54461	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Plover	7-1-11
10. <i>Stacy Stearns</i>	111 Mayfair St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Antigo	04/01/11

I, Jaqueline Morales, certify:  
(name of circulator)  
 I reside 7271 NW 174th, 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.

4-1-11 (date) [Signature] (signature of circulator)

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1. <i>David L...</i>	1900 FR...	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Florence	4-2-11
2. <i>...</i>	404875 Twin Oaks Elton WI 54420	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elton	4/2/11
3. <i>Kelly C. Evans</i>	203 N. Mill Street	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Merrill	4/2/11
4. <i>...</i>	81 W. Bay Shore St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Marinette	4-2-11
5. <i>...</i>	3010 W HWY 70 Egg River	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Washington	4/2/11
6. <i>...</i>	W3088 Old Post Rd MARINETTE WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MARINETTE	4/2/11
7. <i>Carl Sumner</i>	626745 HILL RD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City antigo	4/2/11
8. <i>Frank W. Bennett</i>	4852 W. BIRCHWOOD Dr	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City PINE LAKE (ONEIDA Co.)	4/2/11
9. <i>...</i>	W10380 BIZTAIL CA	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City CRIVITZ	4/2/11
10. <i>Karen D. Lodd</i>	W13123 Schumaker Lane	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Atherstone	4/2/11

I, Jaqueline Morales, certify:  
(name of circulator)  
 I reside 7271 NW 174 ter Hialeah, FL 33015  
(circulator's residence - include number, street, and municipality)

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4-2-11  
(date)

*Jaqueline Morales*  
(signature of circulator)

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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.

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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.)*

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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. Harriet G. Stenopohl	8390 Skitwood	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	4/12/11
	MINOCQUA, WI 8390 Duftwood Place MINOCQUA WI 54548	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	4/13/11
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11

### Certification of Circulator

I, ANDREW STENDALL, certify:  
(name of circulator)

I reside 8390 Skitwood Place, 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.

4/12/11  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. Eugene Decker	W10904 Loon Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Deerpark <input type="checkbox"/> City	3-28-11
2. Will Martiny	W17555 City Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Antigo WI	3-28-11
3. Bob [unclear]	1008 S. Keim St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Appleton WI	3-28-11
4. Nicole Piortek	116888 Unity Dr	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Townsend	3-28-11
5. Chaudy [unclear]	604 Flint Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Mattson	3-28-11
6. Debra Glatto	923 Lincoln St	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Antigo	3-28-11
7. Rene C Avery	6565 C W Smith	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Three Lakes	3-28-11
8. Gary Majest	113992 Kalcheski	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Range White Lake	3-28-11
9. Amanda Dyer	1331 [unclear] Ave (W5163 HWY)	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Antigo	3-28-11
10. Eden & Shuply	(64 54418)	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Bryant WI <input type="checkbox"/> City	3-28-11

### Certification of Circulator

I, Jacqueline Morale S, certify:  
(name of circulator)  
 I reside 7271 NW 174 Terr. Antigo, WI 53015  
(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)

  
(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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1. <u>Sammy K. Lyons</u>	<u>W1768 Onanekwat Rd. Keshena WI 54135</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
2. <u>Jeri Velozo</u>	<u>N1362 Blue Heron Tr. Keshena WI 54135</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/2/11</u>
3. <u>Annely Buehnerleau</u>	<u>N3481 Hwy 47 Neopit WI 54150</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>neopit</u>	<u>4-7-11</u>
4. <u>Walter Parnianet</u>	<u>N.550 Boudier Ln Keshena WI 54135</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
5. <u>Josephine Parnianet</u>	<u>N550 Burnette Ln Keshena WI 54135</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
6. <u>Bofer</u>	<u>N3706 State Highway 55 Keshena WI 54135</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
7. <u>Travis Fernandez</u>	<u>N3706 State Highway 55 Keshena, WI 54135</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
8. <u>DENISE PARNANET</u>	<u>N554 Brooks Lane Keshena WI</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Keshena</u>	<u>4.7.11</u>
9. <u>REYNOLDO KACHENAGIO</u>	<u>N 862 ST RD 471 50</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>KESHENA</u>	<u>4-7-11</u>
10. <u>Fabricia Hesse</u>	<u>W1191 Spotted Fawn</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>

### Certification of Circulator

I, SHERRI FERRILL, 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

4/7/11  
(date)

Sherri E. Ferrill  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <u>Ann M Wilber</u>	<u>P.O. Box 864 N 535</u> <u>Keshena WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>KESHENA</u>	<u>4/7/11</u>
2. <u>Dearee A Wapka</u>	<u>PO BOX 779</u> <u>Keshena WI 535</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>KESHENA</u>	<u>4/7/11</u>
3. <u>Maria S Peaver</u>	<u>P.O. Box 864 N 535</u> <u>Keshena WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>KESHENA</u>	<u>4/7/11</u>
4. <u>Rebecca L. Pamonica</u>	<u>N1967 Pakanawek</u> <u>Neopit WI 54150</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Neopit</u>	<u>4/7/11</u>
5. <u>Dwayne K...</u>	<u>N1317 TWEN OAKS</u> <u>Keshena</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
6. <u>Ann ...</u>	<u>N1250 STATE Hwy</u> <u>47 Neopit WI 54150</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Neopit</u>	<u>4/7/11</u>
7. <u>...</u>	<u>W2239 Kukeview N</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
8. <u>Jouana ...</u>	<u>N1595 SONDANCE</u> <u>KESHENA</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>KESHENA</u>	<u>4/7/11</u>
9. <u>...</u>	<u>N1308 Thunder Bird Cir.</u> <u>Keshena</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Keshena</u>	<u>4/7/11</u>
10. <u>Robert Wilber</u>	<u>W2582 Bay RD VV</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>KESHENA</u>	<u>4/7/11</u>

### Certification of Circulator

I, SHERRI FERRILL, 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.

4/7/11  
(date)

Sherrie Ferrill  
(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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1. <i>Paulette Jvent</i>	<i>W3311 Hillview Rd Merrill, WI 54452</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pine River</i>	<i>4-6-11</i>
2. <i>Diana Bateman</i>	<i>N561 Brooks Lane</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Keshena</i>	<i>4-6-11</i>
3. <i>Jan Howell</i>	<i>N1202 Rainbow Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Keshena</i>	<i>4/6/11</i>
4. <i>Amy Miller-Cox</i>	<i>W2369 Keshena Lake Keshena</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Keshena</i>	<i>4/7/11</i>
5. <i>Jessica Notimkey</i>	<i>N3597 W 2nd St 1</i>	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Neopit</i>	<i>4/7/11</i>
6. <i>William Byrne</i>	<i>N639 Chief Little Crow rd Keshena, WI 54455</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Keshena</i>	<i>4/7/11</i>
7. <i>J.H.</i>	<i>N166 Chief Souiquay 1</i>	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Keshena</i>	<i>4-7-11</i>
8. <i>Willie...</i>	<i>N3444 2nd Ave Neopit</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Neopit</i>	<i>4-7-11</i>
9. <i>Carole MacDosh</i>	<i>N3539 Lawe Ave Neopit</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Neopit</i>	<i>4-7-11</i>
10. <i>Mariah Connors</i>	<i>N3539 Lawe Ave</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Neopit</i>	<i>4-7-11</i>

### 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.

*4/7/11*  
(date)

*Sherrie 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)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>John Huebner</i>	<i>1646 Chippewa DR Rhinelander WI 54501</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>3-11-11</i>
2. <i>Kim Huebner</i>	<i>1646 Chippewa DR Rhinelander WI 54501</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>3-11-11</i>
3. <i>David Koch</i>	<i>2801 E. Oneida CN Rhinelander, WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>4-11-11</i>
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

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

I reside *4137 Beechwood Drive Rhinelander, WI 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)

# 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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1. <u>Paul C. Belcher</u>	<u>4395 MAPLE DRIVE EAGLE RIVER, WI 54521</u>	<input checked="" type="checkbox"/> Town <u>LINCOLN TOWNSHIP</u> <input type="checkbox"/> Village <u>EAGLE RIVER, WI</u> <input type="checkbox"/> City	<u>3/01/11</u>
2. <u>Caroline Belcher</u>	<u>4395 Maple Drive Eagle River, WI 54521</u>	<input checked="" type="checkbox"/> Town <u>LINCOLN TOWNSHIP</u> <input type="checkbox"/> Village <u>Eagle River, WI</u> <input type="checkbox"/> City	<u>3/02/11</u>
3. <u>Barbara Belcher</u>	<u>4395 MAPLE DR. EAGLE RIVER, WI 54521</u>	<input checked="" type="checkbox"/> Town <u>LINCOLN TOWNSHIP</u> <input type="checkbox"/> Village <u>EAGLE RIVER, WI</u> <input type="checkbox"/> City	<u>3/02/11</u>
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

I, PAUL C. BELCHER, certify:  
(name of circulator)

I reside 4395 MAPLE DRIVE, EAGLE RIVER, WI 54521 · LINCOLN 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.

3/02/11  
(date)

Paul C. Belcher  
(signature of circulator)

# 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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1. <i>Howard T Dolig Jr</i>	<i>M-10305 Cty Rd B Summit Lake WI 54485</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	<i>8/15/11</i>
2.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>

### Certification of Circulator

I, *Howard T Dolig Jr*, certify:  
(Name of circulator)

I reside *M-10305 Cty Rd B Summit Lake WI 54485*.  
(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.

*8-8-2011*  
(date)

*Howard T Dolig Jr*  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Leri Snyder</i>	<i>4025 Cross Country Rd Rhinelander WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander</i>	<i>3/29/11</i>
2. <i>Willie</i>	<i>1692 Owen Point St Apt 2 Rhinelander</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander</i>	<i>3/29/11</i>
3. <i>John Rayot</i>	<i>576 N. Ripon St.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>RHINELANDER</i>	<i>3-29-11</i>
4. <i>Esther Anderson</i>	<i>2698 VIRGINIA RHLDOR</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>RHINELANDER</i>	<i>3/29/11</i>
5. <i>Mark Phil</i>	<i>706 Lake Shore Dr</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander WI</i>	<i>3-29-11</i>
6. <i>Markus</i>	<i>2728 Park Ave 2728 LARK AVE</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander</i>	<i>3-29-11</i>
7. <i>Connie Winters</i>	<i>3116 Boyce Dr</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander WI</i>	<i>3-29-11</i>
8. <i>Nicole Allen</i>	<i>4210 River Bld.</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Land of Lakes</i>	<i>3/29/11</i>
9. <i>Jason Jack</i>	<i>Land of Lakes 324 Woodland Heights Dr Woodland Heights IL</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander</i>	<i>3-29-11</i>
10. <i>Chad J. Bell</i>	<i>540 Evergreen St Rhinelander</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander</i>	<i>3-29-11</i>

### Certification of Circulator

I, SHERRI FERRERL, 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.

3/29/11  
(date)

*Sherri Ferrerl*  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Patricia Montgomery</i>	<i>Humboldt East 1957 Hwy 8 east</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Monroe wa</i> <input type="checkbox"/> City	<i>3-30-11</i>
2. <i>Debra Myers</i>	<i>1548 Racecourse McNoughton</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Oneida</i>	<i>3-30-11</i>
3. <i>David Pearson</i>	<i>110085 (Sunny Point) Tomahawk WI</i>	<input checked="" type="checkbox"/> Town <del>Lincoln</del> <input type="checkbox"/> Village <input type="checkbox"/> City <i>Lincoln County</i>	<i>3-30-11</i>
<i>Micky Lewis</i>	<i>503 E. Grant Crandon WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>3-30-11</i>
5. <i>Judy Braaten</i>	<i>PO Box 1234 (4925) Eagle River WI Hwy 6</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Lincoln</i>	<i>3-30-11</i>
6. <i>Jennymaney</i>	<i>4610 Lake Mildred Rd Rhinelander</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Newbold</i>	<i>3-30-11</i>
7. <i>Lana Horach</i>	<i>Rhinelander 6297 Hwy 17</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Sugar Camp</i>	<i>3-30-11</i>
8. <i>Sandra R. Cebal</i>	<i>1/6 Harmony Hills Ct 1516 mistle/stockley</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhinelander</i>	<i>3-30-11</i>
9. <i>Jane</i>	<i>RD</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pelican Lake</i>	<i>3-30-11</i>
10. <i>Dawn Keefey</i>	<i>4510 St. Hwy 55</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Crandon</i>	<i>3-30-11</i>

### 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)

*Sherrie 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.

### 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Gerald T. Riecke</i>	<i>13581 INDIAN PK RD RHINELANDER</i>	<input type="checkbox"/> Town <i>TRIPOLI</i> <input checked="" type="checkbox"/> Village <i>WI. 54564</i>	<i>3-30-11</i>
2. <i>Andy Sackel</i>	<i>4356 River Rd.</i>	<input checked="" type="checkbox"/> Town <i>Pine Lake</i> <input type="checkbox"/> Village <input type="checkbox"/> City	<i>3-30-11</i>
3. <i>Laura Kennedy</i>	<i>666 Riek Street</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhineland</i>	<i>3-30-11</i>
4. <i>Spencer Quinn</i>	<i>P.O. Box 235/34910 Conover Monheim</i>	<input type="checkbox"/> Town <i>CONOVER</i> <input type="checkbox"/> Village <i>CONOVER</i> <input type="checkbox"/> City	<i>3/30/11</i>
5. <i>Samuel Gape</i>	<i>426 N Stevens St Rhine</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhineland</i>	<i>3/30/11</i>
6. <i>Bob Reed</i>	<i>2673 Thompson Rd W. Pruney</i>	<input checked="" type="checkbox"/> Town <i>ARSONNE</i> <input type="checkbox"/> Village <input type="checkbox"/> City	<i>3/30/11</i>
7. <i>David Donigh Jr.</i>	<i>4990 Bishop Mills Rd Crandon</i>	<input checked="" type="checkbox"/> Town <i>Crandon</i> <input type="checkbox"/> Village <input type="checkbox"/> City <i>CRANDON</i>	<i>3/30/11</i>
8. <i>Jeppu Grabb</i>	<i>5167 Spider Lake Rd. R</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhineland</i>	<i>3/30/11</i>
9. <i>Chad M</i>	<i>5005 Spafford Rd Vhldr WI 5450</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhineland</i>	<i>3/30/11</i>
10. <i>Kelly L. Becker</i>	<i>116 E. WISCONSIN AVE</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Tomahawk</i>	<i>3/30/11</i>

### 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)

*Sherrie 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.

## 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. Diana Dweo	1223 River St Rhd Wis	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Rhd Rhinelander	3-30-11
2. Dawn Teso	2580 Spring Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhd Rhinelander	3-30-11
3. Monica Suedborer	628 Rick St. Rhi. WI 54501	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City RHINELANDER	3-30-11
4. MARKS KALUDA	3999 TRAILS END	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City PINE LAKE	3-30-11
5. David Baker	4622 Boxview Dr	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Newbold	3-30-11
6. Ben Zesh	224 Highview Parkway	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3-30-11
7. Michael S. Buldy	5516 SAND LAKE ROAD MARSHAW WI 54529	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City LAKE TOMAHAWK	3-30-11
8. Clarence Kapecky	5353 S Prairie Lake Tupelo WI 54564	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Municipality	3-30-11
9. Freda Futer	13881 Indian H. Rd Tupelo, WI 54564	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Municipality	3-30-11
10. Betty Kapecky	5353 S. Prairie Lake Tupelo WI 54564	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lepre	3-30-11

### Certification of Circulator

I, SHERRI FERRELL, 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.

3/30/11  
(date)

Sherril 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.

## STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Ken Spaca</i>	828 Arbutus St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3/30/11
2. <i>Mike Fly</i>	N8797 Phyn Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Tomahawk	3/30/11
<i>Julie Kelly</i>	<del>422 Lennox</del> Rhinelander	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City RHINELANDER	3/30/11
4. <i>Amanda [unclear]</i>	1002 Echo Ln Rhinelander	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3/30/11
5. <i>Anita [unclear]</i> <i>Janja Matek</i>	218 Sunset Dr. Antigo WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Antigo	3-30-11
6. <i>Wendy Smith</i>	2820 Beard Rd. Rhinelander	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3/30/11
7. <i>Alex [unclear]</i>	W3786 Fox Ranch Rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Tomahawk	3/30/11
8. <i>Janice Turner</i>	PO Box 1824 Ottawa	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lac du Flambeau	3/30/11
9. <i>Paula Christen</i>	Box 1240 Lac du Flambeau	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lac du Flambeau	3/30/11
10. <i>William [unclear]</i>	Box 1136a Antigo	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City ELCHO	3-30-11

### Certification of Circulator

I, SHERRI FERRELL, certify:

I reside 204 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 on the signature line. 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.

3/30/11  
(date)

*Sherrie 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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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <u>Pam Haskins</u>	<u>4270 CIRCLE DR Rhdcr WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Pelican</u>	<u>3/30/11</u>
2. <u>Miki Welch</u>	<u>11203 Antigo St. Elcho, WI 54428</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Elcho</u>	<u>3/30/11</u>
3. <u>Jolene Brabant</u>	<u>16030 Fuhrman Rd ALVIN, WI 54542</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>FOREST</u>	<u>3/30/11</u>
4. <u>Sherrie Mainer</u>	<u>367 Woodland Hts Terrace Rhinelander, WI 54501</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>RHINELANDER</u>	<u>3/30/11</u>
5. <u>Dotty Kimla</u>	<u>4261 Island View Rd Rhinelander WI 54501</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Rhinelander LK George</u>	<u>3/30/11</u>
6. <u>Norma Barlow</u>	<u>4307 Spwoc Ln Eas</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>East River</u>	<u>3/30/11</u>
7. <u>Car Case</u>	<u>10720 Kemp Lane Grandon WI 54820</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>GRANDON</u>	<u>3/30/11</u>
8. <u>Shawn</u>	<u>5950 N Railroad Ave</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Grandon</u>	<u>3/30/2011</u>
9. <u>Elizabeth</u>	<u>417 Barnes St</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Rhinelander</u>	<u>3-30-2011</u>
10. <u>Gay Loren</u>		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### 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) Sherrin 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)

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

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1. <i>Kean Podgorski</i>	N 708 Hwy X MERRILL, WI 54452	<input checked="" type="checkbox"/> Town OF PINE RIVER <input type="checkbox"/> Village <input type="checkbox"/> City	2/24/11
2. <i>Sherrill A. Podgorski</i>	N 708 Hwy X MERRILL, WI 54452	<input checked="" type="checkbox"/> Town PINE RIVER <input type="checkbox"/> Village <input type="checkbox"/> City	2/24/11
3. <i>Sherrill A. Podgorski</i>	1604 E MARY MERRILL, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MERRILL	2/25/11
4. <i>Kevin Mergen</i>	W1817 CRYC MERRILL, WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City BIRCH	2/25/11
5. <i>Kevin Mergen</i>	N 5427 Spring Rd Merrill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Merrill	2/25/11
6. <i>Kevin Mergen</i>	N 5427 Spring Rd Merrill	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Merrill	2/25/11
7. <i>Kathy Brewington</i>	N 975 Lot 3-3 Hwy W	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Pine River	2/25/11
8. <i>Dan Mekel</i>	N 6656 LANGE RD	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City BIRCH	2-26-11
9. <i>Maurice McBude</i>	N 5803 Lange Rd IRMA WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Birch	2-26-11
10. <i>Jane McBride</i>	N 5803 Lange Rd IRMA WI 54442	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Birch	2-26-11

### Certification of Circulator

I, Stan Podgorski, certify:

(name of circulator)

I reside at N 708 Hwy X Merrill, WI, 54452 PINE RIVER

(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.

2-26-11  
(date)

*Kean Podgorski*  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>James R. Buckley</i>	<i>416 6th Ave Antigo WI 54409</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>2-27-11</i>
2. <i>Bob Straub</i>	<i>2429 Charlotte Antigo Wis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>2-27-11</i>
3. <i>Edward P. Schora</i>	<i>512 Maguire St Antigo, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>ANTIGO</i>	<i>2-27-11</i>
4. <i>Peg Douville</i>	<i>1625 N Superior St Antigo WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>2-27-11</i>
5. <i>Loren Douville</i>	<i>1625 N Superior St Antigo, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>2-28-11</i>
6. <i>Bob Messer</i>	<i>211 8th Ave Antigo WI 54409</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>2-28-11</i>
7. <i>D. R. V.</i>	<i>W. 4119 Hwy 64 Bryant</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Evergreen</i>	<i>3-1-11</i>
8. <i>Misma Brunk</i>	<i>Antigo WI 54408 W. 4119 Hwy 64</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-1-11</i>
9. <i>D. L. Runk</i>	<i>Bryant, WI Antigo WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Langlade</i>	<i>3-1-11</i>
10. <i>Kosie A. Runk</i>	<i>610 Berger Ave Antigo WI 54409</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>3-1-11</i>

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.

(date) 3-15-2011

(signature of circulator) *James R. Buckley*

## 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>John W. Luess</i>	W8016 MOOSE LAKE RD ANTIGO, WI. 54409	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City NORWOOD	3/3/11
2. <i>Patricia A. Deems</i>	N1400 Bellwood Rd Antigo, WI. 54409	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City NORWOOD	3/3/11
3. <i>Randy Johnson</i>	N12431 old 26 Antigo WI 54409	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Rolling	3/3/11
4. <i>Thomas E. Young</i>	N1740 Hwy 45 Antigo wis 54409	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Rolling	3-4-11
5. <i>Dennis Dunbar</i>	N1412 HWY 45 ANTIGO WIS	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Rolling	3-4-11
6. <i>Craig H. Gray</i>	N1906 TROUT RD ANTIGO WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City NORWOOD	3-4-11
7. <i>Mary G. Huber</i>	1405 Serravallo Ave Antigo	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Town of Antigo	3-5-11
8. <i>Dale Tucker</i>	1405 Forum Ave Antigo, Wis	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City town of Antigo	3-5-11
9. <i>Shirley</i>	2812 Hwy 6 Antigo	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Harrison	3-5-11
10. <i>David H. ...</i>	1007 2nd AVE ANTIGO, WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City TOWN OF ANTIGO	3-7-11

I, JAMESO. NOVAK Certification of Circulator \_\_\_\_\_, certify:  
(name of circulator)  
 I reside at 619 Goodman Rd 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.

3-12-11 \_\_\_\_\_  
(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 608-264-4005, <http://gab.wi.gov> email: [gab@wi.gov](mailto:gab@wi.gov)

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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

*(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Marcia Krupa</i>	<i>4406 W Lake Ellwood Rd Florence, WI 54121</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Florence</i>	<i>3/15/2011</i>
2. <i>Nancy Mott</i>	<i>W 1671 Old 8 Rd Niagara, WI 54151</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Niagara</i>	<i>3-15-2011</i>
3. <i>Emily Anderson</i>	<i>557 Bernese Niagara, WI 54151</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-15-2011</i>
4. <i>Carl A. Pardee</i>	<i>W 261 Ct N Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-15-11</i>
5. <i>Ida M. Pardee</i>	<i>W 261 Ct N Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-15-11</i>
6. <i>TAT Gline</i>	<i>W 885 Skyline Dr. Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-16-11</i>
7. <i>Tom Krans</i>	<i>2234 Garfield Lane Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-16-11</i>
8. <i>Kathi Krans</i>	<i>2234 Garfield Lane Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-16-2011</i>
9. <i>Dawn Kowalski</i>	<i>1641 Grandview Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-2011</i>
10. <i>Tom Kowalski</i>	<i>1641 Grandview Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Aurora</i>	<i>3-27-2011</i>

### 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 27, 2011* *Lucille Anderson*  
(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.)*

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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Sharon Ward</i>	<i>8956 ST. HWY 55 Crandon WI.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>4-1-11</i>
2. <i>Kaye Mackiewicz</i>	<i>1122 10th Ave Antigo WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>4-1-11</i>
3. <i>Don Sagle</i>	<i>102 6th AVE Antigo</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>4-1-11</i>
4. <i>Fred Hawkins</i>	<i>N 10585 Lake Geneva Rd</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>TAMAHAWK</i>	<i>4-1-11</i>
5. <i>Jeff MARSHALL</i>	<i>8944 SUNSET LANE Pickersel WI 54465</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>NASHVILLE</i>	<i>4-1-11</i>
6. <i>John B-Glaas</i>	<i>N9401 POTTER RD Summit L. WI.</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>UPHAM</i>	<i>4-1-11</i>
7. <i>Kaybell</i>	<i><del>P.O. Box 132</del> P.E. WI 11596 State Line Rd</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Presque Isle</i>	<i>4-1-11</i>
8. <i>Dr. Pahl</i>	<i>602 N Prospect Ave</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>4-1-11</i>
9. <i>Carol Beck</i>	<i>3376 Hay Meadow Rd</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>PILKAN</i>	<i>4-1-11</i>
10. <i>Debra Shatruck</i>	<i>5285 Spider Lk Rd Rhinelander WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pine Lake Oserda</i>	<i>4-1-11</i>

### Certification of Circulator

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

I reside *7271 NW 174 terr. AIALEAH, 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.

*4-1-11* (date) *J Morales* (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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Dory Powell</i>	<i>N2115 Trout Rd Antigo WI 54409</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Norwood</i>	<i>3-12-11</i>
2. <i>Pamela A. Powell</i>	<i>N2115 Trout Rd Antigo WI 54409</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Norwood</i>	<i>3-12-11</i>
3. <i>Jessie Powell</i>	<i>538 Graham Ave Antigo WI 54409</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>3-12-11</i>
4. <i>John Powell</i>	<i>N2115 Trout Rd Antigo WI 54409</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Norwood</i>	<i>3-12-11</i>
5. <i>Kevin Bradley</i>	<i>1748 Clermont St Antigo WI 54409</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>3-29-11</i>
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

I, *Virginia Powell* certify:  
(name of circulator)

I reside at *W8078 Ct. 147 RA 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.

*3-29-11*  
(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.)*

<b>THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.</b> <b>THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.</b>			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Thomas D. Litscher</i>	<i>12301 South Shore Dr Suring, WI 54174</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Mountain</i>	<i>4/12/11</i>
2. <i>Carolyn Litscher</i>	<i>12301 S Shore Dr Suring 54174</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>mt</i>	<i>4/12/11</i>
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>

### Certification of Circulator

I, *Thomas D. Litscher*, certify:

(name of circulator)

I reside *12301 South Shore Drive, Suring, WI 54174*

(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.

*4-14-2011*

(date)

*Thomas D. Litscher*

(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. 	4924 Elm Road Florence	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City     Florence	4/4/11
2.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /11

### Certification of Circulator

I, Richard Splinter (name of circulator), certify:

I reside 4924 Elm Road 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.

4/4/2011  
(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.)*

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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Jay Weil</i>	<i>N5406 Church Rd DEERBROOK, WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>NEVA</i>	<i>3-10-11</i>
2. <i>Linda Weiler</i>	<i>715406 Church Rd. Deerbrook, WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Neva</i>	<i>3-10-11</i>
3. <i>Thomas F. Sibora</i>	<i>145285 CTY A DEERBROOK</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>NEVA</i>	<i>3-10-11</i>
4. <i>Rafael</i>	<i>N6269 CLAIRE RD DEERBROOK</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>NEVA</i>	<i>3-10-11</i>
5. <i>Beverly J. Sibora</i>	<i>N5285 Hwy A Deerbrook, WI 54424</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Neva</i>	<i>3-10-11</i>
6. <i>But Myszyn</i>	<i>Antigo WI 54409 W10763 CTY N</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-10-11</i>
7. <i>Harold Kuranda</i>	<i>809 Violet Way Antigo WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-10-11</i>
8. <i>Carrie M. Hill</i>	<i>Antigo WI 54409 750 VIOLET WAY</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-10-11</i>
9. <i>Tom Wild</i>	<i>Antigo WI 54409 750 Violet Way</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-10-11</i>
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

I, EUGENE JACOBUS, certify:  
(name of circulator)

I reside W 10081 CTY B DEERBROOK WI 54424  
(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)

*Eugene Jacobus*  
(signature of circulator)

# 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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1.	6086 Sr Hwy 51	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Hazelhurst	3/11/11
2.	4673 29th Rd Eagle River	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lincoln	3/11/11
3.	4673 Dyer Rd Eagle River	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Lincoln	3/11/11
4.	1774 June Rd. ST. GERMAIN, WI 54558	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City ST. GERMAIN	3/11/11
5.	4809 Harscheid Lake Rd Fauschau, WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Causton	3/11/11
6.	11400 Santo RD WOODRUFF WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City ARBUVIL WOODRUFF	3/11/11
7.	11400 Santo Rd. Woodruff WI 54568	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City ARBUVIL VITA 2	3/11/11
8.	1129 W Herrick Rd Winchester WI 54587	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Winchester	3/12/11
9.	277 Park Ave M.W, WI 54545	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MANFARVIL WATERS	3/12/11
10.	5187 Hwy 51 South MW WI 54543	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Boulder Junction	3/12/11

### Certification of Circulator

I, Ronald A. Fuchs Jr., certify:  
(name of circulator)

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.

3/12/11  
(date)

# 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Mary Vales</i>	<i>P.O. Box 92 Land O' Lakes</i>	<input checked="" type="checkbox"/> Town 6509 Airport Rd. <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI	<i>3/2/11</i>
2. <i>Jeff Proger</i>	<i>3559 E Buckston Conover</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI	<i>3/3/11</i>
3. <i>Margaret Schiltz</i>	<i>4257 County Hwy B Land O' Lakes</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI	<i>3-3-11</i>
4. <i>Dick Schult</i>	<i>4257 CTY B Land O' Lakes</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI	<i>3-3-11</i>
5. <i>Leona Berme #</i>	<i>6115 Carlton Rd Land O' Lakes WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI	<i>3-3-11</i>
<del>6. <i>Bill Whetzel</i></del>	<del><i>P.O. Box 323 L.O.L. WI</i></del>	<del><input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI</del>	<del><i>3-3-11</i></del>
<del>7. <i>Dawn Whetzel</i></del>	<del><i>P.O. Box 323 L.O.L. WI</i></del>	<del><input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI</del>	<del><i>3-3-11</i></del>
8. <i>Mary J Proger</i>	<i>6386 Spruce Meadows Ln. Land O' Lakes WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Land O' Lakes WI	<i>3-3-11</i>
9. <i>Rene Schweny</i>	<i>507 S. Pine Rd. Rhinelander, WI 54501</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander WI	<i>3.3.11</i>
10. <i>Maile Pipp</i>	<i>3689 Birch Point Rd Conover, WI 54519</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Conover WI	<i>3-3-11</i>

### Certification of Circulator

I, *Shelley Bauer*, certify:  
(name of circulator)  
 I reside *4647 Section 9 Rd. P.O. Box 865 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.

*3-3-11*  
(date)

*Shelley Bauer*  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Cheryl Madison</i>	<i>5431 Lake Julia Rd. RHINELANDER, WI 54501</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pelican</i>	<i>3/3/2011</i>
2. <i>Philip Mackson</i>	<i>5431 Lake Julia Rd. Rhinelander, WI 54501</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pelican</i>	<i>3/3/2011</i>
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

I, *DONALD HOPPE*, certify:

I reside *5417 LAKE JULIA ROAD RHINELANDER, WIS 54501*  
(circulator's residence - include number, street, and municipality) *TOWN OF PELICAN*

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated

opposite his 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)

*[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.

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1. <i>Mary H. Olk</i>	<i>6459 St. Clair Rd.</i>	<input checked="" type="checkbox"/> Town <i>Land O' Lakes</i> <input type="checkbox"/> Village <input type="checkbox"/> City	<i>4/17/11</i>
2.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11

I, MARY H. OLK **Certification of Circulator**, certify:  
(name of circulator)  
 I reside 6459 St. Clair Rd, Land O' Lakes 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.

4/17/11 (date) *Mary H. Olk* (signature of circulator)

# RECALL PETITION

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1. <u>D. Brunner</u>	<u>3699 Sterling Drive Rhinelander, WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Crescent</u>	<u>3/11/11</u>
2. <u>M. Szeludowski</u>	<u>240 Hwy 17 SO Eagle River WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Lincoln</u>	<u>3/14/11</u>
3. <u>MICHAEL DEHOLF</u>	<u>3704 WAUSAU RD Rhinelander, WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Crescent</u>	<u>3/15/11</u>
4. <u>Bob Moerkelka</u>	<u>3019 S. Lifen Rd Keweenaw WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Crescent</u>	<u>3/15/11</u>
5. <u>Terry Goldbach</u>	<u>2704 Bible Camp Rd Rhinelander, WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Crescent</u>	<u>3-15-11</u>
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

I, DONNA M'LAUGHLIN, certify:  
(name of circulator)

I reside 3000 WAUSAU RD RHINELANDER, WI 54501 TOWN CRESCENT.  
(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) Donna M'Laughlin (signature of circulator)

# RECALL PETITION

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

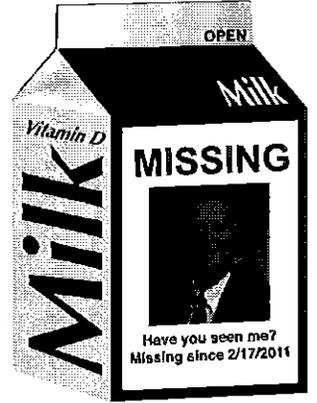
We, the undersigned qualified electors of the Wisconsin's 12<sup>th</sup> Senate District,  
(jurisdiction or district of officeholder)

petition for the recall of Jim Halperin Wisconsin's 12<sup>th</sup> 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.

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1. <u>Richard Stankovic</u>	<u>4530 Hwy 6 Antigo WI 54409</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Harrison</u>	<u>3-19-11</u>
2. <u>Jake Stankovic</u>	<u>4530 Hwy 6 Antigo WI 54409</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Harrison</u>	<u>3/19/11</u>
3. <u>Sherry Stankovic</u>	<u>4530 Hwy 6 Antigo WI 54409</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Harrison</u>	<u>3/19/11</u>
4. <u>George J. Stankovic</u>	<u>2419 St. Charles Rd P. O. Box 1000 54463</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Enterprise</u>	<u>3-19-11</u>
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6. <u>John J. Stankovic</u>	<u>317 9th Ave Antigo, WI 54409</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Antigo</u>	<u>3/28/11</u>
7. <u>John Swanson</u>	<u>2600 County Rd Y Aniwa, WI 54408</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Harrison</u>	<u>3/28/11</u>
8. <u>Ronell Easonson</u>	<u>2628 City Rd Y Aniwa WI 54408</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Harrison</u>	<u>3/28/11</u>
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

### Certification of Circulator

I, Carlu Kay Drews, certify:  
(name of circulator)  
 I reside at 2750 Cty Rd Y, Aniwa, WI 54408 Town of Harrison Marathon  
(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 Carlu K Drews  
(date) (signature of circulator)

Please mail this form to: **Recall Jim**  
 P.O. Box 961 • Eagle River, WI 54521  
[www.recalljim.com](http://www.recalljim.com) • [admin@recalljim.com](mailto:admin@recalljim.com)

Page No. 2834

# 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>William R. Hall</i>	9988 BAKER LAKE RD.	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MINOCQUA	4/1/11
2. <i>Patricia P. Hall</i>	9988 BAKER LAKE ROAD	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MINOCQUA	4/1/11
3. <i>Joanne Mrenn</i>	506 Hwy 51 N Box 1031	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MINOCQUA	4/4/11
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 11

### Certification of Circulator

I, *Joanne Mrenn*, certify:  
(name of circulator)  
 I reside 806 Hwy 51 N Box 1031 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.

4-4-11  
(date)

*Joanne Mrenn*  
(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.)*

*Leaving Wis for 3 weeks to go to Illinois and deserting 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Joyce Mitchell</i>	<i>11075 Chippewa Forest Rd Arbor Vitae, WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>3/31/11</i>
2.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ /11</i>

### Certification of Circulator

I, *Joyce Mitchell*, certify:  
(name of circulator)

I reside *11075 Chippewa Forest Rd. Arbor Vitae WI 54568*.  
(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 31 - 2011*  
(date)

*Joyce Mitchell*  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Floyd Bagley</i>	<i>N 822 Majestic Lane</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pine River</i>	<i>3/30/11</i>
2. <i>Sandra Bagley</i>	<i>N 822 majestic Lane</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pine River</i>	<i>3/30/11</i>
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>/ / 11</i>

### Certification of Circulator

I, *Floyd Bagley*, certify:  
(name of circulator)

I reside *N 822 Majestic Lane Merrill, WI 54452*.  
(circulator's residence - include number, street, and municipality)  
*PINE RIVER*

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his 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)

*Floyd Bagley*  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <u>Danny R Dengel</u>	<u>N2583 Norwegian Rd Merrill, WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Merrill</u>	<u>3/29/11</u>
2. <u>Kassi Jo Erickson</u>	<u>1507 Cotter Ave Merrill WI 54452</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>3/29/11</u>
3. <u>Don An</u>	<u>Merrill WI 54452 1507 cotter AV</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Merrill</u>	<u>3/29/11</u>
4. <u>Denise Dengel</u>	<u>N2583 Norwegian Merrill WI 54452</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Merrill</u>	<u>3/29/11</u>
5. <u>Sandra Readey</u>	<u>W2621 Sunrise Rd Merrill WI 54452</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Schely</u>	<u>3/29/11</u>
6. <u>Tim Readey</u>	<u>W2621 Sunrise Rd Merrill WI 54452</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Shely</u>	<u>3/29/11</u>
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<u>1/11</u>
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<u>1/11</u>
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<u>1/11</u>
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<u>1/11</u>

### Certification of Circulator

I, Danny R Dengel, certify:  
(name of circulator)

I reside @ N2583 Norwegian Rd Merrill, WI 54452 Town of Merrill  
(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)

Danny R Dengel  
(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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <u>Maand De Clomb</u>	<u>16215 56 Cheyenne</u> <u>Niagara, WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Niagara</u>	<u>3-10-11</u>
2. <u>Kerry Moriarity</u>	<u>1848 Ridge St</u> <u>Niagara</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Niagara</u>	<u>4-10-11</u>
3. <u>Brenda M Volverson</u>	<u>3981 Sand Lake Rd</u> <u>Florence, WI</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Florence</u>	<u>4/10/11</u>
4. <u>Christa Bach</u>	<u>1855 Elm St</u> <u>Niagara</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Niagara</u>	<u>4/10/11</u>
5. <u>Janis Hedmark</u>	<u>1507 W. Fischer Lake Pkwy</u> <u>Niagara, WI 54151</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Aurora</u>	<u>4/10/11</u>
6. <u>Heather Sweig</u>	<u>N22188 Co Rd</u> <u>Niagara, WI 54151</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Niagara</u>	<u>4/10/11</u>
7. <u>[Signature]</u>	<u>503 Agnes St</u> <u>Niagara, WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Aurora</u>	<u>4-10-11</u>
8. <u>[Signature]</u>	<u>802 Spring St</u> <u>Florence</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Florence</u>	<u>4-10-11</u>
9. <u>[Signature]</u>	<u>34 W Glen St</u> <u>Crandon</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Crandon</u>	<u>4-10-11</u>
10. <u>[Signature]</u>	<u>306 N. [unclear]</u> <u>Crandon</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Crandon</u>	<u>4-10-11</u>

### 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)

I personally circulated this recall petition and personally-obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his 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.)*

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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>James Van Dersman</i>	<i>4185 39 Maple Dr Do N BRR 54117</i>	<input checked="" type="checkbox"/> Town <i>Rush</i> <input type="checkbox"/> Village <input type="checkbox"/> City	<i>4-16-11</i>
2. <i>Blacks Van Den Heuvel</i>	<i>632 Washington Niagara</i>	<input checked="" type="checkbox"/> Town <i>Niagara</i> <input type="checkbox"/> Village <input type="checkbox"/> City	<i>4-10-11</i>
3. <i>Dina Kenny</i>	<i>1938 Weimers Rd Niagara</i>	<input checked="" type="checkbox"/> Town <i>Aurora</i> <input type="checkbox"/> Village <input type="checkbox"/> City	<i>4-10-11</i>
4. <i>Mark Van Lanbroek</i>	<i>177 Crooked Creek Ln Niagara W.I.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Aurora</i>	<i>4-10-11</i>
5. <i>Melissa Garaman</i>	<i>116 City Rd F Armstrong Creek WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Armstrong Creek</i>	<i>4-10-11</i>
6. <i>Jessica Totsch</i>	<i>120 Quinsec St Florence WI 54121</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Florence</i>	<i>4-10-11</i>
7. <i>Hedie Milan</i>	<i>711 Lake Shore Florence WI 54121</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Florence</i>	<i>4-10-11</i>
8. <i>Robert Schackow</i>	<i>Route 113 Lak St Florence WI.</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Florence</i>	<i>4-10-11</i>
9. <i>Christine Miller</i>	<i>306 N. Boulevard Ave Crandon</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>4/10/11</i>
10. <i>Rita M. Jensen</i>	<i>306 N. Blvd #5 Crandon WI 54800</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>4/10/11</i>

### 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)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his 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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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Kathie L. De Clark</i>	<i>121586 Chapman Rd Niagara, WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Niagara</i>	<i>4/10/11</i>
2. <i>James Samich</i>	<i>10720 Main St Niagara Wis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Niagara</i>	<i>4-10-11</i>
3. <i>Walter Stebbins</i>	<i>N 704 County Rd N. Niagara WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Niagara</i>	<i>4-10-11</i>
4. <i>Deb Tipton</i>	<i>47183 County Rd R Pembun WI 54156</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pembun</i>	<i>4-10-11</i>
5. <i>Nicole Trimmell</i>	<i>157 Hill St Niagara WI 54151</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Niagara</i>	<i>4-10-11</i>
6. <i>Dee Keller</i>	<i>5050 Sealion Lake Rd Florence, WI 54121</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Florence</i>	<i>4-10-11</i>
7. <i>Nicole Smith</i>	<i>4410 John Bradley Ln Florence, WI 54121</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Florence</i>	<i>4-10-11</i>
8. <i>Val Vaccaro</i>	<i>5622 Harding Rd Florence WI 54121</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Florence</i>	<i>4-10-11</i>
9. <i>Sam Lubitz</i>	<i>Crandon 602 N. Prospect Ave.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>4-10-11</i>
10. <i>Sue Palebicki</i>	<i>602 N. Prospect Ave Crandon</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>4-10-11</i>

### Certification of Circulator

I, *Larry W. Schumacher*, certify:

I reside *4621 S 72nd 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.

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <u>Steven Wauder</u>	<u>222 Sixth Ave</u>	<input type="checkbox"/> Town <u>Antigo</u> <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<u>4/8/11</u>
2. <u>Shane Norton</u>	<u>1028 5th Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <u>Antigo</u> <input checked="" type="checkbox"/> City	<u>4/8/11</u>
3. <u>Timothy Fied</u>	<u>3106 Bruce Drive Weston WI 54402</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <u>Weston</u> <input type="checkbox"/> City	<u>4/8/11</u>
4. <u>Mike Wauder</u>	<u>633 Thorne St</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Antigo</u>	<u>4-9-11</u>
5. <u>Kim Juech</u>	<u>324 Kelly St</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Antigo</u>	<u>4-9-11</u>
6. <u>Kogelstrom</u>	<u>704 mason</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Rhinclander</u>	<u>4-10-11</u>
7. <u>David Brouse</u>	<u>5955 Hwy B</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Loader Lakes</u>	<u>4/10/11</u>
8. <u>Ronda Schweg</u>	<u>2990 Crescent Rd</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Reider</u>	<u>4/10/11</u>
9. <u>Tom Reich</u>	<u>527 Hemlock</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Rhonda</u>	<u>4/10/11</u>
10. <u>Tom Swearingen</u>	<u>230 Grant St.</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Rhinclander</u>	<u>4/10/11</u>

### 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.

4/10/11  
(date)

Sherrie 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.

### 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 <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. <i>Charles Kalata</i>	<i>9156 St. Hwy 32 Argonne, WI 54511</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Argonne</i>	<i>3-21-11</i>
2. <i>Samantha Ball</i>	<i>N8609 Hwy 55 Lily, WI 54491</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Langlade</i>	<i>3-21-11</i>
3. <i>Loeb E Daniels</i>	<i>535 3rd Ave. Apt 223 Antigo, WI 54409</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Langlade</i>	<i>3-21-11</i>
4. <i>Dee Egan</i>	<i>W1025 S Koepmich Deerbrook WI 54424</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>UPHmn</i>	<i>3/21/11</i>
5. <i>David Kato</i>	<i>W1222 Lamphig Ln Antigo, WI 54407</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Rolling</i>	<i>3/22/11</i>
6. <i>Sharon Krueger</i>	<i>W947 3rd Ave Gleason WI 54435</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Russell</i>	<i>3/22/11</i>
7. <i>Vince Lilly</i>	<i>200 E. Cobb Blv Crandon, WI 54520</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Crandon</i>	<i>3-22-11</i>
8. <i>Roz Kroll</i>	<i>W1310 Hitchcock Road Branan WI 54414</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Shawano</i>	<i>3-22-11</i>
9. <i>Cindy Barnes</i>	<i>W3862 Wolf River Ldg Lily, WI 54491</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Langlade</i>	<i>3-22-11</i>
10. <i>M. J. J.</i>	<i>N11611 Hwy 45 Birnam WI 54414</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Anwa</i>	<i>3-22-11</i>

### Certification of Circulator

I, *Duane Schumacher*, 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.

*3-25-11*  
(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.

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1. <i>Charles A. Heuss</i>	<i>N 2166 Maple Rd Antigo, WI 54409</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Rolling</i>	<i>3/27/11</i>
2. <i>Jody R. Markgrat</i>	<i>Bryant, WI 54418 N 6144 Hwy 64 Bryant</i>	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Polar</i>	<i>3-22-11</i>
3. <i>DAVE CRUEL</i>	<i>N 15450 Hwy 14 Antigo WI 54102</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-22-11</i>
4. <i>Rita Suckon</i>	<i>212 S. Walnut Antigo 54409</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>3-22-11</i>
5. <i>D. S. Smith</i>	<i>220 E. 10th Ave Antigo WI 54409</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Antigo</i>	<i>3-22-11</i>
6. <i>Bob Mc</i>	<i>N 9610 Pickering Rd Pearsa WI 54462</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-22-11</i>
7. <i>Norma Thode</i>	<i>9444 Woodchuck Rd Pickering WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-22-11</i>
8. <i>Bonnadine Rasmussen</i>	<i>W 8337 State Hwy 64 Antigo, WI 54409</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Antigo</i>	<i>3-22-11</i>
9. <i>Carl Schmittke</i>	<i>14593 Park Ln Mountain WI 54149</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Mountain</i>	<i>3-22-11</i>
10. <i>Alison Oulton</i>	<i>W 10036 Parkside Ln Antigo WI 54409</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Rolling</i>	<i>3-22-11</i>

### Certification of Circulator

I, *Duane Schumacher*, certify:

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

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*3-25-11*  
(date)

*Duane Schumacher*  
(signature of circulator)

# RECALL PETITION

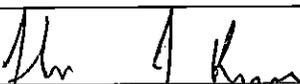
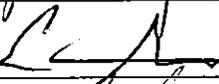
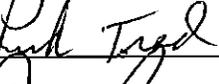
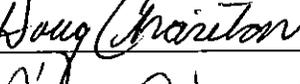
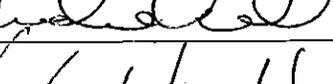
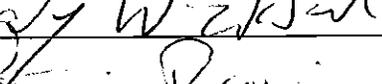
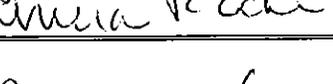
TO: Wisconsin Government Accountability Board

(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.)*

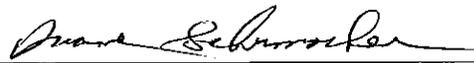
THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, City, or Village</small>	DATE OF SIGNING
1. 	1315 2 <sup>nd</sup> Ave Antigo WI 54409	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Antigo	3-22-11
2. 	914 7th Ave Antigo WI 54409	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Antigo	3-22-11
3. 	397 Wardland Heights Terrace Rhinelander WI 54501	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3-23-11
4. 	611 E King Tomahawk WI 54487	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Tomahawk	3-23-11
5. 	1022 RANDALL Rhinelander 54501	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City RHINER	3-23-11
6. 	3412 HWY 8 E RHINELANDER 54501	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City RHINELANDER	3/23/11
7. 	703 Arcturus St Rhinelander 54501	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3/23/11
8. 	1105 Woodland Dr 54501 Rhinelander	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Rhinelander	3/23/11
9. 	1728 Beech Thawle Ave Tomahawk 54487	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Tomahawk	3/23/11
10. 	Box 404 2779 Lac du Flambeau 54538	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lac du Flambeau	3-23-11

I, Duane Schumacher, certify:

I reside 13528 290 Ave, Detroit Lakes, MN 56501

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his 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.

3-25-11  
(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)

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1. <i>Madeleine Smith</i>	<i>307 S. Central Ave Crandon WI 54520</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>crandon</i>	<i>4/9/11</i>
2. <i>Stacy Stampfer</i>	<i>4297 Hwy 32 Laona WI 54541</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Laona</i>	<i>4/10/11</i>
3. <i>Michelle Welch</i>	<i>801 E. Timber St. #6</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhineland</i>	<i>4-10-11</i>
4. <i>Bonnie Gorman</i>	<i>635 B PELICAN ST</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhineland</i>	<i>4-10-11</i>
5. <i>Steve Pastorek</i>	<i>315 Kemp St Rhine</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Rhine</i>	<i>4-10-11</i>
6. <i>John F. Blizewski</i>	<i>4017 Sunset Drive</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Rhineland</i>	<i>4-10-11</i>
7. <i>John Malow</i>	<i>127 W. Frederick St</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Rhineland</i>	<i>4-10-11</i>
8. <i>Ryan Sebert</i>	<i>4204 LAKESHORE DR</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>RHINELANDER</i>	<i>4/10/11</i>
9. <i>Jim J. Piva</i>	<i>416 Centro Street</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Rhineland</i>	<i>4/10/11</i>
10. <i>Jane Bellard</i>	<i>8857 Finch Rd</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Lake Tomahawk</i>	<i>4-10-11</i>

### Certification of Circulator

I, SHERRI FERRELL, certify:

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

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4/19/11  
(date)

Sherrie C. Ferrell  
(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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1. <i>Maureen Pui sk</i>	<i>7920 Sanctuary Dr Eagle River Wis 54521</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Sugar Corn</i>	<i>3/28/11</i>
2. <i>Karen Sizer</i>	<i>8290 Hwy 51 Minocqua WI 54548</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Minocqua</i>	<i>3/28/11</i>
3. <i>Stacy Paul</i>	<i>9425 City J Apt. 2 Minocqua, WI 54548</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Minocqua</i>	<i>3/28/11</i>
4. <i>Judy Walbruck</i>	<i>1205 W Harbor Dr. Auburville 54508</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Auburville</i>	<i>3/28/11</i>
5. <i>Lytle Lambert</i>	<i><del>7000</del> 6615 W. Kaubish Road Hazelhurst, WI 54531</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Hazelhurst</i>	<i>3/29/11</i>
6. <i>Dan J. Jorg</i>	<i>3911 Tower Rd Eagle River WI 54521</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Lincoln</i>	<i>3-28-11</i>
7. <i>Chris Jedd</i>	<i>407 Christmas Tree Ln St Germain WI 54558</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>St. Germain</i>	<i>3-28-11</i>
8. <i>Maub Blotnick</i>	<i>4450 Chain O' Lakes Rd Eagle River WI 54521</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Eagle River</i>	<i>3-28-11</i>
9. <i>Bonnie Froehel</i>	<i>1547 Sandstone Cir Eagle River WI 54521</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Lincoln</i>	<i>3-28-11</i>
10. <i>Susan Stephan</i>	<i><del>1925 Kolarisk</del> <del>Three Lakes WI 54562</del></i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Three Lakes</i>	<i>3-28-11</i>

### 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)

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*4-1-11*  
(date)

*Duane Schumacher*  
(signature of circulator)

# RECALL PETITION

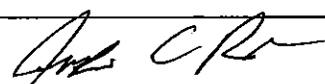
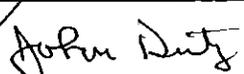
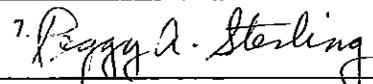
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1. 	2741 Hwy 47 Monroe WI 54501	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Monroe	3-28-11
2. 	1509 E. Stella LK RD. Three Lakes, WI. 54562	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Pichel	3/28/11
3. 	1509 E. Stella LK RD Three Lakes, WI 54562	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Pichel	3/28/11
4. 	4739 Loggers Run Rd. Eagle River WI 54521	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lincoln	3-28-11
5. 	622 E. Pine St. Eagle River WI 54521	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lincoln	3/28/11
6. 	5619 Rush Road Conover WI 54519	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Conover	3/28/11
7. 	1250 TYSON RD EAGLE RIV. WI. 54521	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City LINCOLN	3/28/11
8. 	2510 Hwy 17 Phelps WI 54557	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City PHELPS	3/28/11
9. 	1645 McKinley Blvd. Eagle River, WI 54521	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Lincoln	3/28/11
10. 	3848 Evergreen Rd Eagle River, WI 54521	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Washington	3/28/11

### Certification of Circulator

I, Ruave Schumacher, certify:

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(circulator's residence - include number, street, and municipality)

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4-1-11  
(date)

  
(signature of circulator)