RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Donna Thompson	N3450 State Hwy 107	☒ Town ☐ Village ☐ City Rock Falls	3-31-11
2. John DuPont	N2819 LOT 27	☐ Town ☐ Village ☒ City MERRLL	3-31-11
3. Geraldine Bluechl	N2882 Alexander Lake	☒ Town ☐ Village ☐ City Harding Merrill	3/31/11
4. [illegible]	W807 MAJESTIC	☐ Town ☐ Village ☒ City Merrill	3/31/11
5. Susan Strauban	N2555 Balsam BLVD	☐ Town ☐ Village ☒ City Merrill	3/31/11
6. Chris Theeh	622 W Center Ave	☐ Town ☐ Village ☒ City Merrill	3-31-11
7. Gloria Sauer	101 N. Kyes St.	☐ Town ☐ Village ☒ City Merrill	3-31-11
8. Doug Elderton	N1498 St. Hwy 64 107	☐ Town ☐ Village ☒ City Merrill	3-31-11
9. Donald Wachtel	15702 ELMWOOD RD.	☐ Town ☒ Village ☐ City BUTTERNUT	3-31-11
10. Bernie Goettler	5819 Forest Lane Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	3-31-11

Certification of Circulator

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

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

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

3-31-11
(date)

(signature of circulator)

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1. Kathryn Young	215 Grand Ave., Merrill, Wis. #614	☐ Town ☐ Village ☒ City Merrill	3-31-11
2. John R. Kadlack	W24485 SAT Smith Dr	☐ Town ☐ Village ☒ City MERRILL	3-31-11
3. Robert Hautsan	W8789 HIGHLAND AVE Merrill WI 54452	☒ Town ☐ Village ☐ City CORNING	03-31-11
4. [illegible]	N3192 Cty Rd K Merrill, WI 54452	☒ Town ☐ Village ☐ City Merrill	3-31-11
5. Connie Raddenbach	W498S Fowler Dr Merrill Wi 54452	☒ Town ☐ Village ☐ City Merrill	3-31-11
6. Diane Doering	W660 Gleason [illegible]	☒ Town ☐ Village ☐ City Gleason	3-31-11
7. Katherine Krauss Dehmer	W3204 Center Rd Merrill, WI. 54452	☒ Town ☐ Village ☐ City Merrill	3-31-11
8. Julie Krueger	505 E 4th St Merrill WIS	☐ Town ☐ Village ☒ City Merrill	3-31-11
9. Donna J. Nichols	W2383 Attenburg Merrill WI	☒ Town ☐ Village ☐ City Schley	3-31-11
10. Nancy Wiegert	N7720 Fairmount Merrill, Wisc	☒ Town ☐ Village ☐ City Scott	3-31-11

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3-31-11
(date)

J Morales
(signature of circulator)

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1. Stephen Guanin	714 S Keenan St Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	3/31/11
2. Sarah Black	828 Arbutus St Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	3/31/11
3. Amy McCabe	11689 Hwy 8 W Crandon WI	☒ Town ☐ Village ☐ City Crandon	3/31/11
4. Rolly Eson	918 Market St Rhinelander WI	☒ Town ☐ Village ☐ City Rhinelander	3/31/11
5. Gary Yanowski	232 Spruce St	☒ Town ☐ Village ☒ City Rhinelander	3/31/11
6. [illegible]	6634 Shader Lk Rd Rhinelander WI	☒ Town ☐ Village ☐ City New Lond	3/31/11
7. Julie Burke	203 E. Kemp St Rhinelander	☒ Town ☐ Village ☒ City Rhinelander	3/31/11
8. Trisha Dallmann	2873 N. Pelican Lake Rd	☐ Town ☐ Village ☒ City Rhinelander	3-31-11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

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1 Duaine F Schaut	906 W. Fischer Lk Pkwy Niagara Wi. 54151	☐ Town ☒ Village ☐ City	/ /11
2 Frances O Schaut	906 W Fischer Lake Pkwy Niagara, WI 54151	☐ Town ☒ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, DUAINE F Schaut (name of circulator), certify:

I reside 906W Fischer LK PKWY, Niagara 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.

3-31-11 (date)

Duaine F Schaut (signature of circulator)

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1. Rollando Rodriguez	409 W WESCOTT C	☐ Town ☐ Village ☑ City Grandon	4/7/11
2.		☐ Town ☐ Village ☐ City	
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

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4-7-11
(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
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1.	6809 Deer Trail Deer Trail	☒ Town Presque Isle WI ☐ Village ☐ City	4-12-11
2.	9228 High Pines Cw	☒ Town Boulder Jct ☐ Village ☐ City	4/12/11
3.	7014 BEAR TRAIL PRESQUE	☒ Town PRESQUE ISLE ☐ Village ☐ City	4-12-11
4.	7769 RUSTIC ROAD	☒ Town PRESQUE ISLE ☐ Village ☐ City	4-12-11
5.	7070 Gemstone	☒ Town Presque Isle ☐ Village ☐ City	4/12/11
6.	7160 Bear Trail	☒ Town Presque Isle ☐ Village ☐ City	4/12/11
7.	8469 Pink Dr. 8469 Dr Pink	☒ Town Minocqua ☐ Village ☐ City	4.12.11
8.	W6250 St Hwy 182 Park Falls Park Falls	☒ Town PARK FALLS ☐ Village Park Falls ☐ City	4/12/11
9.	11365 Carol Dr Arbor Vitae	☒ Town Arbor Vitae ☐ Village ☐ City	4/12/11
10.	Took you	☐ Town ☐ Village ☐ City	

Certification of Circulator

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4-12-11
(date)

(signature of circulator)

Page No. 606

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Donna Knek	W16372 CTY HWY Q Wittenberg WI 54499	☒ Town ☐ Village ☐ City Almon	3/29/11
2. Marcia Knek	W16372 CTY HWY Q Wittenberg WI 54499	☒ Town ☐ Village ☐ City Almon	3/29/11
3. Becky Herb	N7555 COUNTY HWY Q Wittenberg WI 54499	☒ Town ☐ Village ☐ City Almon	4/1/11
4. Esther S Boreen	N6852 Robin Rd Wittenberg WI 54499	☒ Town ☐ Village ☐ City Wittenberg	4/1/11
5. Kathryn Bartelme	N6516 Robin RD Wittenberg WI 54499	☒ Town ☐ Village ☐ City Wittenberg	4/1/11
6. Lee Bedwitz	N5682 US Hy 45 Tigerton WIS 54446	☒ Town ☐ Village ☐ City Wittenberg	4/1/11
7. Linda Ladwig	P.O. Box 87 Wittenberg, WIS 54499	☒ Town ☐ Village ☐ City Wittenberg	4/1/11
8. Sherry Onesto	W15423 HILLTOP Rd WITTENBERG WI 54499	☒ Town ☐ Village ☐ City ALMON	4/1/11
9. Jerry J Onesto	W15423 HILLTOP Rd WITTENBERG WI 54499	☒ Town ☐ Village ☐ City ALMON	4/1/11
10. Dan Knek	308 EAST GRAND AV WITTENBERG WI 54499	☐ Town ☒ Village ☐ City Wittenberg	4/4/11

Certification of Circulator

I, Marcia Knek, certify:
(name of circulator)

I reside W16372 CTY HWY Q Wittenberg WI Town of Almon.
(circulator's residence - include number, street, and municipality)

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

April 4, 2011
(date)

Marcia Knek
(signature of circulator)

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1. Martin Strandberg	W13336 County C Gleason WI 54435	☐ Town ☐ Village ☑ City Gleason	4/14/11
2. Robin Webb	2214 Lk Nokomis Rd	☐ Town ☐ Village ☑ City Tomahawk	4/14/11
3. [illegible]	610 Southgate Drive	☐ Town ☐ Village ☑ City Tomahawk	4-14-11
4. [illegible]	914 Chauvenet Ave	☐ Town ☐ Village ☑ City Tomahawk	4/14/11
5. Kathleen Wynn	731 E. King Rd	☐ Town ☐ Village ☑ City Tomahawk	4-14-11
6. Bert W. Wynn	731 E. Kings Rd	☐ Town ☐ Village ☑ City Tomahawk	4-14-11
7. Jenny Derleth	N8824 New Wood K	☐ Town ☐ Village ☑ City Tomahawk	4-14-11
8. Keely Coffman	5 1/2 E Somo Ave	☐ Town ☐ Village ☑ City Tomahawk	4-14-11
9. [illegible]	N8894 Hwy B	☐ Town ☐ Village ☑ City Gleason	4-14-11
10. James Whipple	W7196 Loop Rd	☑ Town ☐ Village ☐ City Tomahawk	4-14-11

Certification of Circulator

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

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4-14-11
(date)

(signature of circulator)

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1. Carol LaPuma	3167 HILLANDALE	☐ Town ☐ Village ☒ City RHINELANDER	4-10-11 ~~3-30-11~~ BAP
2. Kris Rogers	10337 BIG ARBOR VITAE DR	☒ Town ☐ Village ☐ City ARBOR VITAE	4/11/11
3. Cheryl Rogers	7012 EAST 7	☒ Town ☐ Village ☐ City Three Lakes	4/11/11
4. [illegible]	11831 Kobart Rd	☒ Town ☐ Village ☐ City Minocqua	4/11/11
5. John Habrovich	9853 Bolger Lk Rd Bolger Lake Rd	☒ Town ☐ Village ☐ City minocqua	4/11/11
6. Mark M. [illegible]	W11633 Enterprise Lake Rd	☒ Town ☐ Village ☐ City Elcho	4-11-11
7. Tom Wanta	5874 Airport	☒ Town ☐ Village ☐ City Boulder Jct	4-11-11
8. [illegible]	5558 Wood Lake	☒ Town ☐ Village ☐ City Boulder Jct	4-11-11
9. Nick Nissen	5885 Airport Rd	☒ Town ☐ Village ☐ City Boulder Junction	4/12/11
10. David E. Potts	8347 Blue Heron	☒ Town ☐ Village ☐ City Presque Isle	4/12/11

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1. Judith C. Wengel	5180 Dunns Point Road Florence, WI 54121	☒ Town ☐ Village ☐ City Florence	4/2/11
2. David F. Wengel	5180 Dunns Point Florence WI 54121	☐ Town ☐ Village ☐ City Florence	4/2/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Judith C. Wengel, certify:
(name of circulator)

I reside 5180 Dunns Point Road, Florence, Wisconsin 54121 Florence County
(circulator's residence - include number, street, and municipality)

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

April 3, 2011
(date)

Judith C. Wengel
(signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Earl C Newton	2740 Hwy 45 N	☐ Town ☐ Village ■ City CONOVER Eagle River, WI	3-18-11
2. Valerie Newton	2740 Hwy. 45 N	☐ Town ☐ Village ☒ City CONOVER Eagle River, WI.	3-18-11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

reside at 1040 Fox Lane, Eagle River, WI 54521 CONOVER (circulator's residence - include number, street, and municipality).

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

Dawn M. Brogle (signature of circulator)

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

Page No. 611

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James Oberry	9578 Hwy K Tomahawk, WI 54487	☒ Town ☐ Village ☐ City Cassian	2-26-11
2. Jim Apt	4002 Harshaw Rd Harshaw WI 54529	☒ Town ☐ Village ☐ City Cassian	2-26-11
3. Linda Conklin	2796 Prairie Lake Rd Tomahawk, WI 54487	☒ Town ☐ Village ☐ City Nokomis	2-26-11
4. Lamonte Henry	9578 Hwy K Tomahawk, Wisc.	☒ Town ☐ Village ☐ City Cassian	2-26-11
5. Janet K. Henry	9578 Hwy K Tomahawk WI 54487	☒ Town ☐ Village ☐ City Cassian	2-26-11
6. Kent A. [illegible]	8471 N Oneida Lake Dr Harshaw WI 54529	☒ Town ☐ Village ☐ City Woodboro	2-26-11
7. Mike Rauch	10360 Rocky Run Rd Harshaw WI 54529	☒ Town ☐ Village ☐ City Cassian	2-26-11
8. SHAWN RADTKE	9134 Rocky Run Rd HARSHAW WI	☐ Town ☐ Village ☐ City Cassian	2-27-11
9. Gary Stelter GARY Stelter	10160 N. Pine Square Rd. Tomahawk WI 54487	☒ Town ☐ Village ☐ City CASSIAN	2/27/11
10. Paul F. Mueller	3730 O'Day Lake Rd Harshaw WI 54529	☒ Town ☐ Village ☐ City CASSIAN	2/27/11

Certification of Circulator

I, GARY BAIER, certify:
(name of circulator)

I reside at 9378 NORWAY LANE TOMAHAWK, WI 54487 TOWN OF NOKOMIS.
(circulator's residence - include number, street, and municipality)

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

2/27/11
(date)

Gary Baier
(signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Carl Adkins	N8528 Iroquois Crivitz 54114	☒ Town ☐ Village ☐ City Stephenson	3/3/11
2. Helen A Collins	W10345 City W. Crivitz, Wi.	☒ Town ☐ Village ☐ City Stephenson	3-3-11
3. THOMAS L. COLLINS	W10345 CTY RD W CRIVITZ, WI	☒ Town ☐ Village ☐ City STEPHENSON	3-3-11
4.	W10457 CTY W CRIVITZ WI	☒ Town ☐ Village ☐ City STEPHENSON	3-3-11
5. Cindy Klukas	W8308 CTY RD P Crivitz WI 54114	☒ Town ☐ Village ☐ City Beaver	3-3-11
6. Vicki L Hoff	W6636 Judy St. WAUSAUKEE, WI 54177	☒ Town ☐ Village ☐ City WAUSAUKEE	3/3/2011
7. J T May	3037 Business Hi Pound, WI 54161	☐ Town ☒ Village ☐ City Pound	3/3/11
8. Lori Henry	N7770 St Paul Rd Crivitz WI 54114	☒ Town ☐ Village ☐ City Stephenson	3/3/11
9. Nancy [illegible]	N8764 Caldron Falls Rd Crivitz, WI 54114	☒ Town ☐ Village ☐ City Stephenson	3-3-11
10. Michael R Jacob	W6740 WOJDICKA WAUSAUKEE WI 54177	☒ Town ☐ Village ☐ City WAUSAUKEE	3-3-11

Certification of Circulator

I, Carl Adkins (name of circulator), certify:

I reside N8528 Iroquois Dr Crivitz 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.

4-14-11
(date)

(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Jerry Eddinger TTEE	c/o non-dom. 7640 Red Fox Run; near Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Woodboro	3/1/11
2. Jonathan L King TTEE	c/o non-domestic 7640 Red Fox Run near Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Woodboro	3/1/11
3. Mike Ladvron	1006 Hwy G Pelican Lake WI 54463	☑ Town ☐ Village ☐ City Enterprise	3/1/11
4. Sharon Nelson	851 Woodland Dr. Rhinelander, Wi.	☑ Town ☐ Village ☒ City Rhinelander	3/2/11
5. Jerome Nelson	851 Woodland Dr. Rhinelander, WI	☐ Town ☐ Village ☒ City Rhinelander	3/2/11
6. Joel Halminiak	606 Mason St. Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	3/2/11
7. Marcia Schneider	615 Dorr Ave Rhinelander WI 54501	☐ Town ☐ Village ☒ City Rhinelander	3-2-11
8. Ferdinand Schneider	615 Dorr Ave Rhinelander Wi 54501	☐ Town ☐ Village ☒ City RHINELANDER	3-2-11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Jonnathan P. King, certify:
(name of circulator)

I reside 7608 Red Fox Run, Rhinelander, WI 54501 Town of Woodboro
(circulator's residence - include number, street, and municipality)

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

3-9-2011
(date)

(signature of circulator)

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

Page No. 614

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Glenn Mott	W 4945 Echo Pt. Tomahawk, WI	☐ ~~Town~~ ☐ Village ☐ City BRADLEY	2/28/11
2. Linda Mott	W4945 Echo Point Tomahawk, WI	☐ ~~Town~~ ☐ Village ☐ City Bradley	2/28/11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, GLENN MOTT (name of circulator), certify:

I reside W 4945 ECHO POINT TOMAHAWK WI 54487.
(circulator's residence - include number, street, and municipality)

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

2/28/11
(date)

Glenn Mott
(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	213 9th Ave Antigo, WI 54409	☒ Town ☐ Village ☐ City Antigo	4-9-11
2. [illegible]	213 9th Ave Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	4-9-11
3. [illegible]	N5450 Hwy 13 Deerbrook WI	☒ Town ☐ Village ☐ City Deerbrook	4-9-11
4. [illegible]	241 S. Park St. Antigo, WI	☐ Town ☐ Village ☒ City Antigo	4/9/11
5. Karen Bonfleth	W9640 Hwy 64 Antigo, WI 54409	☒ Town ☐ Village ☐ City Antigo	4-9-11
6. [illegible]	Bryant, WI	☐ Town ☐ Village ☒ City Antigo	4-9-11
7. Karen Shostak		☐ Town ☐ Village ☒ City Antigo	4-9-11
8. Edith Anderson	437 Hudson St Antigo	☐ Town ☐ Village ☒ City Antigo	4-9-11
9. [illegible]	810 Sunset Antigo	☒ Town ☐ Village ☐ City Antigo	4-9-11
10. Cheryl Spence	N6021 Ramsdale Prairie Rd Bryant, WI	☒ Town ☐ Village ☐ City Bryant, WI	4-9-11

Certification of Circulator

I, Mark Vigil (name of circulator), certify:

I reside 4620 W. Cedar ave. Denver Colorado 80219
(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]
(signature of circulator)

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

Page No. 616

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Brandon Rhode	719 Birch St.	☐ Town ☐ Village ☒ City Antigo WI	4-8-11
2. James Pugisi	1130 5th Ave	☐ Town ☐ Village ☐ City Antigo WI	4-8-11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Mark Vigil (name of circulator), certify:

I reside 4620 W. Cedar ave Denver Colorado 80219
(circulator's residence - include number, street, and municipality)

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

4-8-11
(date)

Mark V
(signature of circulator)

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

Page No. 617

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James [illegible]	453 South Dart St	☐ Town ☐ Village ☒ City Antigo	4/8/11
2. Emily Smith	1124 Clermont St	☐ Town ☐ Village ☒ City Antigo	4/8/11
3. Ashley [illegible]	627 N Ave Apt 8	☐ Town ☐ Village ☒ City Antigo	4/8/11
4. Glen Doehring	1022 4th ave Antigo Wi	☐ Town ☐ Village ☒ City Antigo	4/8/11
5. Jon Doehring	1022 4th Ave	☐ Town ☐ Village ☒ City Antigo	4/8/11
6. Susan [illegible]	1005 First Ave Antigo WI	☐ Town ☐ Village ☒ City Antigo	4/8/11
7. Landon Now	1007-1009 5th Ave	☐ Town ☐ Village ☒ City Antigo	4/8/11
8. Beverly Ellwart	1032 3rd Ave Antigo	☐ Town ☐ Village ☒ City Antigo	4/8/11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Mark Vigil, certify:
(name of circulator)

I reside 4620 W. Cedar ave. Denver Colorado 80219.
(circulator's residence - include number, street, and municipality)

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

4-8-11
(date)

Mark V
(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Marguerite L. Stevens	116 N. GENNESEE ST APT. MERRILL	☐ Town ☐ Village ☒ City MERRILL	4-12-11
2. Patricia Karbowski	2000 East Main #152 Merrill Wi	☐ Town ☐ Village ☒ City Merrill	4-12-11
3. Lorraine Muschinske	N-3666 Center Rd. Merrill, WI	☐ Town ☐ Village ☐ City Merrill	4-12-11
4. Gerald Muschinske	Merrill WI N 3666 Center Rd	☐ Town ✓ Village ☐ City Merrill	4-12-11
5. Stephanie Hoffer	911 E 7th St. Merrill, WI	☐ Town ☐ Village ☒ City Merrill	4-12-11
6. Jake Walker	610 South State St Merrill	☐ Town ☐ Village ☒ City Merrill	4-12-11
7. Matt Schmitt	N5101 Hwy 107 Merrill WI 54452	☐ Town ☐ Village ☐ City Corning	4-12-11
8. Jeffery B. King	W4129 City Rd F Antigo Wi 54409	☒ Town ☐ Village ☐ City Antigo	4-12-11
9. Sharon Prentice	W6801 Sunset Dr merrill WI	☒ Town ☐ Village ☐ City Scott Merrill	4/12/11
10. Debra McGregor	N2822 Hwy. 107 Merrill, WI	☐ Town ☐ Village ☐ City Merrill	4/12/11

Certification of Circulator

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

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

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

4-15-11
(date)

(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or line no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Diane M Plant	W4385 Eagle Ridge Merrill, WI 54452	☒ Town ☐ Village ☐ City Pine River	4/12/11
2. [illegible]	W6031 THE CLEARING MERRILL, WI 54452	☒ Town ☐ Village ☐ City MERRILL	04/12/11
3. [illegible]	R2343 CENDR MERRILL WI 54452	☒ Town ☐ Village ☐ City MERRILL	4/12/11
4. Stan Smith	603 [illegible]	☐ Town ☐ Village ☒ City Merrill	4/12/11
5. DAVE HOERNIKE	N2733 107 N. MERRILL	☒ Town ☐ Village ☐ City MERRILL	4/12-11
6. Ruth Wiedner	W6501 Wayside Morrison	☒ Town ☐ Village ☐ City Morrison	4/12-11
7. Cathy Dornbach	W4659 Croft Dr MERRILL	☒ Town ☐ Village ☐ City Scott	4/12/11
8. Harold Tyson	1000 CLEVELAND MERRILL	☐ Town ☐ Village ☒ City MERRILL	4/12/11
9. Marla B Rafik	314 Lake St Merrill WI	☐ Town ☐ Village ☒ City MERRILL	4-12-11
10. Arlyn Schade Jr	430 2nd St. Merrill, WI. 54452	☐ Town ☐ Village ☒ City Merrill	4-12-11

Certification of Circulator

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

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

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

4-15-11
(date)

(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Ronald Krueger	4334 Chain O Lakes ~~Road~~ Eagle River	☒ Town ☐ Village ☐ City Washington	2/28/11
2. Clarence Pezold	1907 Eagle Park Lane Eagle River, WI 54521	☒ Town ☐ Village ☐ City Washington	2/28/11
3. Janelle Wise	6082 Hwy G Eagle River WI 54521	☒ Town ☐ Village ☐ City Cloverland	2/28/11
4. Jeff Cwaska	6082 Hwy G Eagle River WI 54521	☒ Town ☐ Village ☐ City Clover Land	2-28-11
5. Mike Greenman	8141 Peters Rd Eagle River WI 54521	☒ Town ☐ Village ☐ City Three Lakes	2-28-11
6. Karen Wiedenbauer	8141 Peters Rd Eagle River WI 54521	☒ Town ☐ Village ☐ City Three Lakes	2-28-11
7. Jos Walter	9975 Rice Ln Eagle River WI 54521	☒ Town ☐ Village ☐ City Cloverland	2-28-11
8. Karen Wiedemeier	8833 Happiness Drive St. Germain WI 54558	☒ Town ☐ Village ☐ City Newbold	2-28-11
9. Kenneth Jensen	4330 Chain O Lakes Rd Eagle River	☐ Town ☐ Village ☐ City Washington	2-28-11
10. Mary A Krueger	4334 Chain O Lakes Rd Eagle River, WI 54521	☒ Town ☐ Village ☐ City Washington	2-28-11

Certification of Circulator

I, Ronald Krueger (name of circulator), certify: TWN WASHINGTON

I reside 4334 Chain O Lakes Rd. Eagle River, Wisconsin
(circulator's residence - include number, street, and municipality)

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

2/28/11 (date)

Ronald Krueger (signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Susan Brown	N9324 Cty Rd DD Pelkie WI 54465	☑ Town ☐ Village ☐ City Langlade	2/25/11
2. Tanya Baker	4889 County H Laona, WI 54541	☑ Town ☐ Village ☐ City Laona	2/25/11
3. [illegible]	5605 Corning Rd Crandon WI	☐ Town ☐ Village ☑ City Crandon	2/25/11
4. [illegible]	5605 Corning Rd Crandon WI 54520	☐ Town ☐ Village ☑ City Crandon	2/25/11
5. Angela Reflaff	303 E Roosevelt St Crandon WI 54520	☐ Town ☐ Village ☑ City Crandon	2/25/11
6. [illegible]	5950 Canadian View Ln Crandon, WI 54520	☐ Town ☐ Village ☐ City Crandon	2/25/11
7. [illegible]	604 S Park Ave Crandon, WI 54520	☐ Town ☐ Village ☑ City Crandon	2/25/11
8. June Erickson	W6612 Thiel Rd Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Harrison	2/27/11
9. Alicia Erickson	W6620 Thiel Rd Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Harrison	2/27/11
10. Rebekah Drescher	704 S Forest Ave Crandon WI 54520	☐ Town ☐ Village ☑ City Crandon	2/27/11

Certification of Circulator

I, Rebekah Drescher (name of circulator), certify:

I reside 704 S Forest Ave, Crandon, WI 54520 Crandon
(circulator's residence - include number, street, and municipality)

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

2-27-11
(date)

Rebekah Drescher
(signature of circulator)

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

RECALL PETITION

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

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

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

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

STATEMENT OF REASON FOR RECALL

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

AWOL!

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Randy Schoepke	W2457 Prairie Dr	☒ Town ☐ Village ☐ City Schley	2-26-11
2. Albert K Wolen	N4860 Hwy 17	☒ Town ☐ Village ☐ City Schley	2/26/11
3. Hermit Montabon	N1358 Prairie Pines Dr Gleason, WI 54435	☒ Town ☐ Village ☐ City Russell	2/26/11
4. Alberta Montabon	N1358 Prairie Pines Dr Gleason, WI 54435	☒ Town ☐ Village ☐ City Russell	2/26/11
5. Caleb R. Peckham	W1110 Echo Lake Rd. Gleason WI 54435	☒ Town ☐ Village ☐ City Russell	2-26-11
6. Billie Tritten	N5315 Bradley St Gleason WI 54435	☒ Town ☐ Village ☐ City Russell	2-26-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

WILLIAM R. MONTABON, certify:
(name of circulator)

reside at W1345 Prairie Pines Drive, Gleason, WI 54435 TWN RUSSEL
(circulator's residence - include number, street, and municipality)

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

2-26-11
(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.)

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. David Brostowitz	7525 S. AGAWAK RD.	☑ Town ☐ Village ☐ City MINOCQUA	2-27-11
2. Bonnie Brostowitz	7525 S. Agawak Rd.	☑ Town ☐ Village ☐ City MINOCQUA	2-27-11
3. Steven Brostowitz	9872 BUCKHORN RD	☑ Town ☐ Village ☐ City TOMAHAWK	2-27-11
4. David Brostowitz	9872 Buckhorn RD	☑ Town ☐ Village ☐ City Tomahawk	2-27-11
5. [illegible]	9872 Buckhorn Rd	☑ Town ☐ Village ☐ City Tomahawk	2-27-11
6. [illegible]	5276 PRAIRIE LAKE RD	☑ Town ☐ Village ☐ City TOMAHAWK	2-27-11
7. Vicki Carlstrom	PO Box 16	☑ Town ☐ Village ☐ City Tomahawk	2-27-11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, DAVID BROSTOWITZ, certify:
(name of circulator)

I reside 7525 S. AGAWAK Rd. TWN. MINOCQUA.
(circulator's residence - include number, street, and municipality)

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

2-28-11 (date) David D. Brostowitz (signature of circulator)

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Page No. # 624

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Doris Morris	815 Messer St	☐ Town ☐ Village ☒ City Rhinelander	3-29-11
2. Karolyn Massey	N11476 Hills Lake Rd	☒ Town ☐ Village ☐ City Harrison	3/30/11
3. Richard Colburn	228 JOHNSON ST	☒ Town ☐ Village ☒ City RHINELANDER	3/30/11
4. [illegible]	6089 Redpine Dr	☒ Town ☐ Village ☐ City Newbold	3/30/11
5. [illegible]	6744 Eskile Dr	☐ Town ☐ Village ☐ City Newbold	3/30/11
6. Jacalee Mo	805 Timber Dr	☒ Town ☐ Village ☐ City Rhinelander	3/30/11
7. Rose Marie Welch	N9956 Gouda Rd	☒ Town ☐ Village ☐ City Harrison	3/30/11
8. Taylyn Toure	1307 Tracy St	☒ Town ☐ Village ☐ City Rhinelander	3/30/11
9. Chris Mueller	3119 City Hwy N	☒ Town ☐ Village ☐ City Crescent	3/30/11
10. Diana Kiley	1125 Woodlander	☐ Town ☐ Village ☒ City Rhinelander	3/30/11

Certification of Circulator

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

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

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

3-30-11
(date)

(signature of circulator)

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RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	110 N 3RD ST TOMAHAWK WI 54487	☒ Town ☐ Village ☐ City TOMAHAWK	4-14-11
2. [illegible]	224 S 2nd St	☐ Town ☐ Village ☒ City TOMAHAWK	4-14-11
3. [illegible]	18 W Lincoln Ave	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
4. Carey Herkenen	PO Box 504 Tomahawk, WI 54487	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
5. Donald Waring	118 W TOMAHAWK AVE	☐ Town ☐ Village ☒ City TOMAHAWK	4-14-11
6. [illegible]	1016 E. Somo Ave	☒ Town ☐ Village ☒ City Tomahawk	4-14-11
7. [illegible]	417 E Washington	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
8. Ashley Rowsey	121 1/2 W. Sprice Ave	☐ Town ☐ Village ☒ City Tomahawk	4/14/11
9. Kellie Snow	722 North Brown St Rhinelander	☒ Town ☐ Village ☐ City Rhinelander	4/14/11
10. Melissa Streich	887 Lost Lake Rd. Eagle River WI 54521	☒ Town ☐ Village ☐ City EAGLE RIVER	4/14/11

Certification of Circulator

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

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

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

4/14/11
(date)

Sherri E. Ferrell
(signature of circulator)

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

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Daniella Pulinus	W2783 Cheif Littlewave	☐ Town ☐ Village ☒ City Keshena	4-12-11
2. Rebecca Robinson	W2688 Cheif Josette	☐ Town ☐ Village ☒ City Keshena	4-12-11
3. [illegible]	1235 S Superior	☐ Town ☐ Village ☒ City Antigo	4-12-11
4. Indu Patel Indu	1235 S. Superior	☐ Town ☐ Village ☒ City Antigo	4/12/11
5. Bharti Patel Bharti	1233 S. Superior	☐ Town ☐ Village ☒ City Antigo	4/12/11
6. Dhuya Patel	1235 South Superior street	☐ Town ☐ Village ☒ City Antigo	4/12/11
7. Jennifer Hines	N4382 Hwy 55	☐ Town ☐ Village ☒ City Pickerel	4/12/11
8. [illegible]	4378 Cty RG	☒ Town ☐ Village ☐ City Harrison	4/12/11
9. [illegible]	N7485 Maple Rd	☒ Town ☐ Village ☐ City Rolling	4/12/11
10. [illegible]	N3769 Clover Rd Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	4/12/11

Certification of Circulator

I SHERRI FERRELL, certify:
(name of circulator)

Residence 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 13(3)(a), Wis. Stats.

4/12/11
(date)

Sherri E Ferrell
(signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	3605 Pert Avenue Rhinelander WI 54501	☐ Town ☐ Village ☒ City RHINELANDER	4/1/2011
2. Nick Allen	214 Conro St Rhinelander WI 54501	☐ Town ☐ Village ☒ City RHINELANDER	4-1-11
3. Heather Dennis	205 Stepping Stone Ln Manitowish Waters WI 54545	☒ Town WATERS ☐ Village ☐ City MANITOWISH	4-1-11
4. [illegible]	3187 Indian Settlement Rd Crandon WI 54520	☒ Town Nashville ☐ Village Crandon ☐ City	4/1/11
5. Loretta Dietzler	354 Hwy 55 Apt 7 Crandon WI 54520	☒ Town Nashville ☐ Village Crandon ☐ City	4/1/11
6. [illegible]	W10505 Sunset Rd. ELCHO, WI. 54428	☒ Town ELCHO ☐ Village WIS. ☐ City	4/1/11
7. Timothy J. Edman	4032 Fox Farm Ln Rhinelander	☒ Town Newbold ☐ Village ☐ City	4/1/11
8. James [illegible]	[illegible] Butternut Mercer	☐ Town ☐ Village ☐ City NEWBOLD	4-1-11
9. Patty Curtis	18 Lakemore Parkway Rhinelander, Wisc.	☒ Town ☐ Village ☐ City Steele	4/1/11
10. Ken Freague	Rhinelander WI 525 Lake Vaughn	☐ Town ☐ Village ☒ City RHINELANDER	4-1-11

Certification of Circulator

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

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

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

4/1/11
(date)

Sherri E. Ferrell
(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Deborah Nicholson	11698 Sumach Lake Rd Arbor Vitae, WI 54568	☒ Town ☐ Village ☐ City Arbor Vitae	3/30/11
2. Jennifer [illegible]	N3190S. Enel Rd Merrill WI 54452	☒ Town ☐ Village ☐ City Merrill	3/30/11
3. Krista Zelinski	W5833 Hillside Dr Merrill WI 54452	☒ Town ☐ Village ☐ City Merrill	3/30/11
4. Charlie Doskocil	1508 W. Main St. Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	3-30-11
5. Judith Maas	N5221 Cty Hwy J Gleason, WI 54435	☐ Town ☒ Village ☐ City Gleason	3-30-11
6. Robin ALLBEE	1005 E. 8th merrill wi 54452	☐ Town ☐ Village ☒ City merrill	3-30-11
7. [illegible]	608 W. Riverside AVE merrill WI 54452	☐ Town ☐ Village ☒ City merrill	3-30-11
8. [illegible]	807 Cedar Ste merrill WI 54452	☐ Town ☐ Village ☒ City merrill	3-30-11
9. Lindsay Malpass	W4449 Pope Rd Merrill, WI 54452	☒ Town ☐ Village ☐ City Merrill	3/30/11
10. Ginger Belopaw	W4465 Pope Rd Merrill WI 54452	☒ Town ☐ Village ☐ City Merrill	3/30/11

Certification of Circulator

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

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

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

4-1-11
(date)

Duane Schumacher
(signature of circulator)

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RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Phil Russell	N2398 Pier St Merrill WI 54452	☒ Town ☐ Village ☐ City Merrill	3/30/11
2. Jerome Calstein	906 E 8th St ~~Merrill~~ Merrill 54452	☐ Town ☐ Village ☒ City Merrill	3/30/11
3. Eric Weber	W5096 Riverview Road Merrill, WI 54452	~~☒~~ Town ☐ Village ~~☐ City~~ Merrill	3/30/11
4. [illegible]	W1756 Hwy 64 Merrill, WI 54452	☒ Town ☐ Village ☐ City Merrill	3-30-11
5. [illegible]	W9560 Cranberry Trl. Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	3/30/11
6. Hope Wolff	W1589 Cty Rd C Merrill, WI 54452	☒ Town ☐ Village ☐ City Schley	3/30/11
7. Hayley Berrett	N5297 Hwy 17 Gleason WI 54435	☒ Town ☐ Village ☐ City Russell	3/30/11
8. Jerry Strawin	1602 Cotter Ave Merrill WI 54452	☐ Town ☐ Village ☒ City Merrill	3/30/11
9. Marsha Henriet	602 Hollywood Dr. Merrill WI 54452	☐ Town ☐ Village ☒ City Merrill	3/30/11
10. Sherry Schwartz	402 Liberty St Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	3-30-11

Certification of Circulator

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

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

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4-1-11
(date)

Duane Schumacher
(signature of circulator)

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RECALL PETITION

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

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STATEMENT OF REASON FOR RECALL

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1.	713 E 2nd St Apt 201 Merrill 54452	☐ Town ☐ Village ☑ City Merrill	3-30-11
2.	W4178 HWY 8 Irma WI 54442	☑ Town ☐ Village ☐ City Birch	3-30-11
3.	Tomahawk, WI 54487 215 Pleasant Ave	☐ Town ☐ Village ☑ City Tomahawk	3-30-1
4.	2205 River St Merrill 54452	☐ Town ☐ Village ☑ City Merrill	3-30-11
5.	N2406 Hwy 17 54452 Merrill	☐ Town ☐ Village ☑ City Merrill	3-30-11
6.	509 E 4th St MERRILL WI 54452	☑ Town ☐ Village ☐ City MERRILL	3-30-11
7.	600 Hollywood Dr #4 Merrill WI 54452	☐ Town ☐ Village ☑ City Merrill	3-30-11
8.	16 W Harvey St Rhinelander, WI 54501	☐ Town ☐ Village ☑ City Rhinelander	3-30-11
9.	W4610 Cty Hwy 6 merrill, WI 54452	☑ Town ☐ Village ☐ City merrill	3-30-11
10.	1200 Lake St. Merrill, WI 54452	☐ Town ☐ Village ☑ City Merrill	3/30/11

Certification of Circulator

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

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

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4-1-11
(date)

Duane Schumacher
(signature of circulator)

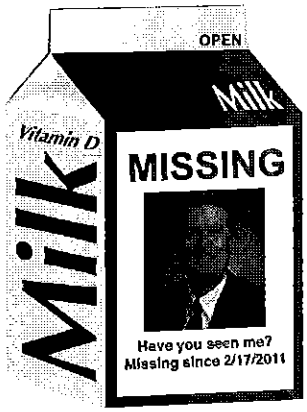
RECALL PETITION

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 12th Senate District,
(jurisdiction or district of officeholder)

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

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



STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Linda M Kasper	1939 Harmony Lake Rd Eagle River WI 54521	☒ Town ☐ Village ☐ City Washington Township	4/7/11
2. Patrick R Langlois	4347 W Lake George Rd Rhinelander WI 54501	☒ Town ☐ Village ☐ City Pelican	4/7/11
3. Jeff [illegible]	3787 McLaughlin Dr Rhinelander WI 54501	☒ Town ☐ Village ☐ City Newbold	4/7/11
4. Charlotte Eggers	1313 Eagle St Rhinelander, WI	☐ Town ☐ Village ☒ City Rhinelander	4/7/11
5. Colin Brooks	7546 Birch Tree Dr Eagle River WI 54521	☒ Town ☐ Village ☐ City Sugar Camp	4/8/11
6. Francine Brooks	7546 Birch Tree Dr Eagle River WI 54521	☒ Town ☐ Village ☐ City Sugar Camp	4/8/11
7. Larry Slayton	3853 E Pine Sa Rd Tomahawk WI 54487	☒ Town ☐ Village ☐ City Cassian	4/8/11
8. Rick Richardson	3125 Hay Meadow Rd Rhinelander, WIS	☒ Town ☐ Village ☐ City Pelican	4/8/11
9. [illegible]	4130 N. Shore Dr. Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Pelican	4/8/11
10. Dave Sullivan	4476 Cross Country Rhinelander WI 54501	☒ Town ☐ Village ☐ City Pine	4/9/11

Certification of Circulator

I, PETER BIOLO, certify:
(name of circulator)

I reside at 401 IVERSON ST. RHINELANDER, WI. 54501.
(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.

4-9-11
(date)

Peter Biolo
(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. 632

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

RECALL PETITION

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	4126 Birch Point Lane Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Newbold	4-6-11
2. Sarah [illegible]	4375 Stella Lake Rd Rhinelander WI 54501	☑ Town ☐ Village ☐ City Stella	4-6-11
3. Randall Newton	Rhinelander WI 54501 4632-21 Y. Bass Rd	☐ Town ☐ Village ☐ City Sugar Camp	4-6-11
4. Patrine M Murray	4823 Echo Ridge Dr Eagle River, WI 54521	☑ Town ☐ Village ☐ City Sugar Camp	4-6-11
5. Ryan Hanisch	3143 Wild Flower Bay Rd. Rhinelander	☑ Town ☐ Village ☐ City Pelican	4-6-11
6. Jere Slaughter	903 Coon St. Rhinelander	☐ Town ☐ Village ☑ City Rhinelander	4-6-11
7. Donald Zeuhlke	4777 Silent Shores Rhinelander	☑ Town ☐ Village ☐ City Sugar Camp	4-6-11
8. Brian Wendt	5378 Newman Drive Rhinelander, WI 54501	☑ Town ☐ Village ☐ City Pelican	4-6-11
9. Sherry Lavery	2435 Chapleau Rhinelander	☑ Town Woodboro ☐ Village ☐ City	4-6-11
10. Philip W. Keller	627A RAILROAD ST RHINELANDER	☐ Town ☐ Village ☑ City RHINELANDER	4-6-11

Certification of Circulator

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

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

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

4-8-11
(date)

(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Scott L. Yorkey	4521 Hoover Hill Oneida Co	☐ Town ☐ Village ☐ City Minocqua Twp	4-6-11
2. Amy Esswein	523 Cedar St Woodruff, WI	☒ Town ☐ Village ☐ City Woodruff	4-6-11
3. Rick Vanny	4090 Hillside Ct Rhinelander WI	☒ Town ☐ Village ☐ City Newbold	4-6-11
4. DEBORAH FARRELL	10950 Chippewa Forest Rd. Arbor Vitae WI. 54568	☒ Town ☐ Village ☐ City ARBOR VITAE	4-6-11
5. Rick Wiese	Hazelhurst WI 54531 Hwy 51 S. #6221	☒ Town ☐ Village ☐ City Hazelhurst	4-6-11
6. MICHAEL GALASZEWSKI	11308 COUNTRY LANE ARBOR VITAE	☒ Town ☐ Village ☐ City ARBOR VITAE	4-6-11
7. Sharon A. Semling	W4459 Birch Hill Lane Merrill WI 54452	☐ Town ☐ Village ☐ City Pine River TWP	4-6-11
8. George Berg	1255 Bodilac Rd. Land O' Lakes WI	☒ Town ☐ Village ☐ City LDF TWP	4-6-11
9. JACK DUNBAR	3028 Heron Rd Lake Tomahawk WI	☒ Town ☐ Village ☐ City Lake Tomahawk	4-6-11
10. DIANA KAMPER	315 3rd Ave Woodruff WI 54568	☒ Town ☐ Village ☐ City WOODRUFF	4-6-11

Certification of Circulator

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

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

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4-8-11
(date)

(signature of circulator)

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Page No. 634

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TO: Wisconsin Government Accountability Board
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Suzanne Bell	18479 Log Cabin La Townsend, WI 54175	☒ Town ☐ Village ☐ City Townsend	3/7/11
2. Roger C Bell	18479 Log Cabin La Townsend, WI 54175	☒ Town ☐ Village ☐ City Townsend	3/7/11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Suzanne Bell (name of circulator), certify:

I reside 18479 Log Cabin La, Townsend WI 54175
(circulator's residence - include number, street, and municipality)

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

3-8-2011
(date)

Suzanne Bell
(signature of circulator)

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Page No. 0635

RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James B. Flannery	405 Wescott CRANDON WI.	☐ Town ☐ Village ☒ City CRANDON	2-28-2011
2. Janice Flannery	405 Wescott Av Crandon Wi	☐ Town ☐ Village ☒ City CRANDON	2/28/11
3. Richard Carter	114 W. LAKEVIEW CRANDON WI.	☐ Town ☐ Village ☒ City CRANDON	2/28/11
4. Marlene J. Carter	114. W. Lakeview Crandon, WI 54520	☐ Town ☐ Village ☒ City CRANDON	2/28/11
5. Stephanie Matts	700 S Park Ave Crandon, WI	☐ Town ☐ Village ☒ City CRANDON	2/28/11
6. Rudy Matts	700 S. PARK CRANDON, WI	☐ Town ☐ Village ☒ City CRANDON	2/28/11
7. Reagan [illegible]	9410 Gretzinger Ln Argonne, WI	☒ Town ☐ Village ☐ City Argonne	2/28/11
8. Kathryn Matts	700 S Park Ave Crandon, WI 54520	☐ Town ☐ Village ☒ City CRANDON	2/28/11
9. Deb Brass	7929 Mill St. Argonne, WI 54511	☒ Town ☐ Village ☐ City Argonne	3/1/11
10. Kenneth J Conway III	7467 Charlie Samz lane Argonne W. 54511	☒ Town ☐ Village ☐ City Argonne	3/1/11

Certification of Circulator

I, Kenneth J Conway III (name of circulator), certify:

I reside 7467 Charlie Samz lane, Argonne, Wi 54511 (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.

3/1/11 (date)

(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Diana J. Cragg	801 E Timber Dr #8 Rhinelander WI 54501	☐ Town ☐ Village ☑ City RHINELANDER	4-11-11
2. Deb Prescher	2882 Crescent Rd. Rhinelander WI 54501	☐ Town ☐ Village ☑ City RHINELANDER	4-11-11
3. Don LaBerge	4699 S. Shore Dr Rhinelander WI 54501	☑ Town ☐ Village ☐ City Pelican	4-11-11
4. Sheryl LaBerge	4699 S. Shore Dr. Rhinelander, WI	☑ Town ☐ Village ☐ City Pelican	4-11-11
5. Heather Anderson	6691 Spider Lk Rd Rhinelander, WI 54501	☑ Town ☐ Village ~~☐ City~~ NEWBOLD RHINELAND.	4/11/11
6. Jo Anderson	6691 SPIDER LAKE RD RHINELANDER, WI 54501	☑ Town ☐ Village ~~☑ City~~ NEWBOLD	4-11-11
7. Joshua R Petty	715 Randall Ave Rhinelander, WI 54501	☐ Town ☐ Village ☑ City RHINELANDER	4/11/11
8. Cindy Baum	4044 Trails End Rd Rhinelander WI 54501	☑ Town ☐ Village ☐ City Pine Lake	4/11/11
9. Arnold S. Meier	1588 Dorr St. Monico, Wi. 54501	☑ Town ☐ Village ☐ City Monico, Wi.	4-11-11
10. Melissa Humpfer	140 Hillside Rd Rhinelander WI 54501	☐ Town ☐ Village ☑ City Rhinelander	4-11-11

Certification of Circulator

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

I reside 324 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.

4/11/11
(date)

Sherri E Ferrell
(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Delia Di Giovanni	1452 Explorer	☐ Town ☐ Village ☒ City Rhinelander	04/14/2011
2. Cristy Davis	341 Maple St. Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4/14/11
3. Joseph Boldt	135 Hickey Rd	☐ Town ☐ Village ☒ City Tomahawk	4/14/11
4. [illegible]	125 W. Hill Dr. APT 106	☐ Town ☐ Village ☒ City RHINELANDER	4/14/11
5. [illegible]	3553 CTY RD A Birch Drive	☐ Town ☐ Village ☐ City TOMAHAWK	4/14/11
6. [illegible]	N11667 Lamer Rd Tomahawk, WI 54487	☒ Town ☐ Village ☒ City TOMAHAWK	4/14/11
7. [illegible]	~~PO Box 1868~~ 1611 Golfview Rd E.R.	☐ Town ☐ Village ☒ City EAGLE RIVER	4/14/11
8. Judith K Wagner	W 7848 W Bobay Tomahawk	☒ Town ☐ Village ☐ City Tomahawk	4/14/11
9. [illegible]	W3545 Stevenson Rd Tom, WI 54492	☐ Town ☒ Village ☐ City Stevenson	4/14/11
10. Bertha Schob	606 Forest Apt 6 Tomahawk, WI 54487	☐ Town ☐ Village ☒ City TOMAHAWK	4/14/11

Certification of Circulator

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

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

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

4/17/11
(date)

Sherri E. Ferrell
(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Janice H Lundberg	10415 N. RD. TOMAHAWK WISC	☐ Town ☐ Village ☒ City TOMAHAWK	4-14-2011
2. Beth Meyer Stacy	N9334 MEADOWS EDGE Tomahawk WI 54487	☐ Town ☐ Village ☒ City Tomahawk	4/14/2011
3. Budgett Beatty	N 7096 Grundy Rd Gleason WI 54435	☒ Town ☐ Village ☐ City BLEASON	4-14-2011
4. Cindi Bowman	N10124 Pine Shore Tomahawk, WI 54487	☐ Town ☐ Village ☒ City Tomahawk	4/14/2011
5. Brandi Schlosser	N 10124 Pine Shore Tomahawk, WI 54487	☒ Town ☐ Village ☐ City Tomahawk	4/14/2011
6. John Vallyner	N11676 COTTAGE RD TOMAHAWK 54487	☒ Town ☐ Village ☐ City BERRY	4-14-2011
7. Joan Hunt	101 Hillcrest Dr. Tomahawk, WI 54487	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
8. Darwin Brown	7096 Grundy Rd Gleason WI 54435	☒ Town ☐ Village ☐ City Birch	4-14-11
9. [illegible]	3100 Leather Ave Tomahawk WI 54487	☒ Town ☐ Village ☐ City Tomahawk	4-14-11
10. Barbara Stewart	W3588 Cloverbelt Rd Irma, WI 54442	☒ Town ☐ Village ☐ City Skanawan	4-14-11

Certification of Circulator

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

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

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

4/14/11
(date)

Sherri E. Ferrell
(signature of circulator)

Page No. 639

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Theresa Daniels	87 Deer Park Rd Tomahawk WI	☐ Town ☐ Village ☒ City TOMAHAWK	4-14-11
2. Casey Erickson	17 W River St Tomahawk, WI	☐ Town ☐ Village ☒ City TOMAHAWK	4-14-11
3. Sue Klein	2358 LAKE NAKOMIS	☐ Town ☐ Village ☒ City TOMAHAWK	4/14/11
4. Lorri Norton	3729 CTY Rd Y Tomahawk WI	☒ Town ☐ Village ☐ City Little Rice	4-14-11
5. Theresa Norton	W5807N Church St Tomahawk WI	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
6. Frances Gilbert	2003 Lake Nokomis rd Tomahawk, WI 54487	☒ Town ☐ Village ☐ City Tomahawk	4/14/11
7. Jacqueline Barty	1601 Riverview Lane Tomahawk WI 54487	☐ Town ☐ Village ☒ City Tomahawk	4/14/11
8. Lea Anderson	1520 King Rd Tomahawk WI 54487	☐ Town ☐ Village ☒ City Tomahawk	4/14/11
9. Nancy Troester	~~4739~~ 9749 Deer Trail Rd	☒ Town ☐ Village ☐ City Tomahawk	4/14/11
10. Kelly Berg	209 W Merrill Ave Tomahawk WI	☒ Town ☐ Village ☐ City Tomahawk	4/14/11

Certification of Circulator

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

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

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

4/14/11
(date)

Sherri Ferrell
(signature of circulator)

Page No. 640

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	1521 Kings Hill Dr.	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
2. Delores Mayer	609 No 4th	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
3. Karen Kathamegos	2005 Indian Pine Pt Rd	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
4. [illegible]	22 South Railway St	☐ Town ☐ Village ☒ City Tomahawk	4-14-11
5. [illegible]	W13826 County C Gleason WI 54435	☒ Town ☐ Village ☐ City GLEASON	4/14/11
6. [illegible]	659 Southgate Dr Tomahawk WI	☐ Town ☐ Village ☒ City TOMAHAWK	4/14/11
7. Vickie [illegible]	W8506 Bellevue Rd Tomahawk WI	☐ Town ☐ Village ☐ City Bradley	4-14-11
8. Cindy Kleck	408 N 4th St Tomahawk WI	☐ Town ☐ Village ☒ City TOMAHAWK	4/14
9. Patsy Tobias	1005 S. Tomahawk Ave Tomahawk WI	☐ Town ☐ Village ☒ City TOMAHAWK	4/14/
10. Dolly Bohnert	25 7th St. Tomahawk	☐ Town ☐ Village ☒ City TOMAHAWK	4/14

Certification of Circulator

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

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

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

Sherri E Ferrell
(signature of circulator)

4/14/11
(date)

Page No. 64

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	341 Woodland Hts. Rhinelander	☒ Town ☐ Village ☐ City Rhinelander	4/11/11
2. [illegible]	339 Woodland Hts Rhinelander, WI	☒ Town ☐ Village ☐ City Rhinelander WIS	4-11-11
3. [illegible]	349 Woodland Hts Ter. Rhinelander, WI	☐ Town ☐ Village ☒ City Rhinelander	4-11-11
4. [illegible]	357 Woodland Hts Rhinelander, WI	☐ Town ☐ Village ☒ City Rhinelander	4-11-11
5. [illegible]	359 Woodland Heights Rhinelander, WI	☒ Town ☐ Village ☐ City Rhinelander	4-11-11
6. [illegible]	362 Woodland Hts Rhinelander	☐ Town ☐ Village ☒ City Rhinelander	4-11-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

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

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

4-12-11
(date)

(signature of circulator)

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

Page No. 642

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jo Ann Johnson	11085 - Tomahawk Ave Tomahawk WI 54487.	☐ Town ☐ Village ☑ City City of Tomahawk	3/1/11
2. Marcella Greil	614 Deer Park Rd Tomahawk WI	☐ Town ☐ Village ☑ City Tomahawk	3/1/11
3. Heidi Greil Smm	1345 E Kings Rd Tomahawk, WI 54487	☐ Town ☐ Village ☑ City Tomahawk	3/1/11
4. Rod Greil	614 DEER PARK TOMAHAWK, WI	☐ Town ☐ Village ☑ City TOMAHAWK	3/1/11
5. [redacted] S/Hawn Bidler	W2837 CTY RD A Tomahawk WI 54487	☐ Town ☐ Village ☑ City Tomahawk	3/1/11
6. Harold Kimmons	11445 Hwy A Tomahawk Wis	☐ Town ☐ Village ☑ City "	3/1/11
7. Jean Wilson	11445 Hwy A Tomahawk WI	☐ Town ☐ Village ☑ City "	3/1/11
8. Jen Kimmons	11445 Hwy A Tomahawk WI	☐ Town ☐ Village ☑ City "	3/2/11
9. Heidi Flannagan	11445 Hwy A Tomahawk WI	☐ Town ☐ Village ☑ City "	3/2/11
10. Gwen Sanders.	715 Murphy Ave. Tomahawk, WI 54487.	☐ Town ☐ Village ☑ City Tomahawk	3/2/11.

Certification of Circulator

I, Jo Ann Johnson, certify:
(name of circulator)

I reside 11085 S. Tomahawk Ave, Tomahawk WI 54487.
(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)

Jo Ann Johnson
(signature of circulator)

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

Page No. #643

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 Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
see note 1. ~~Tracey L. Tauch~~	~~P4620 Sportsman Dr~~ ~~Birnamwood, WI 54414~~	☒ Town ☐ Village ☐ City ~~Plover~~	~~3-1-11~~
2. Mary Cerny	N1911 Cozy Ln Antigo, WI 54409	☒ Town ☐ Village ☐ City Antigo	3-1-11
3. [illegible]	N3000 Orchard Rd. Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	3-1-11
4. Pamela Augustyn	N3000 Orchard Rd. Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	3-1-11
5. [illegible]	N3000 Orchard Rd Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	3-1-11
6. [illegible]	N3000 Orchard Rd Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	3-1-11
7. [illegible]	N3000 Orchard Rd Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	3-1-11
8. Amy Musser	N3441 N Langlade Rd. Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	3-2-11
9. John Donohue	N2880 Orchard Rd Antigo, WI. 54409	☒ Town ☐ Village ☐ City Antigo	3-2-11
10. Bobbiejo Bohlman	N2880 Orchard Rd Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	3-2-11

Certification of Circulator

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

I reside N3000 Orchard Road, Antigo, Wisc. (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 2, 2011 (date) Pamela Augustyn (signature of circulator)

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RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	W5419 Muskellunge Tomahawk W. 54487	☒ Town Bradley ☐ Village ☐ City	4/9/11
2. [illegible]	N9420 Loop Rd Tomahawk	☒ Town ☐ Village ☐ City Bradley	4/9/11
3. Mike McDonald	W4059 City Rd D. Tomahawk	☒ Town ☐ Village ☐ City King	4/10/11
4. Don Dentinger	9255 BLACK PINE LN MINOCQUA	☒ Town ☐ Village ☐ City MINOCQUA	4/10/11
5. Doug [illegible]	100 S. Park Merrill WI	☐ Town ☐ Village ☒ City MERRILL	4/10/11
6. Ron Jochom	N10086 Sunny Pt Rd Tomahawk WI	☒ Town ☐ Village ☐ City King	4/10/11
7. Kevin L. Jochim	N10086 Sunny Point Rd Tomahawk, WI 54487	☒ Town ☐ Village ☐ City King	4/10/2011
8. [illegible]	3588 Clover Belt Rd Irma WI Clover Belt	☐ Town ☒ Village ☐ City Skowhegan	4/10/2011
9. Barbara R Bowman	3551 Hancock Lk Rd Harshaw WI 54529	☒ Town ☒ Village ☐ City Woodboro	4/10/2011
10. Renee G Mathson	W8096 Sonio Dam Drive Tomahawk, WI	☒ Town ☐ Village ☐ City Wilson	4/10/11

Certification of Circulator

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

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

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

4-10-11
(date)

(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	9617 Menetou Pic Dr	☑ Town ☐ Village ☐ City Minocqua WI	4/8/11
2. R. Sharon Jacobs	6247 BEAR LAKE RD.	☑ Town ☐ Village ☐ City MINOCQUA, WI	4/8/11
3. Judy Koch	8166 BOSACKI RD	☑ Town ☐ Village ☐ City MINOCQUA, WI	4/8/11
4. Donna Suffield	9971 Blue Lake Rd	☑ Town ☐ Village ☐ City Minocqua, WI	4/8/11
5. Ann V Egan	117 Alderlake Rd	☑ Town ☐ Village ☐ City Manitowish Waters WI	4/08/11
6. Shelley Paul-Sleight	5960 maple lane	☑ Town ☐ Village ☐ City manitowish WATERS, WI	4/08/11
7. Ken Hansen	8580 Big St Germain dr	☑ Town ☐ Village ☐ City St Germain	4/8/11
8. Susan K. Hall	6634 W. Black Oak Lake Rd.	☑ Town ☐ Village ☐ City Land O'Lakes	4.8.11
9. [illegible]	7382 Trailwood DR.	☑ Town ☐ Village ☐ City MINOCQUA	4-8-11
10. Robert Kenny	PO Box 118 7134 Bass Lake Rd. LAKE TOMAHAWK	☑ Town ☐ Village ☐ City LAKE TOMAHAWK	4/8/11

Certification of Circulator

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

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

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

4-8-11
(date)

(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. William J Schmitzer	289 Hoover Ave Niagara, WI	☐ Town ☐ Village ☒ City	3/30/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, William J. Schmitzer (name of circulator), certify:

I reside 289 Hoover Ave. Niagara 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.

3-/30/2011 (date)

William J Schmitzer (signature of circulator)

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

Page No. 647

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. P.B. Kuppenheimer	3025 KENTUCK LK RD PHELPS, WI 54554	☑ Town ☐ Village ☐ City PHELPS	02/27/11
2. Dan Kuppenheimer	3025 Kentuck Lake Rd Phelps WI 54554	☑ Town ☐ Village ☐ City Phelps	2-27-11
3. Eric Rasmussen	P.O. 1419 Eagle River WI 54521	☑ Town Lincoln ☐ Village ☐ City	2-27-11
4. JR Rasmussen	PO Box 1419 Eagle River Wi	☐ Town ☐ Village ☐ City Lincoln	2-27-11
5. Donald Gawrosche	8463 Evergreen Dr. Eagle River, WI 54521	☑ Town ☐ Village ☐ City SUGAR CAMP	3-4-11
6. Kenneth Mathews	5297 County Rd S Conover, WI 54519	☑ Town ☐ Village ☐ City CONOVER	3-8-11
7. Susan M. Fodrick	3778 Oneida Farms Rd Eagle River, WI 54521	☑ Town ☐ Village ☐ City LINCOLN	3-8-11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, P.B. Kuppenheimer (name of circulator), certify:

I reside at 3025 Kentuck Lake Rd., Phelps, WI 54554 (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.

02/27/11 (date)

P.B. Kuppenheimer (signature of circulator)

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

Page No. 648

RECALL PETITION

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

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

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Paul Monk	N5911 Kent Rd.	☐ Town ☐ Village ☒ City Bryant,	3-2-11
2. Jeff Monk	N5861 Kent Rd.	☐ Town ☐ Village ☒ City Bryant	3-3-11
3. Perry Monk	N5861 KENT RD	☒ Town ☐ Village ☐ City BRYANT	3-3-11
4. [illegible]	N5911 Kent Rd	☐ Town ☐ Village ☒ City Bryant	3-3-11
5. John Monk	W5704 Old E Rd Bryant wi. 54418	☒ Town ☐ Village ☐ City BRYANT	3-4-11
6. Johanna Monk	N5861 Kent Rd Bryant, WI 54418	☐ Town ☐ Village ☐ City Bryant	3/9/11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

Paul Monk, certify:
(name of circulator)

reside at N5911 Kent Rd, Bryant, WI 54414
(circulator's residence - include number, street, and municipality)

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

3-4-11
(date)

Paul Monk
(signature of circulator)

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Tom Butler	535 Alder Circle Manitowish Waters 54545	☒ Town ☐ Village ☐ City Manitowish Wtrs	2-24-11
2. [illegible]	7085 CRAB LAKE RD Presque Isle W.	☒ Town ☐ Village ☐ City → P.I., Wi	2-24-11
3. [illegible]	Hwy 51 S 100 [redacted]	☒ Town ☐ Village ☐ City MANITOWISH WATERS,	2/24/11
4. Charlotte M. Raydt	16 POWELL RD	☒ Town ☐ Village ☐ City MANITOWISH WATERS, WI	2/24/11
5. Carol M. Butler	535 Alder Circle	☒ Town ☐ Village ☐ City Manitowish Waters	2/24/11
6. Olive Jean Eales	111 A. ALDER LK ROAD	☐ Town ☐ Village ☐ City Manitowish Waters	3/5/11
7. Kenneth F. Eales	1619 Alder Lake Road	☒ Town ☐ Village ☐ City Manitowish Waters	3/5/11
8. [illegible]	PO Box 165 Presque Isle 54557	☐ Town ☐ Village ☐ City Presque Isle	3/7/11
9. Evelyn Sturgeon	2034 Town Site Rd	☒ Town ☐ Village ☐ City Winchester 54557 Wi	3/8/11
10. [illegible]	2034 Town Site Rd	☒ Town ☐ Village ☐ City Winchester 54557	3/8/11

Certification of Circulator

I, TOM BUTLER, certify:
(name of circulator)

I reside at 535 Alder Circle - Manitowish Waters, Wi 54545.
(circulator's residence - include number, street, and municipality)

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

3-14-2011 (date)

Tom Butler (signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Sarah Overfors	W9169 Holmes Jct Rd Pembine WI 54156	☒ Town ☐ Village ☐ City Beecher	3/6/11
2. Joshua Overfors	W9169 Holmes Junct. Rd Pembine WI 54156	☒ Town ☐ Village ☐ City Beecher	3-6-11
3. Sara Taylor	N17056 Hwy 141 Pembine, WI 54156	☒ Town ☐ Village ☐ City Beecher	3-6-11
4. Jason Taylor	N17056 US Hwy 141 Pembine WI 54151	☒ Town ☐ Village ☐ City Beecher	3/6/11
5. Loren Yager	N18248 Mousonik. Rd Pembine, WI 54156	☒ Town ☐ Village ☐ City Pembine	3-6-11
6. Daniel Bjorkman	W7868 Co. Rd. Z Pembine WI	☒ Town ☐ Village ☐ City Beecher	3-6-11
7. Harold Pals	W10085 Pike Pl. (21) Dunbar WI 54119	☐ Town ☐ Village ☐ City Dunbar	3-6-11
8. Joan Pals	W10085 Pike Plank Rd Dunbar WI 5	☒ Town ☐ Village ☐ City Dunbar	3-6-11
9. Ike Bjorkman	W7868 Co Rd Z Pembine, WI 54156	☐ Town ☐ Village ☐ City Pembine	3-6-11
10. Jaime Walker	N15309 Smiley Rd Amberg WI 54102	☒ Town ☐ Village ☐ City Athelstane	3-6-11

Certification of Circulator

I, Clifford Teachout, certify:
(name of circulator)

I reside at N15570 U.S. Hwy 141 Amberg Wi 54102.
(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.

3/08/2011
(date)

Clifford Teachout
(signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Don Habeck	1322 JAECKS RD TOMAHAWK	☐ Town ☐ Village ☒ City TOMAHAWK	3/29/11
2. Patricia J. Habeck	1322 JAECKS RD	☐ Town ☐ Village ☒ City TOMAHAWK	3/29/11
3. Marvin Cass	N8773 CASS RD Tomahawk	☐ Town Bradley ☐ Village ☐ City	3/29/11
4. Pam Lohmeier	15 Marinette Apts Tomahawk	☐ Town ☐ Village Tomahawk ☐ City	3/29/11
5. Winifred Townsend	740 W. Leather Ave. Tomahawk	☐ Town ☐ Village Tomahawk ☐ City	3/30/11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Don Habeck (name of circulator), certify:

I reside 1322 Jaecks Rd, Tomahawk, Wi 54487.
(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.

04/04/11 (date)

(signature of circulator)

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RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James Stanton	W8444 Trillium Lane Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	4/4/11
2. Sharon Stanton	W8444 Trillium Lane Antigo WI 54409	☒ Town ☐ Village ☐ City Antigo	4/4/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside W8444 Trillium Lane Antigo, WI 54409.
(circulator's residence - include number, street, and municipality)

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

4-4-2011
(date)

James Stanton
(signature of circulator)

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

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STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	403 W. Lincoln	☒ Town ☐ Village ☐ City Crandon	4.4.11
2. [illegible]	10380 SOUTH RD	☒ Town ☐ Village ☐ City Tomahawk	4-4-11
3. Lovel Morris	5170 Sand Lk	☒ Town ☐ Village ☐ City 5170 Sand Lk Rd Eagle River	4/4/11
4. Adam Senovsky	~~Eagle River WI~~ separated W5145 Tomahawk WI	☒ Town ☐ Village ☐ City W 5145 Selmer Rd Bradley	4-4-11
5. Angela Dompier	3650 N. Branch Apt 110	☒ Town ☐ Village ☐ City Wabeno	4-4-11
6. Joe Schram	W15068 River Dr. Crandon WI	☒ Town ☐ Village ☐ City Parrish	4-4-11
7. Tiffany Swenson	303 Woodland Heights Ter	☐ Town ☐ Village ☒ City Rhinelander	4/4/11
8. [illegible]	324 Woodland Hgts Ter	☐ Town ☐ Village ☒ City Rhinelander	4/4/11
9. [illegible]	4646 South Shore Dr.	☐ Town ☐ Village ☒ City Rhinelander	4/4/11
10. Clare Hamm	127 N. Onida Ave.	☐ Town ☐ Village ☒ City Rhinelander	4/4/11

Certification of Circulator

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

I reside 7271 NW 174 Terr.
(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)

(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	823 1st Ave Antigo WI	☐ Town ☑ Village ☐ City Antigo	4/3/11
2.	1120 Cty Rd G Pelican Lk WI 54463	☐ Town ☐ Village ☑ City Pelican Lk WI	4/3/11
3.	6543 Hwy 8 West	☑ Town ☐ Village ☐ City Cresent	4-4-11
4.	2 W MERRILL	☑ Town ☐ Village ☐ City TOMAHAW	4-4-11
5.	3669 Flanner Ln.	☑ Town ☐ Village ☐ City Blackwell	4-4-11
6.	2246 Hill Rd Phelps WI 54554	☑ Town ☐ Village ☐ City Phelps WI	4-4-11
7. Carolyn Tanner	2600 Pelican Kanch Rd #1 Rhinelander, WI	☐ Town ☐ Village ☑ City Rhinelander	4-4-11
8. Jennie Olkowski	1415 River Street	☐ Town ☐ Village ☑ City Rhinelander	4-4-11
9. Miriam Buttrey	4150 Satuit Lane	☐ Town ☐ Village ☑ City Rhinelander	4-4-11
10.	722 N Brown St	☐ Town ☐ Village ☑ City Rhinelander	4-4-11

Certification of Circulator

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

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

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

4-4-11
(date)

(signature of circulator)

The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
mail: gab@wi.gov

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Beverly Paccagnella	2009 River St	☐ Town ☐ Village ☐ City Niagara	3/30/11
2. Jacob Paccagnella	2009 River St	☐ Town ☐ Village ☐ City Niagara	3/30/11
3. Stacy Meyer	1817 Ridge St	☐ Town ☐ Village ☐ City Niagara	3/30/11
4. Ronald Chartier	1817 Ridge St	☐ Town ☐ Village ☐ City Niagara	3/30/11
5. Gerald Trottier	1785 Section Line Rd	☐ Town ☐ Village ☐ City Niagara	3/30/11
6. Amy Venstra	W8775 County N	☐ Town ☐ Village ☐ City Niagara	3/30/11
7. Shirley Mierzejewski	1049 Forest St	☐ Town ☐ Village ☐ City Niagara Wis	3/30/11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Jacob Paccagnella, certify:
(name of circulator)

I reside 2009 River St. Niagara 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.

3-31-11
(date)

Jacob Paccagnella
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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Page No. 656

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Rachel Zahn	W2094 Hwy 64 Merrill WI 54452	☒ Town ☐ Village ☐ City	4/4/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside W2094 Hwy 64 Merrill WI 54452 (circulator's residence - include number, street, and municipality).

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

4-4-11 (date)

Rachel Zahn (signature of circulator)

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

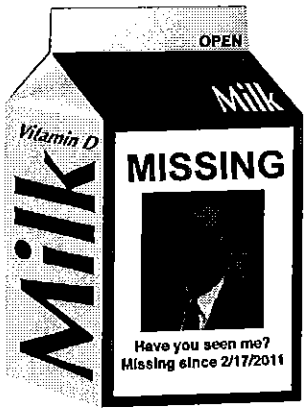
RECALL PETITION

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

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

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

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



STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Mark R Hood	N7431 Sikowski Ln Crivitz WI	☑ Town ☐ Village ☐ City Stevenson	3-27-11
2. Benita Hood	N7431 S. Kowski Ln. Crivitz WI	☑ Town ☐ Village ☐ City Stevenson	3-27-11
3. Kassie Altwein	W5234 Hwy 180 Wausaukee WI	☒ Town ☐ Village ☐ City Wausaukee	3-27-11
4. Ben Altwein	W5232 Hwy 180 Wausaukee WI	☒ Town ☐ Village ☐ City Wausaukee	3-27-11
5. Susanne Tuttle	W5199 Squaw Creek Rd. Wausaukee, WI 54177	☒ Town ☐ Village ☐ City Wausaukee	4-7-11
6. Robin A. Tuttle	W5199 SQUAW CREEK WAUSAUKEE WI. 54177	☒ Town ☐ Village ☐ City WAUSAUKEE	4-7-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, John C. Zore, certify:
(name of circulator)

I reside at N10533 Forest Road, Wausaukee, WI. 54177-8486.
(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.

7 Apr 11 (date) John C. Zore (signature of circulator)

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

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	W2101 Edmund Rd	☐ Town ☒ Village ☐ City White Lake	4-8-11
2.	633 Superior St.	☐ Town ☐ Village ☒ City Antigo	4-8-11
3.	1309 Pine	☐ Town ☐ Village ☒ City Antigo wi	4-8-11
4. Alan Boettcher	840 Fourth Ave.	☐ Town ☐ Village ☒ City Antigo	4-8-11
5.	635 Dorr St apt 201	☐ Town ☐ Village ☒ City Antigo	4-8-11
6.	539 Elm St	☐ Town ☐ Village ☒ City Antigo	4/8/11
7.	1012 9th Ave	☐ Town ☐ Village ☒ City Antigo	4/8/11
8.	203 Sun Ln	☐ Town ☐ Village ☒ City Antigo	4/8/11
9.	2148 City HW	☒ Town ☐ Village ☐ City Harrison	4-8-11
10.	137 Fred	☐ Town ☐ Village ☒ City Antigo	4-8-11

Certification of Circulator

I, Mark Vigil, certify:
(name of circulator)

I reside 4620 W. Cedar ave. Denver Colorado 80219.
(circulator's residence - include number, street, and municipality)

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

4-8-11
(date)

Mark Vigil
(signature of circulator)

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

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Recall for Sen Jim Holperin MEM

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Michael E. Moran	5195 Forest Lane Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Pine Lake	27 Feb 2011
2. Virginia Boreich	5195 Forest Lane Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Pine Lake	27 Feb 2011
3. Sydney L. Moran	5195 FOREST LANE RHINELANDER, WI 54501	☒ Town ☐ Village ☐ City PINE LAKE	Feb. 27, 2011
4. Nancy E. Stuntebeck	5253 Forest Lane Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Pine Lake	Feb. 28, 2011
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Michael E. Moran, Michael E. Moran (name of circulator), certify: TW PINE LAKE

I reside 5195 Forest Lane, Rhinelander, WI 54501 (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.

27 Feb 2011 (date)

Michael E. Moran (signature of circulator)

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Page No. ~~1 of 1~~ 660

RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jeffrey L. Hall	7298 Mildred Parkway	☐ Town ☐ Village ☒ City Rhinelander	3/1/2011
2.		☐ Town ☐ Village ☐ City	
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Jeffrey L. Hall, certify:
(name of circulator)

I reside 7298 Mildred Parkway, Rhinelander, WI 54501.
(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 1, 2011
(date)

Jeffrey L. Hall
(signature of circulator)

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. [illegible]	W3971 Sauntuke [illegible]	☐ Town ☑ Village ☐ City WHITE LAKE	4-14-11
2. Mary E Clark	210 Deleglise Antigo, Wi	☐ Town ☐ Village ☑ City Antigo	4-14-11
3. Robert E Hawn	933 6th Ave Antigo	☐ Town ☐ Village ☒ City Antigo	4-14-11
4. [illegible]	4389 Cty Rd G Antigo Wi	☒ Town ☐ Village ☐ City Harrison	4-14-11
5. [illegible]	711 E. 5th Ave Antigo	☐ Town ☐ Village ☒ City Antigo	14 April 11
6. Brenda Piszczor	Antigo 1811 5th Avenue	☐ Town ☐ Village ☒ City Antigo	4-14-11
7. Cindy Verhasselt	Antigo 342 Virginia	☐ Town ☐ Village ☒ City Antigo	4-14-11
8. Mollie Pupey	1232 5th Ave. Antigo, WI	☐ Town ☐ Village ☒ City Antigo	4-14-11
9. [illegible]	719 Birch	☐ Town ☐ Village ☒ City Antigo	4-14-11
10. Kelly Zoem	514 south clermont Antigo	☐ Town ☐ Village ☒ City Antigo	4-14-11

Certification of Circulator

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

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

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

4-15-11
(date)

(signature of circulator)

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RECALL PETITION

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

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STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Neil Kaeslinck	648 CLEMMONT ANTIGO	☐ Town ☐ Village ☒ City Antigo	4-14-11
2. Molly Detlaff	627 North Ave #15 Antigo	☐ Town ☐ Village ☒ City Antigo	4-14-11
3. [illegible]	212 Gruber St. Antigo	☐ Town ☐ Village ☒ City Antigo	4-14-11
4. [illegible]	N1574 Hwy D Antigo	☒ Town ☐ Village ☐ City Antigo	4/14/11
5. [illegible]	Antigo 412 Center St	☐ Town ☐ Village ☒ City Antigo	4/14/11
6. [illegible]	Antigo 514 Morse St	☐ Town ☐ Village ☒ City Antigo	4/14/11
7. [illegible]	408 Edison St Antigo	☐ Town ☐ Village ☒ City Antigo	4-14-11
8. [illegible]	415 Edison	☐ Town ☐ Village ☒ City Antigo	4-14-11
9. [illegible]	Colombard	☐ Town ☐ Village ☒ City Antigo	4-14-11
10. Evelyn Sanderson	2682 Hwy Y	☒ Town ☐ Village ☐ City Maiwa	4/14/11

Certification of Circulator

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

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

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

4-15-11
(date)

(signature of circulator)

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

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STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Peggy Jonathan	W7400 Hwy. 64 Antigo, WI 54409	☒ Town ☐ Village ☐ City Antigo	4/13/11
2. Carl Dreyler	W13248 CYRd. J. Deerbrook, WI	☒ Town ☐ Village ☐ City SUMMIT	4/13/11
3. Todd Petrosky	W5567 Forrest Rd Antigo WI	☒ Town ☐ Village ☐ City Antigo	4/13/11
4. [illegible]	N3309 Cortland Antigo WI	☒ Town ☐ Village ☐ City Polar	4/13/11
5. [illegible]	1320 N Yanglark RR Antigo	☒ Town ☐ Village ☐ City Antigo	4/13/11
6. [illegible]	N3548 Hazel R Antigo	☒ Town ☐ Village ☐ City Antigo	4/13/11
7. [illegible]	14935 Holtzer Ln. Mountain, WI	☐ Town ☒ Village ☐ City Riverview	4/13/11
8. Judith Lendert	14935 Holt Spur Stevenstown, Wis	☐ Town ☒ Village ☐ City Riverview	4/14/11
9. Michael Rustto	ANIWA N497 old 26 Rd	☐ Town ☒ Village ☐ City ANIWA	4-14-11
10. Stephen G. Kasale	Aniwa WI 54408 N497 old 26 RD	☐ Town ☒ Village ☐ City ANIWA	4-14-2011

Certification of Circulator

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

I reside 2511 80.59th W. Ave TULSA OK 74107
(circulator's residence - include number, street, and municipality)

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

4-15-11
(date)

(signature of circulator)

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

Page No. 664

RECALL PETITION

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

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

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

we donot believe a Senator who flees his duties as Sen. Jim Holperin did during a Vote crucial to our state. We need Someone who will stand up for us.

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. William A. Falk	N11684 Hutchin Aniwa Townline Road	☒ Town ☐ Village ☐ City Hutchins Birnamwood, Wi.	4/3/11
2. Shirley A. Falk	N11684 Hutching Aniwa Tnline Rd	☒ Town ☐ Village ☐ City Hutchins	4/3/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, William A. Falk & Shirley Falk (name of circulator), certify:

I reside N11684 Hutchin Aniwa Townline Road Birnamwood, Wi. 54414
(circulator's residence - include number, street, and municipality)

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

4/3/11 (date)

William A. Falk (signature of circulator)

RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Bruce DeLaet	W2454 CO. X WAUSAUKEE	☒ Town ☐ Village ☐ City WAGNER	3/29/11
2. Carl J DeLaet	W2454 Cty X Wausaukee, Wi 54177	☒ Town ☐ Village ☐ City Wagner	3/29/11
3. Patricia M. Sebero	N8210 OLD RAIL RD Porterfield, Wi. 54159	☒ Town ☐ Village ☐ City Wagner	3/31/11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, BRUCE DELAET (name of circulator), certify:

I reside W2454 CO. X WAUSAUKEE, WI. 54177 WAGNER.
(circulator's residence - include number, street, and municipality)

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

3-29-11
(date)

Bruce DeLaet
(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. John A Krumm	2918 Green Bass Rd Rhinelander Wi 54501	☒ Town ☐ Village ☐ City Crescent	4/2/11
2. Leona Schumacher	6556 Logging Camp Rd Rhinelander Wi	☒ Town ☐ Village ☐ City Crescent	4/2/11
3. Marvin J. Schumacher	6556 Logging Camp Rd Rhinelander Wi 54501	☒ Town ☐ Village ☐ City Crescent	4/2/11
4. Charlotte M. Krumm	2918 Green Bass Rd. Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Crescent	4/2/11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, John A Krumm (name of circulator), certify:

I reside 2918 Green Bass Rd. Rhinelander Wi 54501 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.

4/2/11 (date)

John A Krumm (signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Robert L. Kabacinski	N10959 alfs Ln Crivitz, Wi 54114	☒ Town ☐ Village ☐ City Stephenson	4/2/11
2. Jeanne Strandell	N10959 Alf-Ln Crivitz, WI 54114	☒ Town ☐ Village ☐ City Stephenson	4/2/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Robert L. Kabacinski Jeanne C Strandell, certify:
(name of circulator)

I reside 10959 alfs Ln Crivitz, Wi. 54114 Town of Stephenson.
(circulator's residence - include number, street, and municipality)

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

4/2/11 (date)

Robert L. Kabacinski (signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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Our elected representatives have a job to do and they should not run away to avoid doing that job.

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Elizabeth A. Fuller	17374 Wildflower Ln Townsend, WI 54175	☒ Town ☐ Village ☐ City Townsend	4/5/11
2. Orville L. Fuller	17374 Wildflower Ln Townsend, WI 54175	☒ Town ☐ Village ☐ City Townsend	4/5/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Orville L. Fuller, certify:
(name of circulator)

I reside 17374 Wildflower Ln Townsend 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.

4-5-2011
(date)

Orville L. Fuller
(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Darlin Mitchem	N 22018 ZAIDEL RD. NIAGARA	☒ Town ☐ Village ☐ City	3/30/11
2. Debra S Mitchem	N22018 Zaidel Rd Niagara, WI 54151	☒ Town ☐ Village ☐ City	3/30/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

X I, Debra Mitchem (name of circulator), certify:

X I reside N22018 Zaidel Rd, Niagara, WI 54151 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.

X 3-30-11 (date)

X Debra S Mitchem (signature of circulator)

Page No. 670

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Diane M. Lehrkamp	1825 Koubenic Rd Three Lakes, WI 54562	☒ Town ☐ Village ☐ City Town of Three Lakes	4/1/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside 1825 Koubenic Road, Three Lakes, WI 54562.
(circulator's residence - include number, street, and municipality)

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

4-5-2011
(date)

Diane M. Lehrkamp
(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Edwin A. Wroblewski	3944 FRED LUKE RD STAR LAKE, WI 54561-9717	☒ Town ☐ Village ☐ City PLUM LAKE	4/4/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, EDWIN A. WROBLEWSKI, certify:
(name of circulator)

I reside 3944 FRED LUKE RD STAR LAKE, WI 54561-9717 PLUM 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.

April 4, 2011
(date)

Edwin A. Wroblewski
(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Robert A Gleffe	11839 - Sumach LK RD Arbor Vitae Wi	☒ Town ☐ Village ☐ City Arbor Vitae	3/30/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

X I, Robert A. Gleffe Robert A. Gleffe, certify:
(name of circulator)

X I reside 11839 - Sumach LK. 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.

X 4-4-11 (date)

X Robert A. Gleffe (signature of circulator)

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

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Dennis Sanchon	3538 Fox Ranch Rd N.	☐ Town ☐ Village ☐ City Cheshire	3-30-11
2. Laura Mueller	804 N. Margaret St.	☐ Town ☐ Village ☒ City Rhinelander	4-2-11
3. Richard M. Schaefer	5622 JENNIE WEBBER LAKE RD	☐ Town ☐ Village ☒ City SUGAR CAMP	4-5-11
4. Bonnie Ilse	5622 JENNIE WEBBER LAKE Rd	☒ Town ☐ Village ☐ City SUGAR CAMP	4-5-11
5. Ron Smith	W3488 Eagle Point Rd	☒ Town ☐ Village ☐ City King	4-5-11
6. Jannie Rusch	W3488 Eagle Point Rd	☐ Town ☐ Village ☐ City King	4-6-11
7. Paul L Rhuart	3570 GNECH RD RHINELANDER WI	☐ Town ☐ Village ☐ City SUGAR CAMP	4 6 11
8. Teresa Mundu	4356 Aberdeen Rhinelander WI	☒ Town ☐ Village ☐ City Pine Lake	4-6-11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

Jim Piasecki
(name of circulator), certify:

reside at 5610 Jennie Webber Lake Rd Rhinelander WI 54501
(circulator's residence – include number, street, and municipality) Town of Sugar Camp

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

4/13/11
(date)

J Piasecki
(signature of circulator)

AB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
ds form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
8-266-8005, http://gab.wi.gov email: gab@wi.gov

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Roger H. Langford	7333 Dolhon RD. Lake Tomahawk WI. 54539	☑ Town ☐ Village ☐ City WOODRUFF	4/3/11
2. Jim W. Langford	7333 Dolhon RD. Lk. Tomahawk WI. 54539	☑ Town ☐ Village ☐ City WOODRUFF	4/3/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Roger H. Langford Roger H. Langford, certify:
(name of circulator)

I reside 7333 Dolhon RD. Lake Tomahawk, WI. 54539 WOODRUFF.
(circulator's residence - include number, street, and municipality)

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

April - 3 - 2011
(date)

Roger H. Langford
(signature of circulator)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	W8110 Kaiko Rd Wausaukee, WI	☒ Town ☐ Village ☐ City	4/2/11
2. Janice Rohrbach	W8110 KAIKO WAUSAUKEE	☒ Town ☐ Village ☐ City	4/2/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Leonard L Rohrbach, certify:
(name of circulator)

I reside W8110 Kaiko Rd WAUSAUKEE.
(circulator's residence - include number, street, and municipality)

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

4/2/11
(date)

(signature of circulator)

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Page No. 676

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.

STATEMENT OF REASON FOR RECALL

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Neglect of duty. Intentional absence from Senate meetings in a political maneuver to defeat a bill.

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Judy Nelson	3591 LK Lucerne Dr Crandon, WI 54520	☐ Town ☐ Village ☐ City	4/2/11
2. [illegible]	3591 LK Lucerne Dr CRANDON, WI 54520	☐ Town ☐ Village ☐ City	4/2/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside 3591 LK Lucerne Dr. Crandon, WI 54520 (circulator's residence - include number, street, and municipality).

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

4/2/11 (date) Judy Nelson (signature of circulator)

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Page No. 677

RECALL PETITION

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

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STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Marie Stueber	2533 Millerville Lane Phelps WI 54554	☒ Town ☐ Village ☐ City	4/2/11
2. Harold E. Stueber	2533 Millerville La. Phelps, Wi. 54554	☐ Town ☐ Village ☐ City	4/2/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Marie Stueber, certify:
(name of circulator)

I reside 2533 Millerville Lane Phelps WI 54554.
(circulator's residence - include number, street, and municipality)

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

4-2-11
(date)

Marie Stueber
(signature of circulator)

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RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jerrold M. Thorne	4103 Diamond Lake Rd	☒ Town ☐ Village ☐ City Arbor Vitae	4/4/11
2. Diana S. Thorne	4103 Diamond lake Rd	☒ Town ☐ Village ☐ City Arbor Vitae	4/4/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Jerrold M. Thorne, certify:
(name of circulator)

I reside 4103 Diamond Lake 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.

April 4, 2011
(date)

(signature of circulator)

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RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	W8300 Cty Rd A Deerbrook, WI 54424	☒ Town ☐ Village ☐ City Upham	2/28/11
2. Joan Nagel	N6825 Hwy B Deerbrook, WI 54424	☒ Town ☐ Village ☐ City Neva	2/28/11
3. Paul Tilano	N6564 Hwy B Deerbrook WI 54424	☒ Town ☐ Village ☐ City NEVA	2/28/11
4. Dolores H. Rull	N7561 Black Oak Deerbrook WI 54424	☒ Town ☐ Village ☐ City Upham	3-1-11
5. Stephanie Burns	N6071 Rosedale Rd Deerbrook, WI 54424	☒ Town ☐ Village ☐ City Peck	3-1-11
6. Tom Henry	N1555 Rolling Hills Crandon, WI 54409	☐ Town ☒ Village ☐ City Rolling	3-1-11
7. Judy Young	641 Sunset DR Antigo WI 54409	☐ Town ☐ Village ☒ City Antigo	3-1-11
8. Sue Lukas	N6471 Co Hwy V Deerbrook, WI 54424	☒ Town ☐ Village ☐ City NEYA	3/1/11
9. Andrew J. Koss	W10570 Cty Rd I Antigo, WI 54409	☒ Town ☐ Village ☐ City peck	3/1/11
10. Pat Rauch	W10494 Cty F Summit Lake WI 54409	☐ Town ☐ Village ☐ City Upham	3-1-11

Certification of Circulator

I, Joyce A. Zacharies, certify:
(name of circulator)

I reside N 8075 Forest Rd. Deerbrook, WI 54424 Twn NEVA
(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 1, 2011
(date)

Joyce A. Zacharies
(signature of circulator)

GAB-170 (Rev 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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Page No. 680

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Maureen Heberer	4110 Cty. Rd. W Crandon, WI 54520	☒ Town ☐ Village ☐ City Lincoln	4/3/11
2. Norman Heberer	4110 County Rd. W Crandon WI 54520	☒ Town ☐ Village ☐ City LINCOLN	4/3/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside 4110 Cty. Rd. W, Crandon, WI 54520 Town of Lincoln.
(circulator's residence - include number, street, and municipality)

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

4/3/11
(date)

Maureen Heberer
(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 Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. John C Zove	N10533 Forest Road Wausaukee, WI	☒ Town ☐ Village ☐ City WAUSAUKEE	6 Mar 11
2. Kelly Bedering	N4442 Radenaker Wausaukee, WI	☒ Town ☐ Village ☐ City WAUSAUKEE	3/6/11
3. Charles Edwards	11442 RADEMAKER RD WAUSAUKEE, WI	☒ Town ☐ Village ☐ City WAUSAUKEE	3/6/11
4. Michael Schuster	W6440 Rue PS Rd, Wausaukee WI. 54177	☒ Town ☐ Village ☐ City WAUSAUKEE	3/6/11
5. Geraldine Schuster	W6440 Rue PS Rd, Wausaukee WI. 54177	☒ Town ☐ Village ☐ City WAUSAUKEE	3/6/11
6. Geraldine Zove	N10533 FOREST RD WAUSAUKEE, WI	☒ Town ☐ Village ☐ City WAUSAUKEE	3-6-11
7. Patricia Alvis	N4934 Hwy 180 Wausaukee, Wis	☒ Town ☐ Village ☐ City Wausaukee	3-6-11
8. Dorothy Willey	W7965 Spencer Amberg, WI	☒ Town ☐ Village ☐ City AMBERG	3-7-11
9. Paul A Hueter	N9391 Pohl Rd Wausaukee WI 54177	☒ Town ☐ Village ☐ City Wagner	3-8-11
10. Robert A Ramelo	W7916 Skory Rd Waus, WI 54177	☒ Town ☐ Village ☐ City WAUSAUKEE	3-8-11

Certification of Circulator

I, John C. Zove, certify:
(name of circulator)

I reside N10533 Forest Road Wausaukee, Wisconsin.
(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.

9 March 2011
(date)

John C. Zove
(signature of circulator)

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RECALL PETITION

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Mary E. Dummers	308 N. State St	☐ Town ☐ Village ☑ City Merrill	3/31/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside 308 N. State St. Merrill, 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.

3-31-11
(date)

Mary E. Dummers
(signature of circulator)

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

RECALL PETITION

TO: WISCONSIN GOVERNMENT ACCOUNTABILITY BOARD
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the DISTRICT # 12,
(jurisdiction or district of officeholder)

petition for the recall of SENATOR JIM HOLPERIN from office pursuant
(name of officeholder to be recalled and office)

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. James Fischer	P.O Box 318 Antigo	☐ Town ☐ Village ☒ City Antigo, WI	3-7-11
2. [illegible]	1034 5th Ave Antigo	☐ Town ☐ Village ☒ City Antigo WI	3-7-11
3. Robert Bretzmann	1227 1st Ave Antigo	☐ Town ☐ Village ☒ City Antigo	3-7-11
4. [illegible]	215 6th Ave Antigo	☐ Town ☐ Village ☒ City Antigo	3-7-11
5. Marjorie M. Tatro	N4354 Hwy 52 ~~Ant~~ Antigo	☒ Town ☐ Village ☐ City Antigo	3-7-11
6. James E. Tatro	N4354 Hwy 52 Antigo WI 54409	☒ Town ☐ Village ☐ City ANTIGO	3-10-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, James E Tatro, certify:
(name of circulator)

I reside at N4354 Hwy 52, Antigo.
(circulator's residence - include number, street, and municipality)

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

3-13-11
(date)

James E. Tatro
(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Elvera Detert	703 E 4th St	☐ Town ☐ Village ☑ City Merrill	3/31/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Elvera Detert, certify:
(name of circulator)

I reside 703 E 4th St Merrill WI 54452.
(circulator's residence - include number, street, and municipality)

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

3-31-11
(date)

Elvera Detert
(signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Beth Wyma	W2161 County Rd P Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/29/11
2. Terrell Wyma	N568 Range Line Rd Merrill Wis 54452	☒ Town ☐ Village ☐ City Pine River	3/29/11
3. [illegible]	W2227 Cty Rd P Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/30/11
4. Brian Seehafer	N2532 PIER ST MERRILL, WI 54452	☒ Town ☐ Village ☐ City MERRILL	3/30/11
5. R Gruett	W3328 Hwy P Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/30/11
6. Dustin Gruett	W3328 Hwy P Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/30/11
7. Carol Wyma	N568 Rangeline Rd Merrill WI 54452	☒ Town ☐ Village ☐ City PINE RIVER	3/30/11
8. Jeff Wyma	W2161 County Rd P Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/31/11
9. Jacob Wyma	W2161 County Rd P Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/31/11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

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

I reside W2161 County Road P 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.

4/4/11 (date)

Beth Wyma (signature of circulator)

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

RECALL PETITION

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

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

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	1157 Finley LN #2 St. German WI	☒ Town ☐ Village ☐ City Cloverland	2-23-2011
2. Paula Visner VISNER	6045 BEAVER TR EAGLE RIVER, WI	☒ Town ☐ Village ☐ City CLOVERLAND	2-24-2011
3. Michele Green	2736 DEERSKIN PARK Rd EAGLE RIVER, WI 54521	☒ Town ☐ Village ☐ City WASHINGTON	2.24.11
4. Jeff Green	2736 DEERSKIN PARK Rd EAGLE RIVER, WI, 54521	☒ Town ☐ Village ☐ City WASHINGTON	2-24-2011
5. Michael R. Visner	6045 BEAVER TRAIL EAGLE RIVER, WI 54521	☒ Town ☐ Village ☐ City CLOVERLAND	2-24-2011
6. Erin Hutman	4319 E Hwy K Conover, WI 54519	☒ Town ☐ Village ☐ City Conover	2-24-11
7. Erin JOVANOVIC	1450 Woodland Lane Eagle River WI	☒ Town ☐ Village ~~☐ City~~ Lincoln	2.24.11
8. Christine Hutman	3724 E Church Rd Conover	☒ Town ☐ Village ☐ City Conover	2.24.11
9. Michael J Lochfelt	4251 SPRUCE LN LOT 12 EAGLE RIVER, WI	☒ Town LINCOLN ☐ Village ☐ City	2/25/11
10. James R Behling	3936 Hy 17 N Eagle River WI	☐ Town ☐ Village ☐ City Washington	2/26/11

Certification of Circulator

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

I reside at 6045 BEAVER TR. CLOVELAND
(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.

2/26/2011 (date) Paula Visner (signature of circulator)

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [signature]	2017 E Mohawk Dr	☐ Town ☐ Village ☒ City Tomahawk	4/1/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Jeffrey F. West, certify:
(name of circulator)

I reside 2017 E Mohawk Dr, Tomahawk, WI, 54487.
(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)

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

Page No. ~~1 of 1~~

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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.)

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Barbara A. Zakrzewski	W7121 Spirit Haven Rd Tomahawk, WI 54487	☒ Town ☐ Village ☐ City Bradley	4/1/11
2. [illegible]	W7121 SPIRIT HAVEN RD TOMAHAWK WI 54487	☒ Town ☐ Village ☐ City BRADLEY	4/1/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Barbara A. Zakrzewski, certify:
(name of circulator)

I reside W7121 Spirit Haven Rd, Tomahawk, WI 54487 BRADLEY.
(circulator's residence - include number, street, and municipality)

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

4-1-11
(date)

Barbara A. Zakrzewski
(signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jeffrey W. Zahn	W1242 State Hwy 64 Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/30/11
2. Gail Zahn	W1242 State Hwy 64 Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/30/11
3. Kevin Zahn	W1242 State Hwy 64 Merrill WI 54452	☒ Town ☐ Village ☐ City Pine River	3/30/11
4. [illegible]	206 East St Merrill 54452	☐ Town ☐ Village ☒ City Merrill	3/30/11
5. [illegible]	W5278 Newport Lane Merrill, WI 54452	☒ Town ☐ Village ☐ City Merrill	3/30/11
6. Vicky Stockwell	701 Jefferson St Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	4/1/11
7. Shawn Steenbrant	701 Jefferson St. Merrill WI 54452	☐ Town ☐ Village ☒ City Merrill	4/1/11
8. [illegible]	1403 E 9th St Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	4/1/11
9. Megan Truckey	1800 W. Main St Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	4/1/11
10. [illegible]	1800 W. Main St Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	4/1/11

Certification of Circulator

I, Jeffrey W. Zahn (name of circulator), certify:

I reside W1242 State Hwy 64 Merrill WI. 54452 (circulator's residence - include number, street, and municipality).

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

4-4-11 (date) Jeffrey W. Zahn (signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jerome Monti R	W 103 CTY RD C Gleason, WI 54435	☑ Town ☐ Village ☐ City Schley	3/30/11
2.		☐ Town ☐ Village ☐ City	/ /11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Peggy J Monti, certify:
(name of circulator)

I reside W103 Co Rd C Gleason SCHLEY.
(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 30 2011
(date)

Peggy J Monti
(signature of circulator)

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

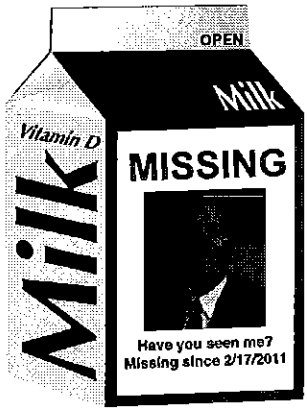
RECALL PETITION

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

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

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

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



STATEMENT OF REASON FOR RECALL

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Laureen Ann Rasin	336 Dahl Street Rhinelander, WI 54501	☐ Town ☐ Village ☒ City Rhinelander	4/4/2011
2. [illegible]	517 WISCONSIN AVE. RHINELANDER WI.	☐ Town ☐ Village ☒ City	4/5 2011
3. Richard T. Wilson	7076 E TOWER RD RHINELANDER WI.	☐ Town ☐ Village ☒ City	4/5/11
4. Ila Weber	404 E. Glen St. Crandon, WI 54520	☐ Town ☐ Village ☒ City Crandon.	4/5/2011
5. [illegible]	8965 SCHLITZ RD WOODRUFF 54568	☒ Town ☐ Village ☐ City	4/5/11
6. Evelyn P. Liska	1196 Wilke Rd. St. Germain 54558	☒ Town ☐ Village ☐ City Cloverland	4/5/11
7. [illegible]	1516 Meister/Stockley Rd Pelican Lake, WI 54463	☒ Town ☐ Village ☐ City Schocpke	4/5/11
8. Ronald Thiel	11746 Thiel DR CRANDON 54520	☒ Town ☐ Village ☐ City CRANDON	4/5/11
9. George [illegible]	3264 Hancock LK Rd Harshaw, WI 54529	☒ Town ☐ Village ☐ City Woodboro	4/5/11
10. Nancy E. Scholz	5920 Hwy 8 W Rhinelander, Wi. 54501	☐ Town ☐ Village ☒ City Rhinelander	4-5-11

Certification of Circulator

I, Robert Talbot (name of circulator), certify:

I reside at 4475 County P Rhinelander, WI 54501 TWN OF PELICAN.
(circulator's residence - include number, street, and municipality)

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

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

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

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

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Robert E. Hilbert	Tomahawk Wi, 54487 W5894 Theisen Rd	☒ Town ☐ Village ☐ City BRADLEY	3/31/11
2. Delphine C. Hilbert	W5894 THEISEN Rd TOMAHAWK, WI. 54487	☒ Town ☐ Village ☐ City BRADLEY	3/31/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, DELPHINE C. HILBERT, certify:
(name of circulator)

I reside W5894 THEISEN Rd., TOMAHAWK, WI, 54487 BRADLEY.
(circulator's residence - include number, street, and municipality)

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

03-31-2011
(date)

Delphine C. Hilbert
(signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Candace Joslin	7627 Blackberry Drive Rhinelander WI 54501	☒ Town ☐ Village ☐ City Sugar Camp	2-24-11
2. [illegible]	7627 Blackberry Drive Rhinelander WI 54501	☒ Town ☐ Village ☐ City Sugar Camp	2-24-11
3. John P. Butler	3890 Forest Circle Eagle River, WI 54521	☒ Town ☐ Village ☐ City Washington	3/2/11
4. [illegible]	5673 Silver Shore Lane Eagle River WI 54521	☒ Town ☐ Village ☐ City New Bold	3/2/11
5. [illegible]	3300 Deerskin Road Eagle River 54521	☒ Town ☐ Village ☐ City Washington	3/2/11
6. [illegible]	5323 Rangeline Rd Eagle River, WI 54521	☒ Town ☐ Village ☐ City Lincoln	3/2/11
7. [illegible]	6681-A HWY 17 N Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Sugar Camp	03021
8. Dale Ray Sr.	4853 W. Smoky Lk N. Phelps WI	☒ Town ☐ Village ☐ City Phelps	3/02/11
9. Paul Ray	5376 Sugar Maple Rd. Phelps WI	☒ Town ☐ Village ☐ City Phelps	3/02/11
10. Dale Ray JR.	2428 Hwy 17 Phelps, WI 54554	☒ Town ☐ Village ☐ City Phelps	3-2-11

Certification of Circulator

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

I reside at 6045 BEAVER TR. EAGLE RIVER CLOVERLAND (circulator's residence - include number, street, and municipality).

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

3/2/2011 (date) Paula Visner (signature of circulator)

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

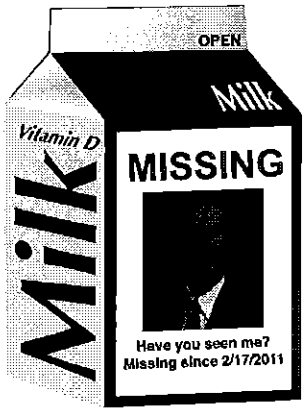
RECALL PETITION

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

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

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

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



STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Frederick A. Mehs	7380 TIMBER LANE MINOCQUA, WI 54548	☑ Town ☐ Village ☐ City	3/16/11
2. Robert M. Hudson	P.O BOX 382 Eagle River, Wi 54521	☑ Town Eagle River ☐ Village ☐ City	3/26/11
3. Theresa A. Poole	P.O. BOX 651 54521 Eagle River, WI	☑ Town ☐ Village ☐ City	3/26/11
4. Kari D Schwab	PO. Box 651 Eagle River, WI 54521	☑ Town ☐ Village ☐ City	3/26/11
5. [illegible]	1134 Little Dace Arbor Vitae, WI 54568	☑ Town Arbor Vitae ☐ Village ☐ City	~~54568~~ 3/26/11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 6045 BEAVER TR CLOVERLAND
(circulator's residence - include number, street, and municipality)

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

3/26/2011 (date) Paula Vis (signature of circulator)

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

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RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Kenneth e Race	11452 Wilega Rd. Woodruff Wis 54568	☒ Town ☐ Village ☐ City Arbor Vitae	3/30/11
2. Marion Race	11452 Wilega Rd. Woodruff - Wi 54568	☒ Town ☐ Village ☐ City Arbor Vitae	3/30/11
3.		☐ Town ☐ Village ☐ City	/ /11
4.		☐ Town ☐ Village ☐ City	/ /11
5.		☐ Town ☐ Village ☐ City	/ /11
6.		☐ Town ☐ Village ☐ City	/ /11
7.		☐ Town ☐ Village ☐ City	/ /11
8.		☐ Town ☐ Village ☐ City	/ /11
9.		☐ Town ☐ Village ☐ City	/ /11
10.		☐ Town ☐ Village ☐ City	/ /11

Certification of Circulator

I, Kenneth e Race, certify:
(name of circulator)

I reside 11452 Wilega Rd. Woodruff Wis. 54568 ARBOR VITAE.
(circulator's residence - include number, street, and municipality)

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

3-30-2011
(date)

Kenneth e Race
(signature of circulator)

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	N5319 Bradley St Gleason WI. 54435	☒ Town ☐ Village ☐ City Russ-11	2-26-11
2. [illegible]	N 17611 Hoyt Ridge Rd Merrill Wis	☒ Town ☐ Village ☐ City Pine River	2-26-11
3. [illegible]	N5455 Bachelors Ave Gleason WI	☒ Town ☐ Village ☐ City Russell	2-26-11
4. [illegible]	Gleason WI	☒ Town ☐ Village ☐ City Russell	2-26-11
5. Becky Kimmons	Gleason	☒ Town ☐ Village ☐ City Harrison	2-26-11
6. Shawn Kimmons	Gleason	☒ Town ☐ Village ☐ City Harrison	2-26-11
7. [illegible]	N5296 Hwy 17 Gleason WI 54435	☒ Town ☐ Village ☐ City Russell	2-26-11
8. [illegible] Richman	5966 Manitowoc Conover WI 54519	☒ Town ☐ Village ☐ City Conover	2-26-11
9. [illegible]	Merrill WI. N4176 Hwy 17 54452	☒ Town ☐ Village ☐ City Schill	2-26-11
10. [illegible]	(Merrill WI N4176 Hwy 17 54452	☒ Town ☐ Village ☐ City Schill	2-26-11

Certification of Circulator

I, Jim Maus, certify:
(name of circulator)

I reside W834 Rd A Lot Gleason, WI 54435
(circulator's residence - include number, street, and municipality) TWN OF RUSSELL

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

(signature of circulator)

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Page No. 4

697

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Harold Ockheim	N5366 HWY 17 Gleason	☑ Town ☐ Village ☐ City Russell	2-26-11
2. Daniel Jach	N5397 Town Hall Gleason, WI 54435	☑ Town ☐ Village ☐ City Russell	2-26-11
3. Timothy Schmidt	W1534 Hwy C Merrill, Wi	☑ Town ☐ Village ☐ City Schley	2-26-11
4. [illegible]	W1345 Prairie Pines Dr Gleason, WI	☑ Town ☐ Village ☐ City Russell	2-26-11
5. [illegible]	P.O. Box 22 Gleason WI 54435	☑ Town ☐ Village ☐ City Russell	2-26-11
6. Amy White	N5396 Hwy 17 Gleason, WI 54435	☑ Town ☐ Village ☐ City Russell	2-26-11
7. Donald Ross	W2802 Cty Rd J Gleason, WI 54435	☑ Town ☐ Village ☐ City Birch	2-26-11
8. Lynn M Ross	W2802 Cty Rd J Gleason WI 54435	☑ Town ☐ Village ☐ City Birch	2-26-11
9. Robin Jonnedeck	N4839 Cty Rd X Gleason WI 54435	☑ Town ☐ Village ☐ City Schley	2-26-11
10. Jeff Mondeck	N4839 Cty Rd X Gleason WI 54435	☑ Town ☐ Village ☐ City Schley	2-26-11

Certification of Circulator

I, Jim Maas, certify:
(name of circulator)

I reside W834 Rd AVE Gleason, WI 54435 RUSSELL TWN of RUSSELL.
(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)

(signature of circulator)

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

Page No. 8

698

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jim Foster	W2049 Hwy J Gleason Wis 54435	☐ Town ☐ Village ☐ City	2/26/11
2. Francine Noonan	805 West 2nd Merrill WI 54452	☐ Town ☐ Village ☒ City Merrill	2/26/11
3. [illegible]	805 WEST 2ND ST Merrill, WI 54452	☐ Town ☐ Village ☒ City Merrill	2-26-11
4. Russell Sutton	1004 MONROE ST Merrill WI 54452	☐ Town ☐ Village ☒ City Merrill	2-26-11
5. Nancy Leder	N8013 Wright Ave. Gleason, Wi. 54435	☒ Town ☐ Village ☐ City Harrison	2/26/11
6. Theodore A Leder Jr.	N8013 Wright ave. Gleason, Wis 54435	☒ Town ☐ Village ☐ City Harrison	2-26-11
7. Harry H Whitten	E304 Hat [illegible] Rhinelander, WI 54501	☒ Town ☐ Village ☐ City Crescent WI	2-26-11
8. [illegible]	N3721 Clover Merrill WI	☐ Town ☐ Village ☐ City Merrill WI	2-26-11
9. Robert J Moore	W864 Bridge Dr Gleason WI 54435	☒ Town ☐ Village ☐ City Russell	2-26-11
10. [illegible] Moore	W864 Bridge Dr Gleason, WI 54435	☒ Town ☐ Village ☐ City Russell	2-26-11

Certification of Circulator

I, Jim Mans, certify:
(name of circulator)

I reside W824 3rd AVE Gleason WI 54435 TWN RUSSELL.
(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)

(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
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Page No. 8

699

RECALL PETITION

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

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

STATEMENT OF REASON FOR RECALL

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

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or lire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Janice Northcott	6045 Grandview St Wittenberg	☐ Town ☒ Village ☐ City Wittenberg	4-17-11
2. Sarah Valkenberg	506 W. Summit Wittenberg	☐ Town ☒ Village ☐ City W. Hebberg	4-17-11
3. [illegible]	506 W. Summit St Wittenberg	☐ Town ☒ Village ☐ City Wittenberg	4.17.11
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, CHRISTOPHER J. MAGIERA, certify:
(name of circulator)

I reside 1506 PINE VIEW LANE, W AUSAU, WI 54403.
(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.

4/17/2011
(date)

Christopher J. Magiera
(signature of circulator)

GAB-170 (Rev.6/2007) The information on this form is required by §§ 8.40 and 9.10, Wis. Stats.
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Page No. 900