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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	3516 85th PLACE. Kenosha WI 53142	☐ Town ☐ Village ☑ City Kenosha	4/2/11
2. Cindy Vedder	23922 125th St Trevor, Wi. 53179	☑ Town ☐ Village ☐ City Salem ~~Kenosha~~	4-2-11
3. [illegible]	23922 125th street Trevor, Wi 53179	☑ Town ☐ Village ☐ City Salem ~~Kenosha~~	4-2-11
4. Zuna McCarty	7639 48th Ave Kenosha WI 53142	☐ Town ☑ Village ☐ City Pleasant Prairie	4/2/11
5. [illegible]	6430 37th Ave Kenosha WI 53142	☐ Town ☐ Village ☑ City Kenosha	4/2/11
6. [illegible]	6106 24th Apt 14	☐ Town ☐ Village ☑ City Kenosha	4-2-11
7. Cory M. Brownell	37633 91st Street Twin Lakes, WI 53181	☑ Town ☐ Village ☐ City Randall	4-2-11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 9907 Dunkelow Rd Franksville, WI 53126.
(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.

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

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 701

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

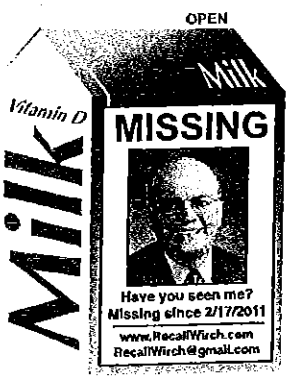
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Kevin Zimmerman	11649 216th Ave Bristol WI 53104	☐ Town ☑ Village ☐ City Bristol	3/27/11
2. Shawn Ruiz	2933 72nd St. Kenosha, WI 53143	☐ Town ☐ Village ☑ City Kenosha	3/27/11
3. Renee Hundley	7443 22nd Ave Kenosha WI 53143	☐ Town ☐ Village ☑ City Kenosha	3/28/11
4. Pam Garringer	4000 116th St Pleasant Prairie, WI	☐ Town ☑ Village ☐ City Pleasant Prairie	3/29/11
5. Cathy Pinci	1544-16th ave Kenosha WI 53140	☐ Town ☐ Village ☑ City Kenosha	3/31/11
6. Todd Mondenack	3515 63rd St KENOSHA WI	☐ Town ☐ Village ☑ City KENOSHA	4/2/11
7. Paul Jahnke	7412 32nd Ave Kenosha WI 53142	☐ Town ☐ Village ☑ City Kenosha	4-2-11
8. Angela Cooper	10835 84th Place Pleasant Prairie WI 53158	☐ Town ☑ Village ☐ City Pleasant Prairie	4/2/2011
9. Susan M Scherer	4700 64 Ave Kenosha WI 53144	☑ Town ☐ Village ☐ City ~~Pleasant Prairie~~ Somers	4/2/2011
10. Duwayne Scherer	4700 64 Ave Kenosha WI 53144	☑ Town ☐ Village ☐ City Somers	4/2/201

Certification of Circulator

I, Kathleen M. Becker, certify:
(name of circulator)

I reside at 6603-43rd Ave. Kenosha, WI 53142
(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.

4-2-2011
(date)

Kathleen M. Becker
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1702

RECALL PETITION

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District (jurisdiction or district of officeholder) petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin (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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. John J. White	1944-46 Ave. KE	☐ Town ☐ Village ☒ City KENOSHA	3-2-11
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, JOHN O DAY (name of circulator), certify:

I reside at 8715 36th KENOSHA WI 53142-2544 (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 O'Day (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

GAB-190 (Rev. 5/2007) The information on this form is required by §§ 9.10 and 9.18, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://elections.state.wi.us

Page No. 1703

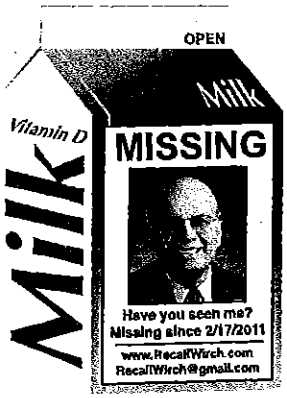
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	8764 COOPER RD PLEASANT PRAIRIE WI	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/2/11
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, SUSAN STONE, certify:
(name of circulator)

I reside at 1256 W. COURT ST., WHITEWATER, WI 53190.
(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)

Susan Stone
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

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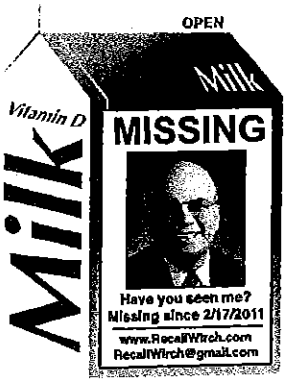
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	8574 - 56 AVE	☐ Town ☒ Village ☐ City Pleasant Prairie	4/2/11
2.	8525 56 Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	4/2/11
3.	5406 87th Pl	☐ Town ☒ Village ☐ City Pleasant Prairie	4/2/11
4. Carole Scotese	8801 54th AVE	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
5.	8801 54th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
6.	5207 86th	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
7.	5051 - 89th Pl	☐ Town ☒ Village ☐ City Pleasant Prairie	4/2/11
8.	4855 89th Pl	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
9.	5308 88 st	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
10.	5406 87th Place	☐ Town ☒ Village ☐ City Pl Prairie	4/2/11

Certification of Circulator

I, SUSAN STONE, certify:
(name of circulator)

I reside at 1256 W. COURT ST., WHITEWATER, WI 53190.
(circulator's residence - include number, street, and municipality)

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4/2/11
(date)

Susan Stone
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 105

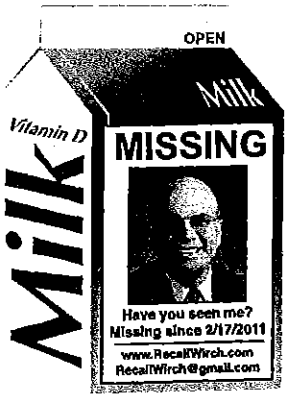
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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]	4325 12th st Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	4-02-11
2. [illegible]	5212 86th Place Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
3. Valerie A Motten	5212 86th Place Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/2/11
4. George McClone	5509 88th St. Pleas. Prairie WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/2/11
5. Susan McClone	5509 88th St Pleasant Prairie	☐ Town ☒ Village ☐ City Pl Prairie	4/2/11
6. [illegible]	Pleasant Prairie 8726-48 Ave	☐ Town ☒ Village ☐ City P. Pleasant Prairie	4-2-11
7. [illegible]	8714-50th Ave Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
8. Beth Simplin	8719 50 Ave Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Pr	4-2-11
9. [illegible] Brown	4868 87th Pl Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
10. Jean Dubrava	4760 87 Pl Kenosha 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11

Certification of Circulator

I, John H. Prijic (name of circulator), certify:

I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
(circulator's residence - include number, street, and municipality)

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

April 2, 2011 (date) John H. Prijic (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1706

RECALL PETITION

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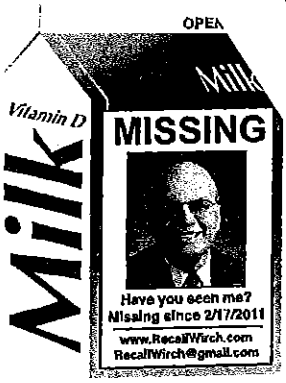
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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]	9174 - Prairie Village Dr Kenosha	☐ Town ☒ Village ☐ City Pleasant Prairie	3/31/11
2. [illegible]	9148 42ND CT KENOSHA	☐ Town ☒ Village ☐ City Pleasant Prairie	3-31-11
3. [illegible]	9905 55th Ave Kenosha	☐ Town ☒ Village ☐ City Pleasant Pr	4-2-11
4. [illegible]	7854-55 Ave Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
5. [illegible]	7854-55 AVE KENOSHA WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
6. Arlene Mauser	5322-99th St Kenosha, Wi -	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
7. [illegible]	8008 54th Ave Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
8. [illegible]	5222 84 St Kenosha Wi	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
9. [illegible]	5222-84 ST Kenosha Wi	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
10. Scott R. Renick	1734 - 136th Ave Union Grove WI 53182	☒ Town ☐ Village ☐ City Paris	4-2-11

Certification of Circulator

I, JOHN H. PRIJIC, certify:
(name of circulator)

I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
(circulator's residence - include number, street, and municipality)

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April 2, 2011 (date) — John H. Prijic (signature of circulator)

Please mail this form to:
Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1707

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

RECALL PETITION

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

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(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
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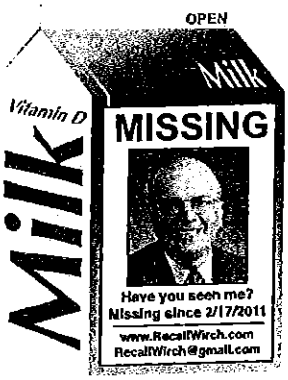
from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.



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]	7901 - 55th Ave Kenosha WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-2011
2. [illegible]	7901 - 53 Ave Kenosha, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
3. Ray Berkes	5454 - 79ST KENOSHA, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
4. James A Gray	7734-55TH AVE KENOSHA WI	☐ Town ☒ Village ☐ City PLEASANT PRARIE	4-2-11
5. [illegible]	5124 79th St. Kenosha, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
6. ~~[illegible]~~	~~[illegible]~~	☐ Town ☐ Village ☐ City	
7. J Middleton	5418 83 St Kenosha, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
8. Laura Bethe	5401 - 83rd Street Kenosha WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
9. [illegible]	5230-84 St Kenosha WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11
10. Nancy Mengo	5506 84 St Kenosha	☐ Town ☒ Village ☐ City Pleasant Prairie	4-2-11

Certification of Circulator

I, Deborah A. Prijic, certify:
(name of circulator)

I reside at 4816 84th Street, Kenosha, WI. 53142.
(circulator's residence - include number, street, and municipality)

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

April 2, 2011 — Deborah A. Prijic
(date) — (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 108

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Irene Royce	1906 86 Pl. Kenosha, W	☐ Town ☐ Village ☒ City Kenosha	4/4/11
2. Bill Sals	6905 67th St. Kenosha	☐ Town ☐ Village ☒ City Kenosha	4/4/11
3. Kathy Unsen	4942 - 46 Ave	☐ Town ☐ Village ☒ City Kenosha	4/4/11
4. George Edgar	402 78th St.	☐ Town ☐ Village ☒ City Kenosha	4/4/11
5. Lisa Voltz	4601 Sheridan Rd Apt #1	☐ Town ☐ Village ☒ City Kenosha	4/4/11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, MERLIN H. HAMBURG, certify:
(name of circulator)

I reside at 1843 - 15 Ave Kenosha, WI 53140.
(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)

Merlin H Hamburg (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1709

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Carilyn Denis	8733-33Rd Ave Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/8/11
2. Peggy Tippett	8733 33RD AVE KENOSHA WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/8/11
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, Nicole Alcalay, certify:
(name of circulator)

I reside at 2523-31st Street, Kenosha WI 53140 City of Kenosha.
(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.

3/9/11 (date)

Nicole L. Alcalay (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

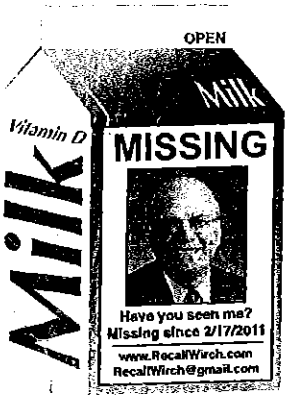
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	8314 207TH AVE BRISTOL, WI 53104	☐ Town ☒ Village ☐ City Bristol	4/5/11
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, ADAM KAWA, certify:
(name of circulator)

I reside at 8314 207TH AVE BRISTOL, WI 53104
(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)

[signature]
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 17 11

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Earnest M. Hotchkiss	6348 47th Ave	☐ Town ☐ Village ☑ City KENOSHA	3-29-11
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, X EARNEST M. HOTCHKISS, certify:
(name of circulator)

I reside at X 6348 47TH AVE KENOSHA, WI. 53142.
(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 3-29-11 (date) X Earnest M. Hotchkiss (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1712

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

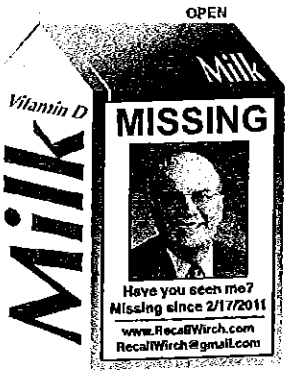
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	11151 270th Ave Trevor, WI 53179	☐ Town ☒ Village ☐ City Salem	04-02-11
2.	8104 Antioch Rd Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4-2-11
3.	841 136 Ave Union Grove WI 53182	☒ Town ☐ Village ☐ City Paris	4-2-11
4.	6310 240th Avenue Paddock Lake, WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	4-2-11
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Barbara Mines, certify:
(name of circulator)

I reside at 24006 64th Place, Salem WI 53168.
(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)

Barbara Mines
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1713

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

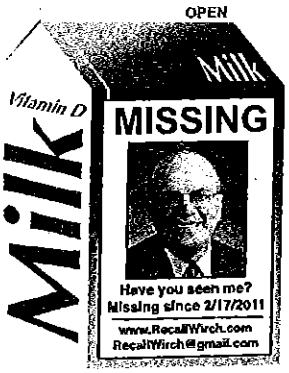
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Kristen Thompson	5912 6th place Kenosha, WI 53144	☑ Town Somers ☐ Village ☐ City	4/4/11
2. Marna Thompson	5912 6th Place Kenosha WI 53144	☑ Town ☐ Village Somers ☐ City	4-4-11
3. [illegible]	5620 10th Place Kenosha WI 53144	☑ Town ☐ Village Somers ☐ City	4/4/11
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, ~~[illegible]~~ Krista J Reck, certify:
(name of circulator)

I reside at 6007 76th St Kenosha WI 53144.
(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)

Krista J Reck
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 17/4

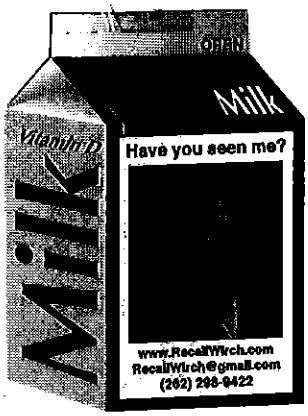
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Jennie Milski	348 Garfield St. Burlington WI 53105	☐ Town ☐ Village ☑ City Burlington	3/30/11
2. Jordan Milski	348 Garfield St Burlington WI 53105	☐ Town ☐ Village ☑ City Burlington	4/4/11
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, Jennie Milski - Jordan Milski, certify:
(name of circulator)

I reside at 348 Garfield St Burlington WI 53105.
(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) Jennie Milski (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1715

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Kevin Lasch Kevin Lasch	4916 79th Place Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	02-27-11
2. [illegible]	2730-83rd St KENOSHA, WI 53143	☐ Town ☐ Village ☒ City KENOSHA	2-27-2011
3. [illegible]	2730 - 83rd St Kenosha WI 53143	☐ Town ☐ Village ☒ City Kenosha	2-27-2011
4. [illegible]	8340-27th Av KENOSHA, WI. 53143	☐ Town ☐ Village ☒ City KENOSHA	2-27-2011
5. [illegible]	472-Low Horseshoe Twin Lakes WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	3-1-2011
6. [illegible]	26723 105th St Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	3-11-2011
7. [illegible]	26723 105th St Trevor WI 53179	☐ Town ☐ Village ☐ City Salem	4-4-2011
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Robert Allen Lasch, certify:
(name of circulator)

I reside at 26723 105th St. Trevor, WI 53179 SALEM.
(circulator's residence - include number, street, and municipality)

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

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

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1716

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
608-266-8003, 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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	26705 105th St Trevor WI 53179	☐ Town ☒ Village ☐ City Salem	3/2/11
2. Jennifer Faust	26801 107th St Trevor WI 53179	☐ Town ☒ Village ☐ City Salem	3/12/11
3. Darlene M Lasch	26723 105th St Trevor WI	☒ Town ☐ Village ☐ City Salem	4/4/11
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, Darlene Lasch, certify:
(name of circulator)

I reside at 26723 105th Street Trevor, WI 53179 SALEM.
(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)

Darlene M Lasch
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 17/7

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

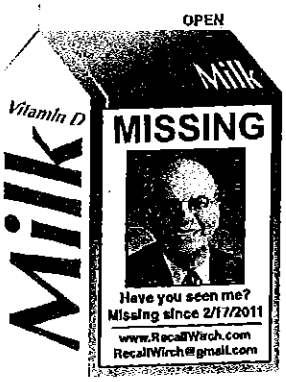
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Scott Niles	20104 82ND ST BRISTOL WI 53104	☐ Town ☒ Village ☐ City BRISTOL	3-24-11
2. MacAnne Niles	20104 82nd St. Bristol, WI 53104	☐ Town ☒ Village ☐ City Bristol	3-24-11
3. Andrew Sweeney	8138 205th Ave Bristol WI 53104	☐ Town ☒ Village ☐ City Bristol	3/26/11
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, SCOTT NILES, certify:
(name of circulator)

I reside at 20104 82ND ST BRISTOL, WI 53104
(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) Scott Niles (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

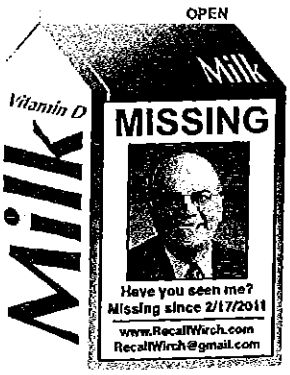
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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 Keyes	3621 109th St Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
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, Robert Keyes (name of circulator), certify:

I reside at 3621 109th St. Pleasant Prairie (circulator's residence - include number, street, and municipality).

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

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

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

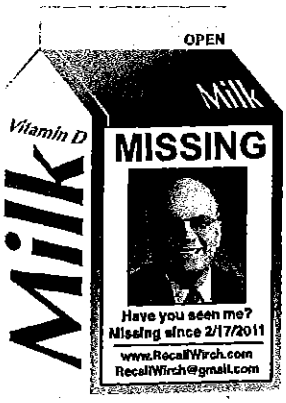
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	15004 73rd St	☐ Town ☐ Village ☒ City Kenosha	04Apr2011
2.	15004 73rd St	☐ Town ☐ Village ☒ City Kenosha	04Apr2011
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, Michelle Kranz, certify:
(name of circulator)

I reside at 15004 73rd St Kenosha
(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.

04Apr2011
(date)

(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1720

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. Thomas W. Coughlin	12811 1ST STR. STURTEVANT, WI. 53177	☑ Town ☐ Village ☐ City PARIS	3-26-11
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, THOMAS W. COUGHLIN, certify:
(name of circulator)

I reside at 12811 1ST STR. ; STURTEVANT WI 53177.
(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 Thomas W. Coughlin (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1721

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. Paul De Cesaro	9902 - 8th Ave.	☐ Town ☒ Village ☐ City Pleasant Prairie	3/14/11
2. Ben DeCesaro	9902 8th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	3.14.2011
3. Jason De Cesaro	9902 8th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	3/14/11
4. Danielle DeCesaro	9902 8th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	03/15/2011
5. Ann De	9902 8th Ave.	☐ Town ☒ Village ☐ City Pleasant Prairie	03/28/11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Jane DeCesaro, certify:
(name of circulator)

I reside at 9902-8th Ave, Pleasant Prairie WI 53158.
(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.

3/29/2011 (date)

Jane DeCesaro (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1722

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

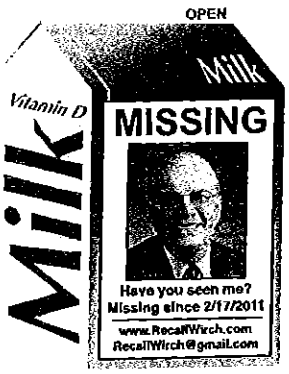
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. JACK TUCKER	3717 4th St	☐ Town ☐ Village ☒ City Kenosha	3/20/2011
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, JACK TUCKER, certify:
(name of circulator)

I reside at 3717 4th St - Kenosha, WI 53144.
(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.

3-20-2011
(date)

Jack Tucker
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [illegible]	10944 224TH Ave	☐ Town ☐ Village ☐ City Salem	3/5/11
2. Mark D [illegible]	10944 224TH Ave	☑ Town ☐ Village ☐ City Salem	3/5/11
3. James Cross	11247 224th Ave	☑ Town ☐ Village ☐ City Salem	3/5/11
4. Barbara Cross	11247 224th Ave. Bristol, WI	☑ Town ☐ Village ☐ City Salem	3/5/11
5. Bradley J. Smith	22230-75th St. Salem WI	☑ Town ☐ Village ☐ City Salem	3/9/11
6. [illegible]	24501 60TH PL. Salem, WI	☑ Town ☐ Village ☐ City Salem	3/15/11
7. [illegible]	22120 75th Salem Wis	☑ Town ☐ Village ☐ City Salem	3/15/11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, BRADLEY J. SMITH (name of circulator), certify:

I reside at 22230-75th St. - Salem, WI 53168 (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) [illegible] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 724

STATE OF WISCONSIN COUNTY OF KENOSHA

This instrument was acknowledged before me April on 5th, 2011
by Bradley J. Smith
Signed by [illegible] (Notary Public)
My commission expires on 11-10-13

RECALL PETITION

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

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	8763-3RD AVENUE	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/2011
2. Ronald Pataska	8763-3RD AVE	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/2011
3. Frances Pataska	8763-3 AVE.	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/2011
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, KEN PATASKA (name of circulator), certify:

I reside at 8763-3RD AVENUE, PLEASANT PRAIRIE, WI 53158 (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) [illegible] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1725

GAB-170 (Rev. 6/2007) The information on this form is required by §§. 9.10 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8023, http://gab.wi.gov email: gab@wi.gov

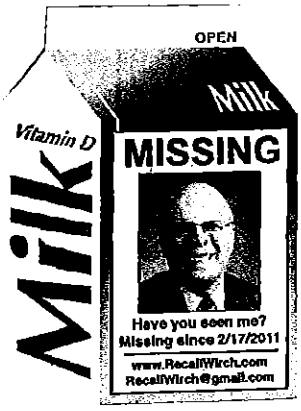
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Maria Chapman	614 Chapel Rd Twin Lakes, WI	☐ Town ☒ Village ☐ City TWIN Lakes	3/8/11
2. Stanley A Fulkerson	12523 Richmond Rd Twin Lakes WI 53181	☒ Town ☐ Village ☐ City Randall	3/8/11
3. Timothy A. May	25605 80th St Twin Lakes WI 53181	☐ Town ☒ Village ☐ City TWIN LAKES	3/8/11
4. Tom Cornell	143 East School St Twin Lks WI	☐ Town ☒ Village ☐ City TWIN LKS	3-9-11
5. Kerry Kettleson	39930 96th Genoa City	☒ Town ☐ Village ☐ City Genoa City Randall	3-24-11
6. Thomas W. Fry	9220 395th Genoa City WI	☒ Town ☐ Village ☐ City RANDALL Genoa City	3/24/11
7. Dan Spaeth	39335 93RD ST Genoa City WI	☒ Town ☐ Village ☐ City Randall	3/27/11
8. Leland Stohr	339 Lenhart ave Twin Lakes, WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	3-28-11
9. [illegible]	198 Lane Dr. Twin lakes WI.	☐ Town ☒ Village ☐ City TWIN LAKES	4/2/11
10. John M. [illegible]	37945 91ST ST TWINLAKES WI 53181	☒ Town ☐ Village ☐ City RANDALL	4/2/11

Certification of Circulator

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

I reside at 39405 90ND PL Powers lake WI 53159 PO BX 156 Randall
(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) Mark Starzyk (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1726

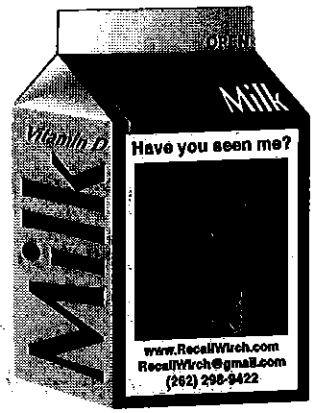
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Lorraine Sieker	569 Adams St	☐ Town ☐ Village ☒ City Burlington	3-31-11
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, X Lorraine Sieker, certify:
(name of circulator)

I reside at X 569 Adams St. Burlington, WI 53105
(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 3-4-11 (date) X Lorraine Sieker (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1727

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

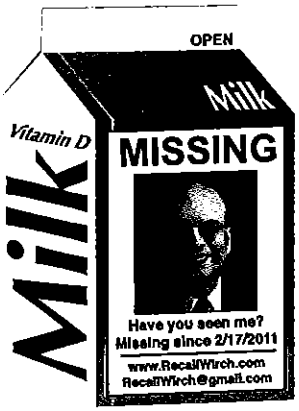
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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 Butterbrodt	4824 22 Ave	☐ Town ☐ Village ☒ City Kenosha	3/4/2011
2. Lisa Butterbrodt	4824 22 Ave	☐ Town ☐ Village ☒ City Kenosha	3-4-2011
3. Gladys A. Cole	8750 ~~Sher~~ RD #2 SHERIDAN	☐ Town ☐ Village ☒ City Kenosha	3-10-2011
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, GREG CHESACK, certify:
(name of circulator)

I reside at 8750 ~~Sher~~ SHERIDAN ROAD #2 KENOSHA, WI 53143.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1728

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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.	BURLINGTON	☑ Town ☐ Village ☐ City RANDALL	3/28/11
2.	BURLINGTON	☑ Town ☐ Village ☐ City RANDALL	3/28/11
3.	37537 87TH ST BURLINGTON	☑ Town ☐ Village ☐ City RANDAL	3/29/11
4.	375-37 87th Burlington Wi	☑ Town ☐ Village ☐ City Randall	3/30/11
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, X Kenneth Graves, certify:
(name of circulator)

I reside at X 375-37 87th St Burlington, Wi 53105.
(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 Kenneth Graves (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1729

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

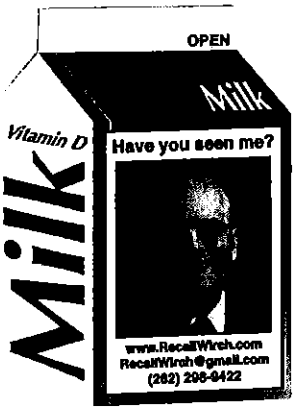
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. X Richard W Robers	30215 Bushnell Rd Burlington, WI 53105	X Town BURLINGTON ☐ Village ☐ City	04/04/11
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, X RICHARD W ROBERS, certify:
(name of circulator)

I reside at X 30215 BUSHNELL ROAD BURLINGTON, WI. 53105.
(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 04/04/11 (date)

X Richard W Robers (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1730

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

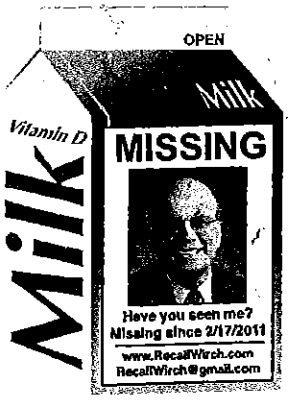
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Val Kizykowicz	10024-29th Ave Pleasant Prairie Wi 53158	☐ Town ☒ Village Pleasant Prairie ☐ City	4-5-2011
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, Val Kizykowicz, certify:
(name of circulator)

I reside at 10024-29th Ave Pleasant Prairie wi 53158.
(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) Val Kizykowicz (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Stacy Spracklin	10027-51 Court	☐ Town ☒ Village ☐ City Pleasant Prairie	4/1/11
2. Pat Spracklin	10027-51ST COURT	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/3/11
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, STACY SPRACKLIN, certify:
(name of circulator)

I reside at 10027-51 Ct, Pleasant Prairie, WI 53158.
(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)

Stacy Spracklin (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1732

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Connie Suwalski	2517 Bate St Racine, WI 53403	☐ Town ☐ Village ☒ City Racine	3/25/11
2. [illegible]	2517 Bate St Racine, WI 53403	☐ Town ☐ Village ☒ City Racine	3/25/11
3. [illegible]	1533 Lathrop Ave Racine Wisc	☐ Town ☐ Village ☒ City Racine	3/25/11
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, Connie Suwalski, certify:
(name of circulator)

I reside at 2517 Bate Street Racine, 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.

3/25/11 (date) Connie Suwalski (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1733

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Dan Hibbard	21400-31st Street Bristol, Wi. 53104 (mail address)	☒ Town ☐ Village ☐ City Paris	3/30/2011
2. Catherine M. Hebbard	21400-31st St Bristol, WI 53104	☒ Town ☐ Village ☐ City Paris	4/1/11
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, Dan Hibbard (name of circulator), certify:

I reside at 21400-31st Street Bristol, Wi 53104 (mailing address) Paris
(circulator's residence - include number, street, and municipality)

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

4/1/2011 (date)

Dan Hibbard (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1734

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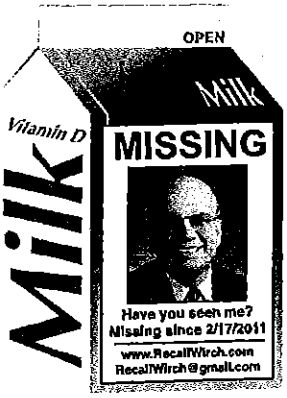
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Karen Kennedy	4515 Beverly Ln. Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
2. [illegible]	8720-30th AVE KENOSHA, WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/11
3. [illegible]	5424 82 ST KENOSHA WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/11
4. Robert Crane	9010-26 AVE KENOSHA, 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
5. Tamara Crane	9010 26 Ave Kenosh, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
6. Jill Easton	4516 83rd St Pleasant Prairie WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
7. [illegible]	9046-29th Ave Pleasant Prairie WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
8. [illegible]	8500 43 Ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
9. David Schuller	5319 73rd St Kenosha WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
10. Wanda Sue Jonger	3907 Prairie Village Kenosha 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11

Certification of Circulator

I, Deborah A. Prijic, certify:
(name of circulator)

I reside at 4816 84th St. Kenosha, WI. 53142 Pleasant Prairie.
(circulator's residence - include number, street, and municipality)

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

April 5, 2011 (date) Deborah A. Prijic (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

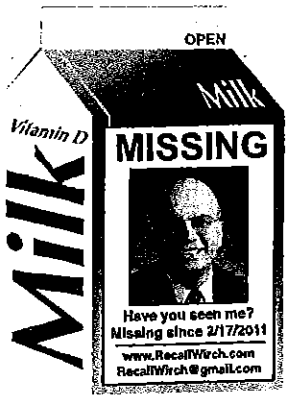
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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]	3907 Prairie Village Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
2. Donald R. Herlach	8227-43 Ave Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
3. Carole H. Herlach	8227 43 ave. Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
4. Margaret Brechnitz	3401 89th st Kenosha, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
5. Peter Cozzarelli	3919 86TH STREET KENOSHA, WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4-5-11
6. Josephine Mierzejewski	9141-41st Av. Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
7. Terrence [illegible]	8529 Cooper Rd Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
8. Katherine Vigneric	3926 83 Pl Kenosha, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
9. [illegible] S. Vigneric	3926-83 Pl Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
10. Ronald D. Fiohn	9210 PRAIRIE VILLAGE DR PLEASANT PRAIRIE, WI	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4-5-11

Certification of Circulator

I, Deborah A. Prijic, certify:
(name of circulator)

I reside at 4816 84th Street, Kenosha, WI 53142 Pleasant Prairie.
(circulator's residence - include number, street, and municipality)

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

April 5, 2011 — Deborah A. Prijic
(date) — (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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

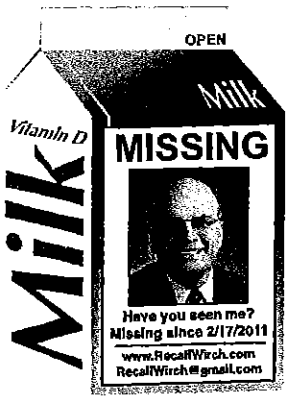
RECALL PETITION

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

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [illegible]	4303-75th St. #99 Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
2. [illegible]	9180-Prairie Village Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
3. [illegible]	4100-85th St Kenosha, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
4. [illegible]	9024 Cooper rd Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
5. [illegible]	9043-29th Ave Kenosha WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
6. [illegible] III	8647-89½ St Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
7. Natasha [illegible]	5025 70th Street Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
8. [illegible]	5034 Harrison Rd Pleasant Prairie WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
9. Lynn Kanggaard-Laettner	5034 Harrison Rd Pleasant Prairie 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
10. Robert W. Behn	8307 Cooper Rd. Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11

Certification of Circulator

I, Deborah A. Prijic, certify:
(name of circulator)

I reside at 4816 84th Street, Kenosha WI 53142 Pleasant Prairie.
(circulator's residence - include number, street, and municipality)

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April 5, 2011 (date) Deborah A. Prijic (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1737

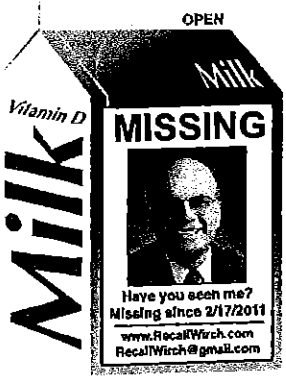
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [illegible]	8507 48th Ave Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
2. [illegible]	4810, 76th S Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
3. David A Mielke	7216 51st Ave Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
4. Jane Dorey	4100 85 St Kenosha WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Deborah A. Prijic, certify:
(name of circulator)

I reside at 4816 84th Street, Kenosha, WI 53142 Pleasant Prairie.
(circulator's residence - include number, street, and municipality)

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

April 5, 2011 (date) Deborah A. Prijic (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
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We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [illegible]	9302 11th Ave Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
2. Paul Hudson	10624 Lakeshore Dr. Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
3. [illegible]	9907 SHERIDAN RD PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City PLEASANT PRAIRE	4/5/11
4. Judith McCaughey	8762 Lakeshore Dr. Pl. Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
5. [illegible]	152 - 113th St P.P. 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
6. David J Prz	10210-33rd P.PR. WI.	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, JOHN H. PRIJIC, certify:
(name of circulator)

I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
(circulator's residence - include number, street, and municipality)

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

April 5, 2011 (date) John H. Prijic (signature of circulator)

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Page No. 1739

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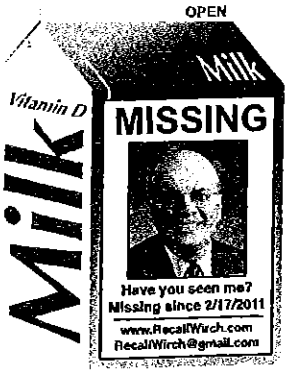

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Bryan Hanson	8118 7th Ave Pleasant Prairie	☐ Town ☑ Village ☐ City Pleasant Prairie	4-5-11
2. GO FUCK YOURSELF		☐ Town ☐ Village ☐ City FUCK YOU	
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, JOHN H PRIJIC, certify:
(name of circulator)

I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
(circulator's residence - include number, street, and municipality)

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April 5, 2011 (date) John H Prijic (signature of circulator)

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P.O. Box 26 • Silver Lake, WI 53170
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Page No. 1740

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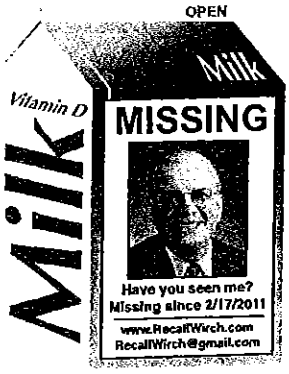
(name of officeholder to be recalled and office)

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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Drepel Jr	11475 8th Ave Pleasant Pr. Wi	☐ Town ☒ Village ☐ City Pleasant Prairie	4/05/11
2. Fred R White	8730 Lakeshore Dr. Pleasant Prairie Wi	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
3. Margaret M. White	8730 Lakeshore Dr Pleasant Prairie Wi	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
4. Ryan Ruyle Jr	8602 - 3rd Ave P.P. Wi 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
5. Nancy Rains	3006 - 93 ST Pleasant Prairie Wi	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
6. Brian K. Kirk	9050 26th Ave. Kenosha, WI 53143	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
7. Joyce Freund	8769 Lakeshore Pleasant Pr.	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
8. Richard Hirsch	118 - 86TH ST PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4-5-11
9. Dale Van Vlissingen	10708 Lakeshore Dr. Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
10. Thomas J Wood	1131 - 92 Place Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11

Certification of Circulator

I, John H. Prijic, certify:
(name of circulator)

I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
(circulator's residence - include number, street, and municipality)

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

April 5, 2011 — John H Prijic
(date) — (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

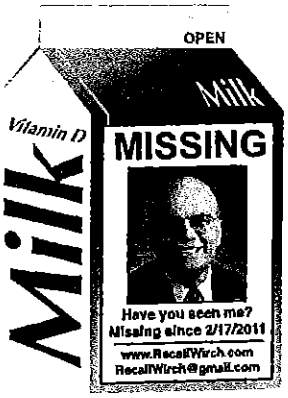
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. Lisa A Kung	4623 87 PL Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/2/11
2. Joseph Mancuso	10331 32 AV PLEASANT PRAIRIE, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
3. Lance [illegible]	11051-8TH AVE P.P. WI. 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
4. Joe [illegible]	10116 28TH AVE 53158 Pleasant Prairie WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
5. [illegible]	9521 29 Ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
6. Valentina Cisor	8757 LAKESHORE DR PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
7. John A. Murray	6266-92ND Place Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	04/05/11
8. Angela Lynn	11329 2nd Ave Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
9. [illegible]	9707 33rd Ave Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
10. Marie Stacy	11139 91 PL PL. PR. WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4.5.11

Certification of Circulator

I, John H. Prijic (name of circulator), certify:

I reside at 4816 - 84th Street, Kenosha, WI 53142
(circulator's residence - include number, street, and municipality)

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4/5/11 (date) John H. Prijic (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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Page No. 1742

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	10001 29th AV Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
2. Amy Rappell	11201-9th Ave Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
3. Jeffrey Swan	8766 PLEASANT PRAIRIE 3RD AVE	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4-5-11
4. Luke Lyon	11329 2nd Ave Pleasant Prairie WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
5. [illegible]	8[illegible] 116th [illegible] P[illegible] Pr WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
6. Wanda Muldrotney	10522-22 Ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
7. Thomas A. Lyon	10544 FOURTH AVE. PLEASANT PRAIRIE 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
8. Elmer Kuller	910 92ND PL PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
9. Rachel Morovic	11221 11th ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
10. Joseph Clark	999 91st Place Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11

Certification of Circulator

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April 5, 2011 (date) John H. Prijic (signature of circulator)

Please mail this form to: Recall Wirch
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www.RecallWirch.com • RecallWirch@gmail.com

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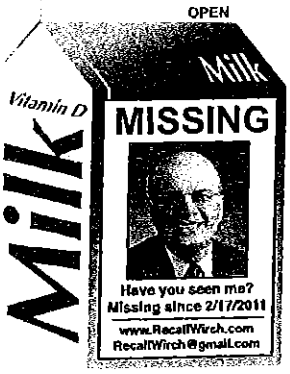
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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



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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Gabriela Sladen	999 91st PL Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	April 5-11
2. Carolyn Zyglski	9901 11th Ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
3. Andrea E Zyglski	9901 - 11 Ave Pleasant Prairie WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
4. [illegible]	10050 8th Ave PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/11
5. [illegible]	9250 29th AVE #56 KENOSHA, WI 53143	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/11
6. Mary Ann Lockwood	9940-37th Ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/05/11
7. Julie Thrasher	8964 24th AVE. 	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
8. [illegible]	10011 Lakeshore Dr Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
9. Lauren Magers	4125 10th St Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
10. William C Golle	10011 LAKESHORE DR Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11

Certification of Circulator

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I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
(circulator's residence - include number, street, and municipality)

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April 5, 2011 (date) John H. Prijic (signature of circulator)

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We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [illegible]	1010 [illegible] St, Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
2. Allecia Mager	4125 104th St, Pl. Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
3. Paul Gordon	11226 11TH AVE, PL PRAIRIE	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
4. Claudia Reutelar	2222 Springbk, Pl. Praire	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
5. Susan C. Schmidtke / SUSAN C. SCHMIDTKE	11128 4th Avenue, Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
6. WILLIAM C MARSHALL	10511 3rd Ave, Pleasant Prairie 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
7. Carrie Ormsby	11119 10th Ave, Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
8. Louise Meyer	11206 - 10th Ave, Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
9. Carol A. [illegible]	211 87th Street, Pleasant Prairie, WI 53177	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
10. [illegible] Sunday	8753 Lakeshore Drive, Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11

Certification of Circulator

I, JOHN H. PRIJIC, certify:
(name of circulator)

I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
(circulator's residence - include number, street, and municipality)

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April 5, 2011 (date) — John H. Prijic (signature of circulator)

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(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Christopher A Cerigille	10310 32nd Ave Pleasant Pr, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
2. Linda Barry	11114 LAKESHORE DR PLEASANT PR, WI 53158	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	4/5/2011
3. [illegible]	10208 29th Ave Pleasant Pr. Wi 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
4. [illegible]	10135 28th Ave Pleasant Prairi Wi 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
5. Maureen D Fay	11475 8th AVE Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
6. [illegible]	10301 28th Avenue Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
7. [illegible]	8214 7th Ave Pleasant Prairie Wi 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
8. [illegible]	11114 LAKE SHORE DR PLEASANT PRAIRIE WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
9. Kathy Mattioli	8754-3 Ave Pl Pr 53158 Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
10. LeAnn Blachowicz	811 95th st. Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11

Certification of Circulator

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(name of circulator)

I reside at 4816 - 84th Street, Kenosha, WI 53142 Pleasant Prairie
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April 5, 2011 (date) John H. Prijic (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1746

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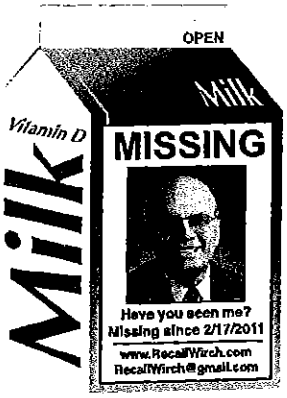
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [signature]	6462-83rd St Jason V. Free	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
2. [signature]	10064 55th Ave Amy DeLost	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
3. [signature]	4529 122nd Mike Berger	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
4. [signature] Collen Norton	215 W. Depot St Silver Lake	☐ Town ☒ Village ☐ City Silver Lake	4-5-11
5. [signature]	10625 41st St Ryan Paradise	☐ Town ☐ Village ☒ City Kenosha	4-5-11
6. [signature]	9218 Door Rd Anne M. Riccio	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Chris Kemper, certify:
(name of circulator)

I reside at 118 116th St. Pleasant Prairie, WI 53158.
(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]
(signature of circulator)

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Page No. 1747

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 22nd Wisconsin State Senate District,
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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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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 Carrick	9925 4th Ave	☐ Town ☑ Village ☐ City Pleasant Prairie	4/2/2011
2. Edwal Schaefer	128 116th St	☐ Town ☑ Village ☐ City Pleasant Prairie	4/2/2011
3. [illegible]	118 116th St	☐ Town ☑ Village ☐ City Pleasant Prairie	4/2/2011
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Chris Kemper, certify:
(name of circulator)

I reside at 118 116th St Pleasant Prairie, WI 53158,
(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)(n), Wis. Stats.

4-2-11
(date)

(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

GAB-130 (Rev.6/2003) The information on this form is required by §§ 9.10 and 9.10, Wis. Stats.
This form is prepared 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. 1748

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Emmaetta Loots	6605 96th ave Kenosha	☐ Town ☐ Village ☒ City Kenosha	4/6/11
2. Michael Graham	9216 74 rd St Kenosha	☐ Town ☐ Village ☒ City Kenosha	4/6/11
3. Mary Dart	6807 93rd Cr K	☐ Town ☐ Village ☒ City KENOSHA	4/6/11
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, [signature], certify:
(name of circulator)

I reside at 10600 61st St Kenosha, 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.

4/6/2011
(date)

[signature]
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1749

GAD-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

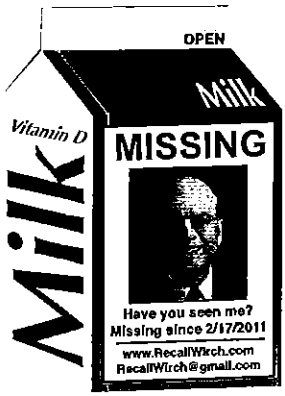
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Angel Mardenez	7200-45th Ave	☐ Town ☐ Village ☒ City Kenosha	4-5-11
2. [illegible]	6750-50 Ave	☐ Town ☐ Village ☒ City Kenosha	4-5-11
3. [illegible]	6522 42nd Ave	☐ Town ☐ Village ☒ City Kenosha	4-5-11
4. [illegible]	6108-43rd Ave	☐ Town ☐ Village ☒ City Kenosha	4-5-11
5. [illegible]	4715-70st	☐ Town ☐ Village ☒ City Kenosha	4-5-11
6. Susan McKnight	4630 WILSON RD Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	4-5-11
7. [illegible]	5823 85RD PL KENOSHA WI	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
8. Patricia Stuckey	6721 49th Ave 53142	☐ Town ☐ Village ☒ City Kenosha	4.5.11
9. [illegible]	6926-40th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11
10. [illegible]	7201-51 Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11

Certification of Circulator

I, JOHN INFANTE, certify:
(name of circulator)

I reside at 6313 42ND AVE KENOSHA WI 53142.
(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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1750

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

SHANE 11

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Rose A. Calder	7003 Pershing Blvd	☐ Town ☐ Village ☒ City Kenosha	4/5/11
2. A. Nagill	6743 · 49 Ave	☐ Town ☐ Village ☒ City Kenosha	4/5/11
3. [illegible]	7002 39th Ave	☐ Town ☐ Village ☒ City Kenosha	4/5/11
4. Rosalinn Spitzer	6603-49 ave	☐ Town ☐ Village ☒ City Kenosha	4-5-11
5. Pam Klemm	6552-49 AVE	☐ Town ☐ Village ☒ City Kenosha	4-5-11
6. Mark T. [illegible]	6522 48 AVE	☐ Town ☐ Village ☒ City Kenosha	4-5-11
7. [illegible]	6517 43RD AVE	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
8. Michelle A. Borecki	6853-44th Court	☐ Town ☐ Village ☒ City Kenosha	4-5-11
9. Kent Fonk	7028 40TH Av	☐ Town ☐ Village ☒ City Kenosha	4-5-11
10. [illegible]	8122 60th AV	☐ Town ☐ Village ☒ City Kenosha	4/5/11

Certification of Circulator

I, JOHN INFANTE (name of circulator), certify:

I reside at 6313 42ND AVE KENOSHA WI 53142
(circulator's residence - include number, street, and municipality)

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

4/6/11 (date) [signature] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1751

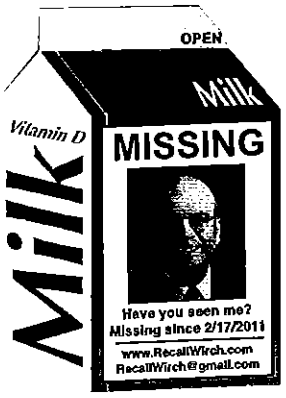
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Rosa Herman	5918-82nd Pl. Kenosha WI 53142	☐ Town ☐ Village ☑ City Kenosha	4/5/11
2. Conrad Herman	5918 82nd PL Kenosha WI 53142	☐ Town ☐ Village ☑ City Kenosha	4/5/11
3. Chad Johnson	5827 81st Street Kenosha 53142	☐ Town ☐ Village ☑ City Kenosha	4/5/11
4. Sarah McGraw	4608-60st street KENOSHA, WI 53142	☐ Town ☐ Village ☑ City KENOSHA	4/5/11
5. Mary Gunderson	6406 81st Kenosha, WI 53142	☐ Town ☐ Village ☑ City Kenosha	4-5-11
6. John Gunderson	" " Kenosha, WI 53142	☐ Town ☐ Village ☑ City Kenosha	4-5-11
7. Ricky Gunderson	" " Kenosha, WI 53142	☐ Town ☐ Village ☑ City Kenosha	4-5-11
8. [illegible]	4401 68TH ST. KENOSHA	☐ Town ☐ Village ☑ City KENOSHA	4-5-11
9. [illegible]	6000 45th AVE Kenosha, WI	☐ Town ☐ Village ☑ City Kenosha	4-5-11
10. Tilda Drum	6203-24th Ave Kenosha WI 53142	☐ Town ☐ Village ☑ City Kenosha WI	4-5-11

Certification of Circulator

I, JOHN INFANTE, certify:
(name of circulator)

I reside at 6313 42ND AVE KENOSHA WI 53142.
(circulator's residence - include number, street, and municipality)

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

4/6/11 (date) — (signature of circulator)

Please mail this form to: RecallWirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1752

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

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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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	4629 Wilson Rd. Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
2. [illegible]	6016 42nd AVE KENOSHA - WI. 53142	☐ Town ☐ Village ☒ City Kenosha	4/5-11
3. [illegible]	6600 48th Ave Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	4/5/11
4. [illegible]	5721 60th PL Kenosha, WI	☐ Town ☐ Village ☒ City KENOSHA	4/5/1
5. [illegible]	6409 - 41st Ave KENOSHA	☐ Town ☐ Village ☒ City Kenosha	4/5/11
6. [illegible]	4418 WILSON ROAD KENOSHA WI 53142	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
7. [illegible]	6531 - 40th Kenosha WI	☐ Town ☐ Village ☒ City Ward 29 Kenosha	4-5-11
8. [illegible]	6021 46th Ave Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	4-5-11
9. [illegible]	2222 Springbrook Rd Pleasant Prairie, WI 53158	☒ Town ☐ Village ☐ City Pleasant Prairie	4-5-11
10. Kathleen Hyde	6908 - 47th Ave Kenosha WI 53140	☐ Town ☐ Village ☒ City Kenosha	4-5-11

Certification of Circulator

I, JOHN INFANTE, certify:
(name of circulator)

I reside at 6313 42ND AVE KENOSHA WI 53142.
(circulator's residence - include number, street, and municipality)

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

4/6/11 (date) [signature] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1753

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	4630 WILSON RD	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
2. JAN MCKNIGHT	4630 WILSON RD	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
3. [illegible]	6017 47th Ave	☐ Town ☐ Village ☒ City Kenosha	4/5/11
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, JOHN INFANTE (name of circulator), certify:

I reside at 6313 47ND AVE KENOSHA WI 53142 (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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. Milton R. Gross	3103 100 AVE Kenosha WI	☑ Town ☐ Village ☐ City Somers	4-5-11
2. Kathleen Lichter	9120 18th St. Kenosha, WI	☑ Town ☐ Village ☐ City Somers	4-5-11
3. Merle Le May	5307 Wash Rd Kenosha W.	☑ Town ☐ Village ☐ City Somers	4-5-11
4. Mary Ellen LeMay	5307 - Wash. Rd. Kenosha WI	☑ Town ☐ Village ☐ City Somers	4-5-11
5. Eugene Routhenus	9855 - 38th ST Kenosha WIS	☑ Town ☐ Village ☐ City Somers	4-5-11
6. Marilyn Routhenus	9855 38th St Kenosha, WI 53144	☑ Town ☐ Village ☐ City Somers	4-5-11
7. Gloria Ambrose	11515 1st Str Lot 2 Sturt. Wis	☑ Town ☐ Village ☐ City Somers	4-5-11
8. Judith Bankenbush	5701 1st Racine WI	☑ Town ☐ Village ☐ City Somers	4-5-11
9. Adnan Bankenbush	5701 1st Racine WI	☑ Town ☐ Village ☐ City Somers	4-5-11
10. Ronald Fliess	11121 Burlington Rd Kenosha Wi 53144	☑ Town ☐ Village ☐ City Somers	4-5-11

Certification of Circulator

I, Courtney Svatek, certify:
(name of circulator)

I reside at 1621-43rd Av Kenosha WI 53144.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	8215-12th ST. KENOSHA, WI	☑ Town ☐ Village ☐ City SOMERS	4/5/11
2. Michael V. Voll	8616-11 PL Somers, WI 53171	☑ Town ☐ Village ☐ City Somers	4/5-11
3. Lisa M. Mau	5924-1st Place Kenosha, WI 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
4. [illegible]	5924 1st Place Kenosha WI 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
5. [illegible]	1435-45th Ave Kenosha, WI 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
6. [illegible]	1435-45th Ave Kenosha WI 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
7. Ronda Bailey	341-100th Ave Kenosha WI	☑ Town ☐ Village ☐ City Somers	4-5-11
8. [illegible]	1138-87th Ave. #8 Kenosha, WI	☑ Town ☐ Village ☐ City Somers	4/5/11
9. [illegible]	5306 22nd St. KENOSHA, WI. 53144	☐ Town ☐ Village ☑ City SOMERS	4-5-11
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Sherry Svatek (SHERRY SVATEK), certify:
(name of circulator)

I reside at 162 43 AV Kenosha 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.

4-5-11 (date) Sherry Svatek (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1756

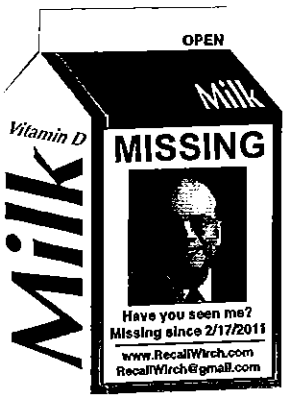
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	4510 18th St KENOSHA	☑ Town ☐ Village ☐ City Somers	4/5/11
2. Charlotte Gagnon	8324 12th place Kenosha	☑ Town ☐ Village ☐ City Somers	4/5/11
3. [illegible]	8324 12th PL Kenosha	☑ Town ☐ Village ☐ City Somers	4/5/11
4. Dennis Wandbracht	2240-47 Ave Ken. Wis 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
5. Ruth Wandbracht	2240-47th Ave. Kenosha, WI	☐ Town ☐ Village ☐ City Somers	4/5/11
6. Zak Weiss	6318 11th Pl Kenosha, WI	☑ Town ☐ Village ☐ City Somers	4/5/11
7. [illegible] R. Thomas	957-88th Av. Kenosha Wi	☐ Town ☑ Village ☐ City Somers	4-5-11
8. Steven Pfund	11515 1st St. #39 Kenosha, WI 53177	☑ Town ☑ Village ☐ City Somers	4-5-11
9. Kathy Pfund	11515 1st St. #39 Kenosha, WI 53177	☑ Town ☑ Village ☐ City Somers	4-5-11
10. Kelly Mana	1661 4th ST AVE KENOSHA, WI 53144	☑ Town ☐ Village ☐ City SOMERS	4-5-11

Certification of Circulator

I, Courtney Svatek, certify:
(name of circulator)

I reside at 1621-43rd Ave Kenosha.
(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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1757

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Dan Whitt	6306 11th Place Kenosha WI 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
2. [illegible]	1254 Village Ct Dr #2 Kenosha, WI 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
3. [illegible]	460 56th Ave	☑ Town ☐ Village ☐ City Somers	4/5/11
4. [illegible]	460 - 56 Ave.	☑ Town ☐ Village ☐ City Somers	4/5/11
5. [illegible]	1608 41st AVE. SOMERS, WI 53144	☑ Town ☐ Village ☐ City SOMERS	4/5/11
6. [illegible]	3411-47th Ave Kenosha WI	☑ Town ☐ Village ☐ City Somers	4/5/11
7. [illegible]	3411 47 Ave Kenosha, WI	☐ Town ☐ Village ☐ City Somers	4/5/11
8. [illegible]	6310 43rd St. #93 Kenosha, WI. 53144	☑ Town ☐ Village ☐ City SOMERS	4/5/11
9. Carri L Satter	15611 45th Ave Kenosha, WI 53144	☑ Town ☐ Village ☐ City Somers	4-5-11
10. Paul R Bertelsen	2012 30th St Kenosha WI 53140	☐ Town ☐ Village ☑ City Kenosha	4-5-11

Certification of Circulator

I, Courtney Svatek (name of circulator), certify:

I reside at 1621-43rd Av Kenosha (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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1758

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	8430 12th St. Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	4/5/11
2. Pam Ruge	6215-45th St Kenosha, WI 53144	☒ Town ☐ Village ☐ City Somers	4/5/11
3. Ruth Beisavenger	3705 27th ST Lot 51 Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	4/5/11
4. Adam Whyte	8126-12 St #2 Somers, WI 53171	☒ Town ☐ Village ☐ City Somers	4/5/11
5. James A. Rubeck	6125 10th STREET KENOSHA, WI 53144	☒ Town ☐ Village ☐ City SOMERS	4/5/11
6. Barbara R. Rubeck	6125 10th St Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	4/5/11
7. Jolyn Warner	1331 41st Ave Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	4/5/11
8. Rita Schmaling	135-52 ave Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	4/5/11
9. Edward J. Tudor	1211 88 AVE KENOSHA WI.	☒ Town ☐ Village ☐ City SOMERS	4/5/11
10. Sharon K. Tudor	1211 88th AVE. KENOSHA WI 53144	☒ Town ☐ Village ☐ City SOMERS	4/5/11

Certification of Circulator

I, Courtney Svatek, certify:
(name of circulator)

I reside at 1621-43rd Av Kenosha.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1759

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

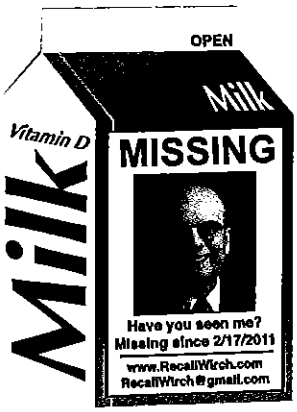
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	5414-38 AVE	☐ Town ☐ Village ☒ City KENOSHA	3/5/11
2. [illegible]	3607-13TH ST	☐ Town ☐ Village ☒ City KENOSHA	3/5/11
3. [illegible]	3537-16th AVE	☐ Town ☐ Village ☒ City Kenosha	3/10/11
4. [illegible]	5622 34th Ave	☐ Town ☐ Village ☒ City Kenosha	3-10-11
5. [illegible]	4807 101st Pl. Pr.	☐ Town ☒ Village ☐ City Pl. Prairie	4/1/11
6. [illegible]	5408-38th Ave	☐ Town ☐ Village ☒ City Kenosha	4/3/11
7. [illegible]	4907-101st PL PR	☐ Town ☒ Village ☐ City Pl. Prairie	4/4/11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, DEBORAH ZIERK, certify:
(name of circulator)

I reside at 3607 13TH ST. KENOSHA.
(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) [illegible] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1760

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

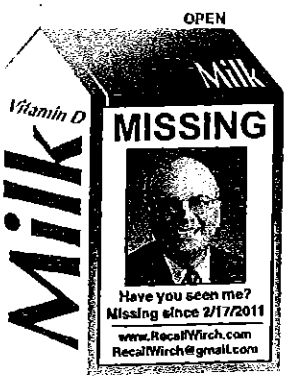
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Dan [illegible]	6320 10th Place	☑ Town ☐ Village ☐ City Kenosha Somers	4-5-11
2. Harvey V. Hedden	12209 3 Ave Kenosha WI 53144	☑ Town ☐ Village ☐ City Somers	4-5-11
3. Jacob Smith	2012 30th street Kenosha WI	☐ Town ☐ Village ☑ City Kenosha	4-5-11
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, Joshua R. Tamayo, certify:
(name of circulator)

I reside at 1138 87th Ave Apt. 12 Kenosha WI 53144 Somers.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1761

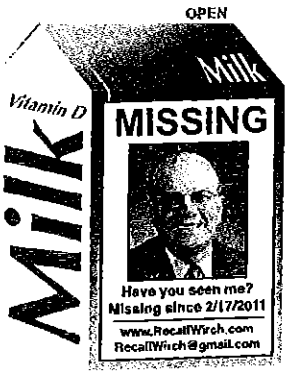
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Milena Fiala	5230 28th Str. KENOSHA, WI 53144	☐ Town ☐ Village ☑ City Kenosha	3-30-11
2. [illegible]	5222 28th St Kenosha WI 53144	☐ Town ☐ Village ☑ City Kenosha	3/30/11
3. [illegible]	5214 28th Kenosha WI 53144	☐ Town ☐ Village ☑ City Kenosha	3/30/11
4. Pam [illegible]	4630-15th St Kenosha WI 53144	☐ Town ☐ Village ☑ City Kenosha	4/3/11
5. Gary [illegible]	6201-73T KENOSHA WI 53144	☑ Town ☐ Village ☐ City SOMERS	4/5/11
6. James O. [illegible]	6301-44ST UNIT 118 KENOSHA, WI 53144	☑ Town ☐ Village ☐ City SOMERS	4/5/11
7. Bruce Solymon	1230 93rd Ave Kenosha WI 53144	☑ Town ☐ Village ☐ City Somers	4/5/11
8. [illegible]	2012 30th St Kenosha WI 53140	☐ Town ☐ Village ☑ City Kenosha	4/5/11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 1415 97th Avenue Kenosha WI 53144
(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.

5 APR 11 (date) M. Skalitzky (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1762

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Laura J Smith Bartelsen	2012 38th St Kenosha 53140	☐ Town ☐ Village ☒ City Kenosha	4-5-11
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, Michael Skalitzky, certify:
(name of circulator)

I reside at 1415 97th Avenue Kenosha WI 53144.
(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.

5 APR 11 (date) M. Skalitzky (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1763

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	135 22nd Ave	☒ Town ☐ Village ☐ City Kenosha	3/26/2011
2. [illegible]	135-22. Ave.	☒ Town ☐ Village ☐ City Kenosha	3/26/2011
3. [illegible]	1643 12th Ave Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/27/2011
4. [illegible]	1618-12th Ave	☒ Town ☐ Village ☐ City Kenosha	3/27/11
5. Janet Cardinali	1618-12th Ave Kenosha, WI	☒ Town ☐ Village ☐ City Kenosha	3/27/11
6. Teene Omelianchuk	1637-12th Ave. Kenosha, WI 53140	☒ Town ☐ Village ☐ City Kenosha	3-27-11
7. Valerie Pfaff	858 Elizabeth Ln Silver Lake, WI 53170	☐ Town ☒ Village ☐ City Silver Lake	3-28-11
8. Chad McGovern	2319-31 Street	☐ Town ☐ Village ☒ City Kenosha	4-4-11
9. Cheryl McGovern	2319-31st Street	☐ Town ☐ Village ☒ City Kenosha	4-4-11
10. [illegible]	7990 Pinewood Drive Burlington WI	☒ Town ☐ Village ☐ City Burlington	4-5-11

Certification of Circulator

I, ED WANBOLAT, certify:
(name of circulator)

I reside at 1331-41st AVE ~~Kenosha~~ Somers.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1764

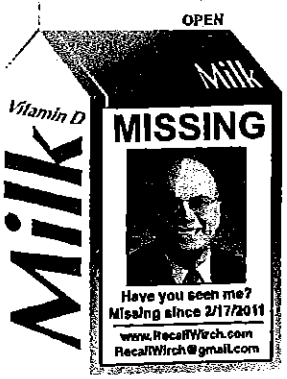
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	7922 39th Ave Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	4/5/11
2.	3412 - 7th St Kenosha WI	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
3.	8211 22nd Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
4.	4026 7th Ave Kenosha	☐ Town ☐ Village ☒ City Kenosha	4/5/11
5.	7713 38th AVE KENOSHA 53142	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
6.	7916 24th AVE KENOSHA, WI 53143	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
7.	3509 71ST ST. KENOSHA, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
8.	1412 62ND STREET KENOSHA	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
9.	8129 16th Ave Kenosha	☐ Town ☐ Village ☒ City Kenosha	4-5-11
10.	6720 243rd Ave Salem WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	4.5.11

Certification of Circulator

I, VINCE SCHMUKI, certify:
(name of circulator)

I reside at 1412 E. OLIVE ST. SHOREWOOD WI 53211.
(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)

Vince Schmuki
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

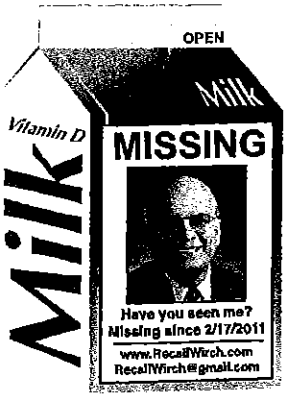
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Carrie Angel	7102 - 36th Ave Kenosha WI 53142	☐ Town ☐ Village ☑ City Kenosha	4/5/11
2. [illegible]	7923 47th Court KENOSHA, WI 53142	☐ Town ☐ Village ☑ City KENOSHA	4/5/11
3. Angela Vocine	6414 - 12TH AVE.	☐ Town ☐ Village ☑ City KENOSHA	4-5-11
4. Mirja Smith	1022 82nd Street Kenosha, WI 53143	☐ Town ☐ Village ☑ City Kenosha	4-5-11
5. Rachel Kuroe	7546-30th Ave Kenosha, WI 53142	☐ Town ☐ Village ☑ City Kenosha	4-5-11
6. James Guthrie	7851 32nd Ave Kenosha WI	☐ Town ☐ Village ☑ City Kenosha	4/5/11
7. John Scott	1713 30th St. Kenosha WI	☐ Town ☐ Village ☑ City Kenosha	4-5-11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, VINCE SCHMUKI, certify:
(name of circulator)

I reside at 1412 E. OLIVE ST. SHOREWOOD WI 53211.
(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)

Vince C. Schmuki (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1766

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Amy L Dilm	9819 271st Ave Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
2. Randy Schermeier	12010 259th Ave Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
3. Paul [illegible]	24775 Wilmot Rd. Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
4. Harmony Tchecka	24775 WILMOT RD Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
5. [illegible]	25540 RUNWAY W. TREVOR, WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
6. [illegible]	Camp Lake, Wis	☒ Town ☐ Village ☐ City SALEM	4-5-11
7. [illegible]	10826 267th Ave Trevor WI 53179	☐ Town ☐ Village ☐ City Salem	4-5-11
8. [illegible]	26419 [illegible] Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	4-5-11
9. Katty [illegible]	30221 Wilmot Rd Wilmot WI 53192	☒ Town ☐ Village ☐ City Salem	4-5-11
10. Brian [illegible]	29301 Wilmot Rd Trevor Wi 53179	☒ Town ☐ Village ☐ City Salem	4-5-11

Certification of Circulator

I, Elliot Rotzlaff, certify:
(name of circulator)

I reside at 7603 6th Ave Kenosha WI, 53143.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	2210 1st Circle Kenosha WI 53140	☒ Town ☐ Village ☐ City Kenosha	4-5-11
2. [illegible]	12023 256 AVE TREVOR WI 53179	☒ Town ☐ Village ☐ City ~~TREVOR~~ Salem	4-5-11
3. [illegible]	28601 107th St Trevor, WI 53179	☐ Town ☐ Village ☐ City ~~Trevor~~ Salem	4-5-11
4. [illegible]	10440 268th AVE TREVOR WI 53179	☒ Town ☐ Village ☐ City ~~TREVOR~~ Salem	4-5-11
5. [illegible]	9916 278TH AVE CAMPBLAKE 53109	☒ Town ☐ Village ☐ City SALEM	4-5-11
6. [illegible]	11507 270 AVE Trevor WI 53179	☒ Town ~~☒ Village~~ ☐ City Salem ~~Trevor~~	4-5-11
7. [illegible]	9810 304th Ave. Burlington, WI 53105	☒ Town ☐ Village ☐ City Salem	4-5-11
8. [illegible]	11008 268th Ave Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	4-5-11
9. [illegible]	27605 113th st Trevor WI	☒ Town ☐ Village ☐ City SALEM ~~Trevor~~	4-5-11
10. [illegible]	27531 113th St Trevor WI 53179	☒ Town ☐ Village ☐ City SALEM ~~Trevor~~	4-5-11

Certification of Circulator

I, Elliot Retzlaff (name of circulator), certify:

I reside at 7603 6th Ave Kenosha WI 53143
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1768

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Pauline Moy	10403 294th Ave	☒ Town ☐ Village ☐ City ~~TREVER~~ Salem	4/5/11
2. ~~Barry Schaefer~~	~~25106 107th St~~	☒ Town ☐ Village ☐ City ~~TREVOR~~	~~4/8/11~~
3. Alene Buffa	200 School St Silver Lake WI	~~☐ Town~~ ~~☐ Village~~ ☐ City ~~Salem~~ Silver Lake Village	4/5/11
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, Elliot Retzloff, certify:
(name of circulator)

I reside at 7603 6th Ave Kenosha WI 53147
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1769

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

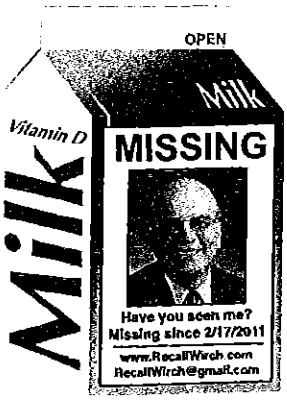
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Amy Carey	5412-38 ST Pl. Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	3/12/11
2. Warren Beth	15420 12th STREET KENOSHA, WI 53144	☒ Town ☐ Village ☐ City Somers	3/14/11
3. Barry Carey	9229 26th Ave Kenosha WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/15/11
4. Ruth Beth	15420 12St Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers ~~Kenosha~~	3/15/11
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Patricia Salerno (name of circulator), certify:

I reside at 8720-34th Ave Kenosha WI 53142
(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.

3/16/11 (date) Patricia Salerno (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1770

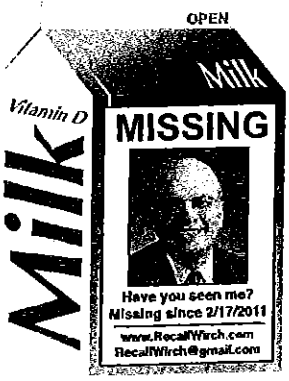
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Rebecca Baertsyen	10049 65th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	3-19-11
2. Ryan [illegible]	10049 65th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	3-19-11
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, Patricia Salerno (name of circulator), certify:

I reside at 8720-34th Ave Kenosha WI 53142
(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.

3-20-11 (date) Patricia Salerno (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. M. D. Smolinski	8848-33 Ave	☐ Town ☐ Village ☑ City Kenosha	4/5/11
2. Amy Van Slochteren	8840-32 AVE	☐ Town ☐ Village ☑ City KENOSHA	4/5/11
3. Sheila Van Slochteren	8840-32 Ave	☐ Town ☐ Village ☑ City Kenosha	4.05.11
4. Sue Smolinski	8848-33 Ave	☐ Town ☐ Village ☑ City Kenosha	4/5/11
5. Greg Oldham	9137 33rd Ave	☐ Town ☐ Village ☑ City Kenosha	4/5/11
6. Michelle Stemler	3419 86th St.	☐ Town ☐ Village ☑ City Kenosha	4/5/11
7. Olga M. Jowlski	8753-37 Ave	☐ Town ☐ Village ☑ City Kenosha	4-5-11
8. Lauren Bratton	3225-85 St	☐ Town ☐ Village ☑ City Kenosha	4/5/11
9. Carol Vescora	8939-34th Ave.	☐ Town ☐ Village ☑ City Kenosha	4/5/11
10. Patricia Cunningham	8924-38 AVE #7 Kenosha, WI 53142	☐ Town ☐ Village ☑ City Kenosha	4/5/11

Certification of Circulator

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

I reside at 4034 Washington Rd #215 Kenosha (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) Mark Walkowski (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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

RECALL PETITION

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

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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 Vescura	8939 34th AVE KENOSHA WIS	☐ Town ☐ Village ☒ City KENOSHA	4/5/11
2. Elizabeth Jones	4242 95th St. P.P. WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie P.P.	4/5/11
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 Walkowski (name of circulator), certify:

I reside at 4034 Washington Rd #215 Kenosha (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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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RECALL PETITION

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

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(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Andrew Phillips	12219 259th Ave Trevor Wis 53179	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
2. DON BRAAKMAN	24917 125TH ST. TREVOR WI 53179	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
3. JILL ANDERSON	30909 114TH ST WILMOT WI 53192	☑ Town ☐ Village ☐ City SALEM	4/5/11
4. DON RAMBADT	12520 280th Trevor, WI 53179	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
5. Tammy Pollard	26055 108th St TREVOR WI 53179	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
6. MIKE CULAT	27620 122nd ST TREVOR WI	☑ Town ☐ Village ☐ City SALEM	4/5/11
7. Jim Culat	27620 122nd Trevor WI	☑ Town ☐ Village ☐ City Salem	4/5/11
8. Dennis Williams	11319 Tuttle Rd TREVOR WI	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
9. James Dery	29010 112 St TREVOR 53179	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
10. [illegible]	28505 106th St. TREVOR	☑ Town ☐ Village ☐ City Salem ~~TREVOR~~	4.5.11

Certification of Circulator

I, Amy Giles-Maurer, certify:
(name of circulator)

I reside at 257 Old Green Bay Rd, Kenosha WI - Town of Somers.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [illegible]	9500 271 st Av	☑ Town ☐ Village ☐ City Salem	4/5/2011
2. [illegible]	12043-258 Trevor	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
3. [illegible]	1654 -266 Trevor WI 53179	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4-5-11
4. [illegible]	27705 98th TREVOR WI.	☑ Town ☐ Village ☐ City ~~TREVOR~~ Salem	4-5-11
5. Roxie Radmer	9500 271 St Ave TREVOR, WI	☑ Town ☐ Village ☐ City Salem ~~Trevor~~	4-5-11
6. Brandon [illegible]	11426 Fox River Dr Wilmot WI	☑ Town ☐ Village ☐ City Salem ~~Wilmot~~	4-5-11
7. Robert [illegible]	11201 Tuttle Rd TREVOR WI	☑ Town ☐ Village ☐ City Salem ~~TREVOR~~	4-5-11
8. [illegible]	11008 248th Ave Trevor, WI 53179	☑ Town ☐ Village ☐ City Salem ~~TREVOR~~	4-5-11
9. James [illegible]	26941 103RD PL. TREVOR WI	☐ Town ☑ Village ☐ City Salem ~~TREVOR~~	4/5/11
10. Ken [illegible]	27101 115th St. TREVOR, WI 53179	☐ Town ☑ Village ☐ City ~~Trevor~~ Salem	4/5/11

Certification of Circulator

I, Christine Borgin, certify:
(name of circulator)

I reside at 6147 Taylor Ave., Racine WI Mount Pleasant.
(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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. [illegible]	7217 60th Ave Apt. G3 Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
2. [illegible]	6203 - 47th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11
3. [illegible]	5302 70th St Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	4-5-11
4. Kathy Varral	5821 60th Street Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11
5. [illegible]	5821 69th Street Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11
6. Danielle Cooper	5819-103rd St. Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
7. [illegible]	6316-59th Av Kenosha Wi 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
8. [illegible]	5305 44th Kenosha, Wi 53404	☐ Town ☐ Village ☒ City Kenosha	4/5/11
9. [illegible]	6916 64th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
10. [illegible]	6305 82nd Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11

Certification of Circulator

I, John G. Miller, certify:
(name of circulator)

I reside at 7911-30th Ave Kenosha, 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)

John G. Miller
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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Page No. 1776

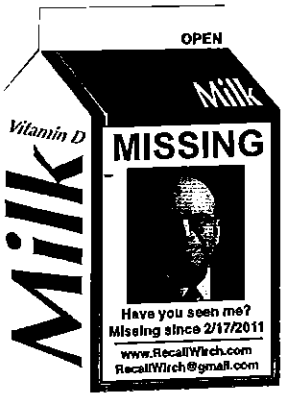
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. Susan M. Schenning	6336-58 Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11
2. Judith A. Mohr	8200-75th St. #T65 Kenosha, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
3. C. Connell	6915 67th St. #108 Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11
4. STEVE GROSZ	6331 59TH AVENUE KENOSHA, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	4-5-11
5. [illegible]	7217-60th Ave G3 KENOSHA WI 53142	☐ Town ☐ Village ☒ City KENOSHA	4/5/11
6. [illegible]	6917 61 AVE Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
7. Rachel Ahr	6314 59th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
8. Gilberto R. Cruz	6513 85th Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
9. [illegible]	6513 85th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
10. M.K. Rajendra	6205 72ND ST Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11

Certification of Circulator

I, John G. Miller (name of circulator), certify:

I reside at 7911-30th Ave Kenosha, 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)

John G. Miller (signature of circulator)

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www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1777

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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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Michelle Colburn	6925 70th Ct. #114 Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4-5-11
2. Greg Zebelman	6722 57th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
3. Christine Pinto	5714 106th St. Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
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, John G. Miller (name of circulator), certify:

I reside at 7911-30th Ave Kenosha, WI
(circulator's residence - include number, street, and municipality).

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4-5-11 (date) John G. Miller (signature of circulator)

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www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1778

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

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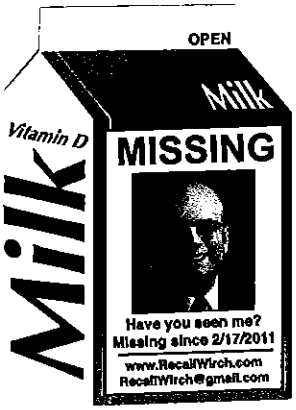
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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 Sheehan	27901 60th St Salem, Wis.	☑ Town ☐ Village ☐ City Salem	4-5-11
2. Mary Lewto	22840 128th St Bristol WI	☑ Town ☐ Village ☐ City Salem	4-5-11
3. Joan Landy	11110 237th Place Trevor, WI	☑ Town ☐ Village ☐ City Salem	4/5/11
4. Lorry Spencer	9901 256th Ave Salem WI	☑ Town ☐ Village ☐ City SALEM	4/5/11
5. Danielle Jablonski	8547 235th Ave. Salem. WI 53168	☑ Town ☐ Village ☐ City Salem	4/5/11
6. Dan Friedrichs	8646 226th Av Salem WI 53168	☑ Town ☐ Village ☐ City Salem	4/5/11
7. ~~[illegible]~~	~~[illegible]~~	☐ Town ☐ Village ☐ City	
8. Walter Ryan	22403 53rd St Salem, WI 53168	☑ Town ☐ Village ☐ City Salem	4/5/11
9. Wendy Beyffer	26217 100th St Salem WI 53168	☑ Town ☐ Village ☐ City Salem	4/5/11
10. [illegible]	8116 246th Ave S	☑ Town ☐ Village ☐ City Salem	4/5/11

Certification of Circulator

I, Bernard J. Kean, certify:
(name of circulator)

I reside at 23611 127 TH. ST. TREVOR, WI. SALEM.
(circulator's residence - include number, street, and municipality)

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

april 5, 2011 (date) Bernard J. Kean (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1779

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

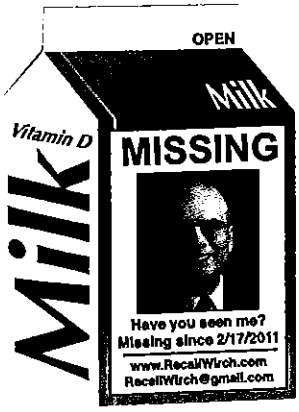
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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]	7640A Shorewood Dr	☒ Town ☐ Village ☐ City Salem	4/5/11
2. [illegible]	23215 116th Pl. Trevor, WI	☒ Town ☐ Village ☐ City Salem	4/5/11
3. [illegible]	23200 - 111th Place Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
4. [illegible]	23410 112TH St Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
5. Linda Skorupa	8414 273 Ave Salem Wi 53168	☒ Town ☐ Village ☐ City Salem	4/5/11
6. [illegible]	22843 116th St Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
7. Duane Keller	24951 87th St. #1 Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
8. Donna Olsen	24527-84th St Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
9. Christine Burler	30462 76th St. Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
10. [illegible]	8540 234th AVE SALEM WI 53168	☒ Town ☐ Village ☐ City SALEM	4-5-11

Certification of Circulator

I, Bernard J. Kean, certify:
(name of circulator)

I reside at 23611 127 TH. ST. TREVOR, WI. Salem
(circulator's residence - include number, street, and municipality)

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april 5, 2011 (date) Bernard J. Kean (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1780

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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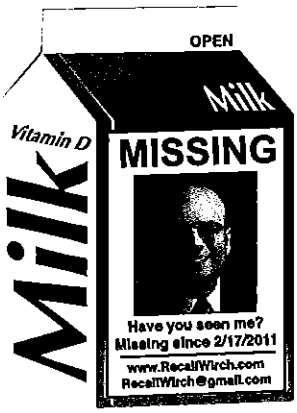
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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



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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. Lori Young	8410 245th Ave Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4/5/11
2. James Pfeifer	12815 238TH AVE BRISTOL, WI 53104	☒ Town ☒ Village ☐ City Salem	4.5.11
3. James Bennett	24847 89th St SALEM WI	☒ Town ☐ Village ☐ City SALEM	4-5-11
4. Larry Pilesh	6331 218th Ave Bristol WI	☒ Town ☐ Village ☐ City Salem	4-5-11
5. Cheryl Wittman	21206 118th St Bristol WI 53104	☒ Town ☐ Village ☐ City Salem	4-5-11
6. Sharon Buskie	23001 120th. St TREVOR WI, 53179	☒ Town ☐ Village ☐ City Salem	4-5-11
7. Jim Thompson	23509 82nd pl. Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
8. James E. Jester	22000 75th. Salem Wis. 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
9. Joyce Jester	24911 103rd St. Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
10. Robert J Burnett	8387 249th Ave SALEM WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11

Certification of Circulator

I, Bernard J. Kean, certify:
(name of circulator)

I reside at 23611 127 TH. ST. TREVOR, WI. Salem.
(circulator's residence - include number, street, and municipality)

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april 5, 2011 (date) Bernard J. Kean (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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

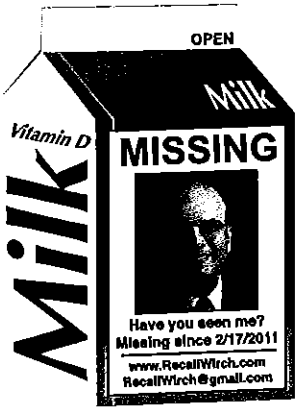
RECALL PETITION

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

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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



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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. Marla A Majors	8535 221st Ave Salem	☒ Town ☐ Village ☐ City Salem	4-5-11
2. Esther A. Olson	7620-256th AVE Salem	☒ Town ☐ Village ☐ City Salem	4-5-11
3. Jeffrey T Barnes	21716 117th St. Bristol, WI	☒ Town ☐ Village ☐ City Salem	4-5-11
4. [illegible]	11110 237TH Place Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
5. M. Fragel	9109 256TH AVE SALEM WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
6. Richard Kuhlmann	24717 82nd ST Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
7. [illegible]	25140 83rd ST SALEM WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
8. Kerry Kaye	25800 121st Street Salem, WI 53179	☒ Town ☐ Village ☐ City Salem	4 5 11
9. [illegible]	23610 87 PL TREVOR WI 53179	☒ Town ☐ Village ☐ City Salem	4-5 11
10. Maine Thompson	23509 82 PL Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11

Certification of Circulator

I, Bernard J. Kean, certify:
(name of circulator)

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

april 5, 2011 (date) Bernard J. Kean (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1782

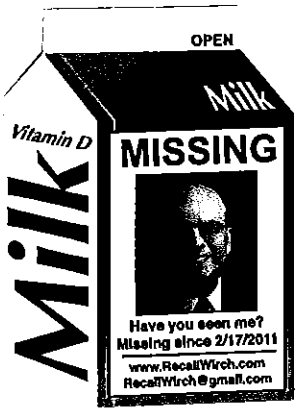
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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]	22057 127 St Burlington WI 53105	☒ Town ☒ Village ☐ City Salem	4/5/11
2. [illegible]	8547 235th Ave Salem Wis. 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
3. [illegible]	23325 WI S Salem 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
4. [illegible]	27311-85 Pl Salem 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
5. Cliff Balson	22324 83 St Salem WI	☒ Town ☐ Village ☐ City Salem	4-5-11
6. Evelyn Niedzie	8924 270th AVE. SALEM WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
7. [illegible]	24941 87th St #5 Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
8. [illegible]	8426 236th AVE 53168 Salem WI	☒ Town ☐ Village ☐ City Salem	4-5-11
9. [illegible]	8489 234 AVE Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-2011
10. [illegible]	25141-85TH ST SALEM WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11

Certification of Circulator

I, Bernard J. Kean, certify:
(name of circulator)

I reside at 23611 127TH. ST. TREVOR, WI. SALEM.
(circulator's residence - include number, street, and municipality)

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april 5, 2011 (date) Bernard J. Kean (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1783

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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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Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. Julie Yankee	22254 86 St Salem, WI	☒ Town ☐ Village ☐ City Salem	4-5-11
2. Margaret Borden	24817 82nd St Salem, WI	☒ Town ☐ Village ☐ City Salem	4-5-11
3. Lisa Lorie	21915 84th St Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
4. [illegible]	23408-81st Place Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-11
5. Roberta Durley	10630 Antioch Rd Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4/5/11
6. Juanita Rociewski	8902 257th Ave Salem Wis 53168	☒ Town ☐ Village ☐ City Salem	4.5.11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Bernard J. Kean, certify:
(name of circulator)

I reside at 23611 127TH. ST. TREVOR, WI. Salem.
(circulator's residence - include number, street, and municipality)

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

April 5, 2011 (date) Bernard J. Kean (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1784

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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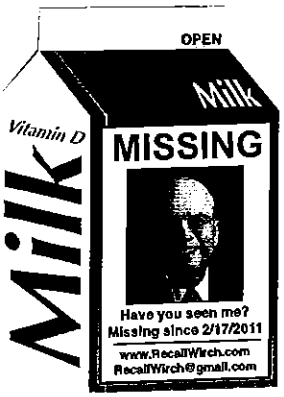
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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



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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	23408 81st PL SALEM WI	☒ Town ☐ Village ☐ City Salem	4-5-11
2.	9055 270TH	☒ Town ☐ Village ☐ City SALEM	4/05/11
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, Marilyn Parker, certify:
(name of circulator)

I reside at 26210 103rd St., Trevor, WI 53179 SALEM.
(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)

Marilyn Parker
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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

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(jurisdiction or district of officeholder)

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(name of officeholder to be recalled and office)

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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]	7121 288 ave Salem WI.	☒ Town ☐ Village ☐ City Salem	4-5-11
2. Edward Kaye	12605 224th AVE	☒ Town ☐ Village ☐ City Salem ~~Trevor~~	4/5/11
3. DeWayne Anderson	25225 60th Salem, WI	☒ Town ☐ Village ☐ City Salem	4/5/11
4. [illegible]	23600 127th St Trevor, WI	☒ Town ☐ Village ☐ City SALEM ~~Trevor~~	4/5/11
5. Ronald J Zullo	24824 82nd St Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4/5/11
6. Michael [illegible]	10610 269TH AVE Trevor WI 53179	☒ Town ☐ Village ☐ City Trevor	4/5/11
7. P English	8707 233rd AVE SALEM	☒ Town ☐ Village ☐ City SALEM	4-5-11
8. Carol Mangalat	24941 87th St Salem 53168	☒ Town ☐ Village ☐ City SALEM	4-5-11
9. [illegible]	22105 116th St Bristol WI 53104	☒ Town ☐ Village ☐ City Salem	4-5-11
10. Regina Caddy	21721 84th St Salem WI	☒ Town ☐ Village ☐ City Salem	4/5/11

Certification of Circulator

I, Marilyn Parker, certify:
(name of circulator)

I reside at 26210 103rd St. Trevor, WI 53179 Salem.
(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) Marilyn Parker (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	8414 273 RD SALEM WI 53168	☒ Town ☐ Village ☐ City Salem	4/5/2011
2. Jodi Deisher	12134 247th Ave Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/2011
3. Sharon Spencer	26033 93rd St Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-2011
4.	11615 241st Avenue Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	4-5-2011
5.	22207 86th St Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4-5-2011
6.	26217-100th Street Salem Wis.	☒ Town ☐ Village ☐ City Salem	4-5-2011
7.	23205 111TH PLACE TREVOR WI 53179	☒ Town ☐ Village ☐ City Salem	4/5/11
8.	27403 85th St Salem WI 53168	☒ Town ☐ Village ☐ City Salem	4/5/11
9. Ellen Hanson	8413 Antioch Rd Salem, WI. 53168	☒ Town ☐ Village ☐ City Salem	4/5/11
10.	7905 26th Ave. Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	4/5/11

Certification of Circulator

I, Marilyn Parker (name of circulator), certify:

I reside at 26210 103rd St., Trevor WI 53179 Salem.
(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) Marilyn Parker (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1787

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Cynthia R. Murray	30053 247th Ave Salem, WI 53168	☒ Town ☐ Village ☐ City Brighton	3/1/2011
2. [illegible]	1770 E Lakeshore Dr Twin Lakes WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	3/3/2011
3. Mildred Hartel	25121 Silver Lk. Rd. Salem wi. 53168	☒ Town ☐ Village ☐ City Salem Wi 53168	3/15/11
4. [illegible]	25114 85TH ST SALEM WI 53168	☒ Town ☐ Village ☐ City SALEM	3/16/11
5. Caroline M Everett	25114 85TH ST SALEM WI 53168	☒ Town ☐ Village ☐ City SALEM	3/16/11
6. Destree Bromstad	7946 256th Ave Salem, WI 53168	☒ Town ☐ Village ☐ City SALEM	4·3·11
7. Bobbie Dziki	1770 E Lakeshore Dr Twin Lakes WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	4-3-11
8. Phil Peckle-Dziki	29920 102nd St Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	4-3-11
9. Kimberly Barreras	211 W. North St Silver Lake, WI 53170	☒ Town ☒ Village ☐ City Silver Lake	4-4-11
10. Emerson Barreras	211 West North St. Silver Lake, WI 53170	☐ Town ☒ Village ☐ City Silver Lake	4-4-11

Certification of Circulator

I, PHILIP J. DZIKI, certify:
(name of circulator)

I reside at 29920 102ND St., TREVOR (TOWN OF SALEM), WI 53179 MUNICIPALITY TOWN OF SALEM
(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.

04-04-2011
(date)

[signature]
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1788

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

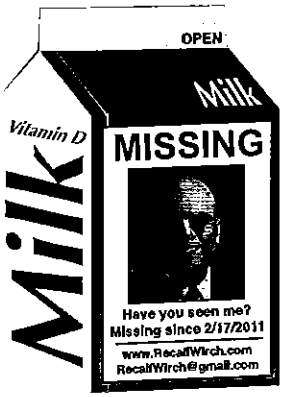
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	23707 32nd St Salem, 53168	☐ Town ☒ Village ☐ City Paddock Lake	4-5-11
2. Susan Mallett	24426 77th St Salem WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	4/5/11
3. Connor Brunkhorst	24 47th Ave Salem, WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	4/5/11
4.	Paddock Lk WI 53168 23309 62nd St	☐ Town ☒ Village ☐ City Paddock Lake	4-5-11
5. Denise Daniels	24300-67th St Salem, WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	4-5-11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, JASON MYRES, certify:
(name of circulator)

I reside at 1280 Village Centre Dr. #C Somers, WI 53144.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Kimberly D Cavenkirk	23400 62nd St. Paddock Lake WI 53168	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
2. Paul Stupe	6109 243 Ave Paddock Lake WI	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
3. Lynn Stoan	24319 67th ST. Salem, WI	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
4. Constance E Bergman	6345 235 St Paddock Lake WI	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
5. Jim Rupecin	7741 243rd Ave Salem, WI 53168	☐ Town ☑ Village ☐ City Paddock Lake	4/5/11
6. Cynthia Cullatt	24615 69th St. Salem, WI 53168	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
7. [illegible]	6801 243 RD Salem, WI	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
8. [illegible]	6530 243 CT SALEM WI	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
9. Debra Mannis	6042 242nd Ave PADDOCK LK WI	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
10. Donna Minkley	6404 244th Ave Paddock Lk WI	☐ Town ☑ Village ☐ City Paddock Lake	4/5/11

Certification of Circulator

I, JASON MYRES, certify:
(name of circulator)

I reside at 1280 Village Centre Dr. #6 Somers, WI 53144.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1790

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Ann Meade	180 W. Chestnut Apt 6 Burlington Wi 53105	☑ Town ☐ Village ☐ City Burlington	3/26/11
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, [signature], certify:
(name of circulator)

I reside at 23309 62nd St Kenosha Wi 53168 4-5-11.
(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]
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1791

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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. George H Borst	11912 - 28TH Ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/2011
2. Sonja Johnson	3132 - 106th Ave Pleasant Prairie	☐ Town ☒ Village ☐ City " "	4/5/2011
3. Colleen Wunirsh	3601 109th St Pleasant Prairie	☐ Town ☒ Village ☐ City " "	4/5/2011
4. Laurie Spagnoli	10676 32nd Ave Pleasant Prairie WI	☐ Town ☒ Village ☐ City " "	4/5/2011
5. Marianne Giebel	12723 39th Ave Pleasant Prairie WI	☐ Town ☒ Village ☐ City " "	4/5/2011
6. ROBERT NELSON	3767 - 122 ST PLEASANT PRAIRIE WI	☐ Town ☒ Village ☐ City " "	4-5-2011
7. Elizabeth McGrang	3331 - 109 Street Pleasant Prairie, WI	☐ Town ☒ Village ☐ City " "	4-5-2011
8. [illegible]	3400 128th ST Pleasant Prairie WI	☐ Town ☒ Village ☐ City " "	4/5/2011
9. Fehyoa Marlaure	1817 104th St #82 Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City " "	4/5/2011
10. Margaret Figueroa	Pleasant Prairie	☐ Town ☒ Village ☐ City	4/5/2011

Certification of Circulator

I, JOSEPH MORELAND, certify:
(name of circulator)

I reside at 11341 14th Avenue, Pleasant Prairie.
(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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1792

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	10915 32nd Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	5 Apr 11
2.	4172 122nd St Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	5 Apr-11
3.	3431 121 Pl. Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	5 April 11
4.	3232 109th ST Pleasant Prairie WI	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	5 APRIL-11
5.	10434 32nd Ave Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prair	5 April 11
6.	11904 28 Ave Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	Apr 5 2011
7. Delores Rogers	10941 14th Ct Pleasant Pr.	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11
8. Jack Rogers	10941 14th Ct PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
9.	3282 125th St. Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
10.	3301 108th Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	4-5-11

Certification of Circulator

I, JOSEPH MORELAND, certify:
(name of circulator)

I reside at 11341 14th Avenue Pleasant Prairie, WI 53158
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1793

GAB-470 (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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(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

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

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Amy Lumley	3850 109th St Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	4/5/11
2. [illegible] Lumley	3850 109th St Pleasant Prairie	☐ Town ☒ Village ☐ City " "	4/5/11
3. Pete Clary	11715 39th ave Pleasant Prairie Wi	☐ Town ☒ Village ☐ City " "	4/5/11
4. [illegible]	3393 115th St Pleasant Prairie WI	☐ Town ☒ Village ☐ City " "	4/5/11
5. Thomas [illegible]	3424 121st St. Pleasant Prairie Wi.	☐ Town ☒ Village ☐ City " "	4-5-11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, JOSEPH MORELAND, certify:
(name of circulator)

I reside at 11341 14th Avenue, Pleasant Prairie.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

Page No. 1794

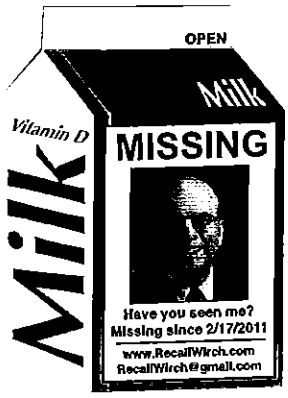
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Cathy L. Reilly	24124-77th St Salem, WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	4-5-11
2. Don Martin	6514-238 AVE SALEM WI 53168	☐ Town ☒ Village ☐ City " "	4-5-11
3. Henry [illegible]	6119 243 AVE Salem Wi 53168	☐ Town ☐ Village ☐ City " "	4-5-11
4. [illegible]	6714 244th AVE SALEM WI	☐ Town ☒ Village ☐ City " "	4-5-11
5. Sandra Szymanski	6041 241st AV SALEM WI	☐ Town ☒ Village ☐ City " "	4-5-11
6. Rude Hg	6028 245th Ave Paddock Lake WI	☐ Town ☒ Village ☐ City " "	4/5/11
7. [illegible]	6907 236th Ave Paddock Lake WI	☐ Town ☒ Village ☐ City " "	4/5/11
8. Linda LeBreume	6042-241st AVE Paddock Lake Wi	☐ Town ☒ Village ☐ City " "	4/5/11
9. Clarke Wachholz	6035 243rd Ct Paddock Lake WI 53168	☐ Town ☒ Village ☐ City " "	4/5/11
10. Bjocher Malley	6125 236 Ave PaddockLK 53168	☐ Town ☒ Village ☐ City " "	4/5/11

Certification of Circulator

I, RICHARD RADOSEVICH, certify:
(name of circulator)

I reside at 1811 JENNIFER LANE, WAUKESHA, WI 53186.
(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 Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1795

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	6024-248 CRT Salem, WI 53168	☐ Town ☑ Village ☐ City Paddock Lake	4-5-11
2. [illegible]	6241 236 Ave Salem WI 53168	☐ Town ☑ Village ☐ City " "	4-5-11
3. Edward Carlson	6012-247th P. Lake 53168	☐ Town ☑ Village ☐ City " "	4-5-11
4. [illegible]	6312 247th Ave Paddock Lake 53168	☐ Town ☑ Village ☐ City " "	4-5-11
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, RICHARD ROOSEVICH, certify:
(name of circulator)

I reside at 1811 JENNIFER WAUKESHA, WI 53186.
(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] (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.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

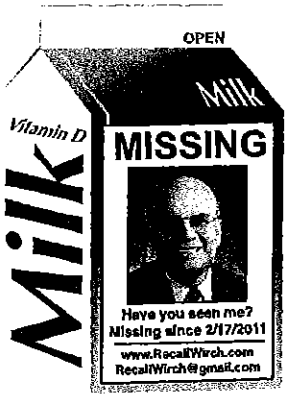
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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. Amos Bailey	8535 36th Ave Kenosha WI 53143	☐ Town ☐ Village ☑ City Kenosha	4-5-11
2. [illegible]	3521-36th Ave Kenosha, WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
3. John A. Hutton	8609-45th Ave Kenosha WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
4. Marguerite M. Vittus	8609-45th Ave Kenosha WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
5. Jeff Cherry	8704-42 AVE. KENOSHA WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
6. [illegible]	3419 86th Street Kenosha, WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
7. [illegible]	3707-88th St Kenosha, WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
8. Alan Pedlock	8548 37th AVE KENOSHA WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
9. Paula Silbak	8608-32 Ave Kenosha WI 53142	☐ Town ☐ Village ☑ City "	4-5-11
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Kathleen A. Moran, certify:
(name of circulator)

I reside at 3102 86th Pl. Unit 104 Kenosha, WI 53142.
(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) K A Moran (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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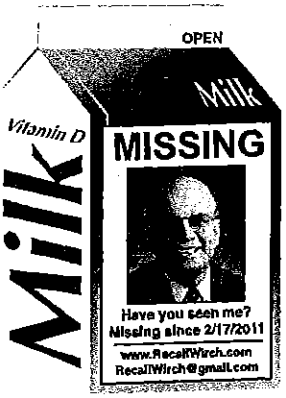
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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.	8738-42nd Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
2.	4231 89th S Kenosha WI	☐ Town ☐ Village ☒ City "	4/5/11
3. Maureen Hanson	4505-89th st Kenosha, WI 53142	☐ Town ☐ Village ☒ City "	4/5/11
4.	3631 88th st Kenosha wi 53142	☐ Town ☐ Village ☒ City "	4/5/11
5. Kathy Bradley	9923 38th Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City "	4/5/11
6.	3307 85th St Kenosha, WI 53142	☐ Town ☐ Village ☒ City "	4/5/11
7.	4231-89th St Kenosha WI 53142	☐ Town ☐ Village ☒ City "	4/5/11
8. John W. Bruno	4417 87th Place Kenosha WI 53142	☐ Town ☐ Village ☒ City "	4/5/11
9.	1307 112th St Pleasant Prairie	☐ Town ☒ Village ☐ City "	4-5-11
10.	8956-43rd A Kenosha, WI 53142	☐ Town ☐ Village ☒ City "	4-5-11

Certification of Circulator

I, Kathleen A. Moran, certify:
(name of circulator)

I reside at 3102 86th Pl. Unit 104 Kenosha, WI 53142
(circulator's residence - include number, street, and municipality)

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

April 5, 2011 (date) — Kathleen A. Moran (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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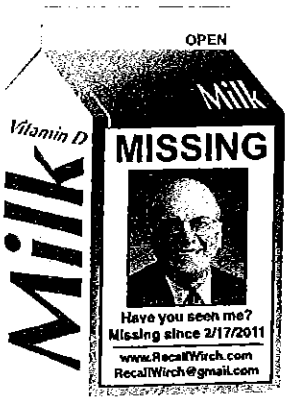
RECALL PETITION

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

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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. M. Ma[illegible]	7909 105 AVE. Pl Pr. Wi. 53158	☐ Town ☑ Village ☐ City Pleasant Prairie	4-3-11
2. John Kerch	9100-88th ave	☐ Town ☑ Village ☐ City " "	4-3-11
3. [illegible]	9100 88th Ave Pleasant Prairie WI 5315[illegible]	☐ Town ☑ Village ☐ City " "	4-3-11
4. Joann Kerch	9100 88th Ave Pleasant Pr. Wi. 53158	☐ Town ☑ Village ☐ City Pleasant Pr.	4-3-11
5. Steve D. Rank	3625 ROOSEVELT RD. KENOSHA WI. 53142	☐ Town ☐ Village ☑ City KENOSHA	4-4-11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Mike Wilbourn, certify:
(name of circulator)

I reside at 7904 104th Ave. Pleasant Prairie, Wi. 53158.
(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]
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

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

Page No. 1799

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 22nd Wisconsin State Senate District,
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(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.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.

THE MUNICIPALITY 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]	10009 64th St Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
2. [illegible]	6607 106th Ave. Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
3. Gary Westburg	6607 106th Ave Kenosha WI.	☐ Town ☐ Village ☒ City Kenosha	4/5/11
4. Stephanie Karshna	7105 104th Ave Unit H Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	4/5/11
5. Brian Dantzig	6744 107th Av Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	4/5/11
6. Charles Hefs	7106 98th Ave HC Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	4/5/11
7. [illegible] R Hilts	7106 - 98th Ave Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	4/5/11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Colana K. Hutchinson, certify:
(name of circulator)

I reside at 4421 ~~Hutchinson~~ (CH) Harrison Rd Kenosha 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.

4-5-11 (date)

Colana K. Hutchinson (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

Page No. 1800

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