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. Matthew Remer	443 Origen street Burlington WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
2. Marcia Remer	30324 FOREST DR BURLINGTON WIS	☒ Town ☐ Village ☐ City Burlington	3-5-11
3. Greg Remer	Burlington WI	☒ Town ☐ Village ☐ City Burlington	3/5/11
4. Evelyn Fallon	30317 Forest Dr Burlington WI	☒ Town ☐ Village ☐ City Burlington	3/5/11
5. Donald E. Fallon	BURLINGTON 30317 Forest Dr	☒ Town ☐ Village ☐ City Burlington	3/5/11
6. Jim Mucci	1457 Serena Lane Burlington WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
7. Anita Mucci	1457 Serena Ln Burlington WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
8. Thomas Smith	701 Crestwood Dr Burlington, WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
9. Teresa Smith	701 Crestwood Dr. Burlington, Wis.	☐ Town ☐ Village ☒ City Burlington	3/5/11
10. [illegible]	316 Dodds Dr Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/5/11

Certification of Circulator

I, Sandra Remer, certify:
(name of circulator)

I reside at 30020 Mound Dr. Burlington.
(circulator's residence - include number, street, and municipality)

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

3/7/11 (date) Sandra Remer (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

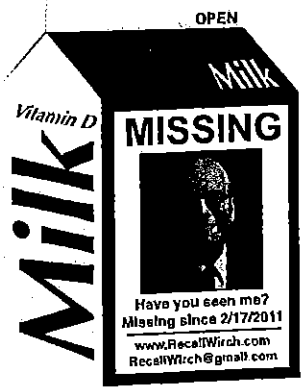
RECALL PETITION

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. Luther H. Arnold Jr	34762 NEW MUNSTER	☐ Town ☒ Village ☐ City NEW MUNSTER	3/1/11
2. Sharon Johnson	253 CT Trevor WI.	☒ Town ☒ Village ☐ City Salem	3/1/11
3. Peggy C. Wiemer	219 Pawley Ave Twin Lakes, WI	☐ Town ☒ Village ☐ City Twin Lakes, WI	3/1/11
4. James Puccini	401 CIRCLE DR TWIN LAKES WI, 53181	☐ Town ☒ Village ☐ City Twin Lakes	3-1-11
5. Mark Rund	37621 Sigel PL TWIN LAKES, 53181	☒ Town ☐ Village ☐ City Twin Lakes	3-1-11
6. Cindy Snell	344 E Main Twinlakes 53181	☐ Town ☒ Village ☐ City Salem	3-1-11
7. Sharon Johnson	40 LINCOLN DR T L WI.	☐ Town ☐ Village ☐ City TWIN LAKES	3-1-11
8. Mary Shaw	W5715 Nine Mile Rd Elkhorn WI 53121	☐ Town ☒ Village ☐ City Elkhorn	3-1-11
9. Jackie Lauer	8405 328th Ave Burlington, WI.	☒ Town ☐ Village ☐ City Wheatland Kenosha County	3/2/11
10. [illegible]	726 W. Main St Twin Lakes WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	3/11/11

Certification of Circulator

I, Lori White, certify:
(name of circulator)

I reside at 9711 Hunters Lane Spring Grove, IL 6008
(circulator's residence - include number, street, and municipality)

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

3/11/2011 (date)

Lori White (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. 702

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

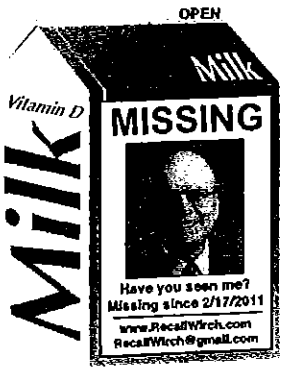
RECALL PETITION

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. Kathie Rudolph	8417 Wren St Burlington WI	☒ Town ☐ Village ☐ City Burlington	3/11/2011
2. STUART P. BROWN	330 SUNBURST AVE TWIN LAKES, WI 53105	☐ Town ☐ Village ☐ City TWIN LAKES	03-11-11
3. Charles Dykstra	800 Teutonia Dr A Burlington Wis 53105	☐ Town ☐ Village ☒ City Burlington	03-11-11
4. Marilyn Dykstra	800 - Teutonia Dr. A Burlington, WI. 53105	☐ Town ☐ Village ☒ City Burlington.	03-11-2011
5. Dennis Adamek	33801 S Yahnke Rd. Burlington WI	☒ Town ☐ Village ☐ City Burlington	3-11-11
6. Joseph P Schl	764 FOXTRAIL CIR BURLINGTON WI	☐ Town ☐ Village ☒ City BURLINGTON	3/11/11
7. Travis Downey	35522 oak knoll Rd Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3/11/11
8. Dan Hopkins	724 Dells RD Silver LAKE WI 53170	☐ Town ☒ Village ☐ City Silver Lake	3/11/11
9. JAMES A. LAY	726 RIDGE CIRCLE TWIN LAKES WI	☒ Town ☐ Village ☐ City TWIN LAKES	3/11/11
10. Ellen Kmecak	3000 Knollcrest Dr. Burlington, WI 53105	☒ Town ☐ Village ☐ City Burlington	3-11-11

Certification of Circulator

I, Kathie Rudolph (name of circulator), certify:

I reside at 8417 Wren 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.

3-11-2011 (date) Kathie Rudolph (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.6/2003) 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. Roy Tillman	29934 CTY HWY A Burlington WI	☑ Town ☐ Village ☐ City Burlington	3-7-11
2. [illegible]	400 Cardinal Circle Apt #3 Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-7-11
3. Ronald Kirchenbauer	349 Smith St Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3-7-11
4. [illegible]	349 Smith St. Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-7-11
5. Gloria Ortiz	4604 Murphy ave Burlington WI 53105	☐ Town ☐ Village ☐ City Burlington	3-7-11
6. Stacey Polasky	1001 1712 Bayhill Ave Twin Lakes WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	3-7-11
7. Edward P. Hood	380 Dale Drive Box	☐ Town ☐ Village ☐ City Burlington	3-7-11
8. Harold Richter	Box 824 New Munster WI	☐ Town ☐ Village ☐ City New Munster	3-7-11
9. Elizabeth A. Grossmeyer	6213 328th Ave Salem WI 53168	☐ Town ☐ Village ☐ City Salem	3-7-11
10. Rita Weyter	425 McHenry St Burlington, WI	☐ Town ☐ Village ☐ City Burlington	3-7-11

Certification of Circulator

I, Bonnie Ketterhagen, certify:
(name of circulator)

I reside at 7000 Crossway Rd. 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.

3-7-11
(date)

Bonnie J. Ketterhagen
(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. 704

GAB-170 (Rev. 6/2002) 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 elections@gab.wi.gov

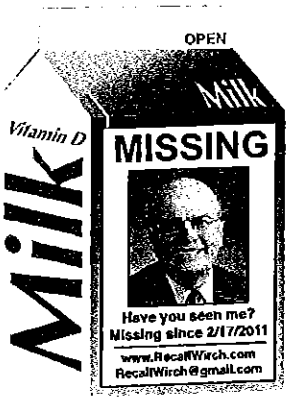
RECALL PETITION

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. Margetta Hopson	9027-374TH COURT TWIN LAKES, WI	☒ Town ☐ Village ☐ City RANDALL	3-7-11
2. Patti Huston	P.O Box 531 Silver Lake WI 53170	☐ Town ☒ Village ☐ City Silver Lake	3-7-11
3. [illegible]	409 Anita Ct. Silver Lake, WI 53170	☐ Town ☒ Village ☐ City Silver Lake	3-7-11
4. [illegible]	6826 Burma Rd Waterford WI	☐ Town ☒ Village ☐ City Waterford	3-7-11
5. [illegible]	9111 312TH AVE BURLINGTON, WI 53105	☒ Town ☐ Village ☐ City SALEM	3-7-11
6. Stacy Hebein	400 Cardinal Circle Apt 3 Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3-7-11
7. Linda Templin	6261 Condrad Ct. Burlington WI 5310[illegible]	☐ Town ☐ Village ☒ City Burlington	3/7/11
8. [illegible]	2095 Market St. #108 Burlington, Wi. 53105	☐ Town ☐ Village ☒ City Burlington	3/2/11
9. [illegible]	30706 76th ST Salem WI 53168	☒ Town ☐ Village ☐ City SALEM	3-7-11
10. [illegible]	8241 School Road Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3-7-11

Certification of Circulator

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

I reside at 2511 DRIFTWOOD TR 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.

3-7-11
(date)

Richard Griebel
(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. 705

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

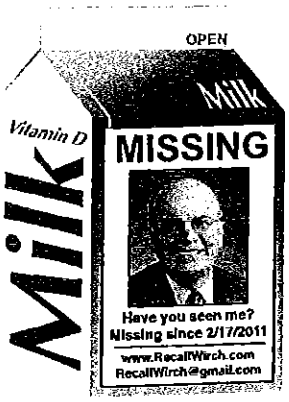
RECALL PETITION

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. Mary Ann Oldenburg	417 Summit Burlington, Wi	☐ Town ☐ Village ☒ City Burlington	3-7-11
2. Robert J. Burg	32900 KARCHER RD BURLINGTON WI	☒ Town ☐ Village ☐ City BURLINGTON	3-7-11
3. [illegible]	8736 296th ct SALEM, WI	☒ Town ☐ Village ☐ City SALEM	3-7-11
4. Roman Przykowski	39028 88 PL. Powers Lake WI 53159	☒ Town ☐ Village ☐ City Randall	3-7-11
5. James Pottak	29601 41st STREET SALEM, WI. 53168	☒ Town ☐ Village ☐ City BRIGHTON	3/7/11
6. Wm Rasmussen	7725 Lily Lake Burlington WI 53105	☐ Town ☐ Village ☐ City Lily Lake	3-7-11
7. Tim Kavegan	P.O. Box 784 New Munster Wi 53152	☒ Town ☐ Village ☐ City Wheatland	030711
8. Ann Houghton	8715 378th Burlington WI 53105	☐ Town ☒ Village ☐ City RANDALL	3-7-11
9. RON KRAUS	1331 N. BROWS LAKE RD ROCHESTER WI,	☐ Town ☒ Village ☐ City ROCHESTER	3-7-11
10. Deborah Nowak	8829 Quail Run Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3-7-11

Certification of Circulator

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

I reside at 2511 DRIFTWOOD TRAIL Burlington.
(circulator's residence - include number, street, and municipality)

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

3-7-11
(Date)

Richard Grueber
(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. 706

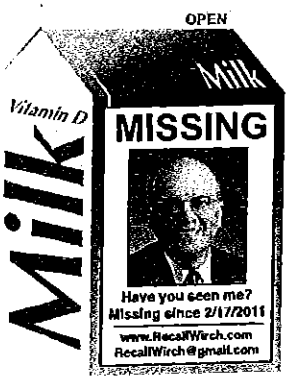
RECALL PETITION

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]	29822 102nd St. Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	3/7/11
2. Roberta Lyon	40603 104th St Genoa City 53128	☐ Town ☒ Village ☐ City Randall	3/7/11
3. [illegible]	5104 Adams St. Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/7/11
4. K Jamzoski	9111 312th Ave. Burlington, WI 53105	☒ Town ☐ Village ☐ City Salem	3/7/11
5. [illegible]	24917 70 St Paddock Lake 53168	☒ Town ☐ Village ☐ City Salem	3/7/11
6. [illegible]	32121 Euphonia Burlington WI 53105	☐ Town ☐ Village ☐ City Burlington	3-7-11
7. [illegible]	201 Schlenzinger St Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/7/11
8. David P Oldenburg	417 Summit Burlington, Wi	☐ Town ☐ Village ☒ City Burlington	3-7-11
9. John W. Stell Jr.	23632 50th Place Salem, WI 53168	☒ Town ☒ Village ☐ City Salem	3/7/11
10. Doris Ellenson	29936 Old Hwy A Burlington, Wis 53105	☒ Town ☐ Village ☐ City Burlington	3-7-11

Certification of Circulator

I, Nelson R. Sohns, certify:
(name of circulator)

I reside at 2505 Red Oak Drive 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.

3-7-2011
(date)

Nelson R. Sohns
(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

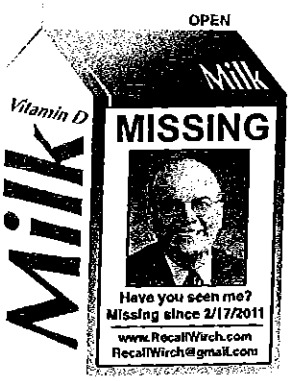
RECALL PETITION

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. Mary Schilling	8160 214th Ave Bristol, WI 53104	☐ ~~Town~~ ☑ Village ☐ City Bristol	3/7/11
2. Cindy Wiegert	1157 Sylvan Ct Twin Lakes WI 53181	☐ Town ☑ Village ☐ City Twin Lakes	3-7-11
3. Ricky Thelen	300 Haynes CT Burlington WI 53105	☐ Town ☐ Village ☑ City Burlington	3-7-11
4. Michael Sell	1800 McKee Burlington	☑ Town ☐ Village ☐ City Burlington	3-7-11
5. [illegible]	6261 Colorado Court Burlington WI 53105	☑ Town ☐ Village ☐ City Burlington	3/7/11
6. ~~[illegible]~~	~~3133 Academy Rd~~	☐ Town ☐ Village ☐ City	
Bryon Cairns	5989 Christine CT Burlington WI 53105	☐ Town ☐ Village ☐ City Burlington	3-7-11
8. Richard Byrd	4617 Lake ST Burlington WI	☐ Town ☐ Village ☑ City Burlington	3-7-11
9. Marilyn Haber	356 Origen ST Burlington, WI	☐ Town ☐ Village ☑ City Burlington	3-7-11
10. Mary Spiegelhoff	356 Origen St Burlington WI 53105	☐ Town ☐ Village ☑ City Burlington	3-7-11

Certification of Circulator

I, Nancy Huechman (name of circulator), certify:

I reside at 8017 Valley Drive Wind Lake Wis 53185 (circulator's residence - include number, street, and municipality).

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

3/7/11 (date) Nancy Huechman (signature of circulator)

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

70 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
n is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
5005, 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 Wirck 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. Buttary LaBadie	309 S. Oakland Ave	☐ Town ☐ Village ☒ City Burlington	3/5/11
2. Karen Kovacevich	8912 269th Ave Salem	☒ Town ☐ Village ☐ City Salem	3/5/11
3. [illegible]	29202 Plank Rd Burlington, WI	☒ Town ☐ Village ☐ City Burlington	3/5/11
4. Colleen Meinke	29202 Plank Rd Burlington, WI	☒ Town ☐ Village ☐ City Burlington	3/5/11
5. Jeri Edmundson	344 Travelers Run Burlington, WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
6. Jarrod M. Pfarr	6320 10th Place Kenosha, WI	☒ Town ☐ Village ☐ City Somers	3/5/11
7. Marie Pfarr	6320-10th Pl Kenosha WI	☒ Town ☐ Village ☐ City Somers	3/5/11
8. [illegible]	344 Travelers Run ~~6320 10th~~ Burlington	☐ Town ☐ Village ☒ City Burlington	3/5/11
9. [illegible]	~~6320-10th Place~~ 6320-10th Place Kenosha WI 53144	☐ Town ☐ Village ☐ City Somers	3/5/11
10. [illegible]	1524-17th St Kenosha WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/5/11

Certification of Circulator

I, Cathy LaBadie, certify:
(name of circulator)

I reside at 309 S. Oakland Ave. 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.

3/5/11
(date)

Cathy C. LaBadie
(signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170

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

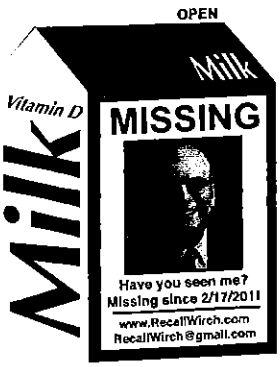
RECALL PETITION

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. Valerie Gietzel	1073. S. Pine St Unit 201	☐ Town ☐ Village ☑ City Burlington	March 7, 2011
2. Robin Hamm	811 S. Teut Rd	☑ Town ☐ Village ☐ City Burlington	March 7 2011
3. Barbara [illegible]	317 Alice St.	☐ Town ☐ Village ☑ City Burlington	Mar. 7th 2011
4. Emma Friedrich	N942 Rose Dr.	☑ Town ☐ Village ☐ City Bloomfield	3/7/11
5. Gary [illegible]	N942 Rose Dr.	☑ Town ☐ Village ☐ City Bloomfield	3/7/11
6. Christine [illegible]	417 S. Pine St.	☐ Town ☐ Village ☑ City Burlington	3/7/11
7. [illegible]	N6560 Paradise dr	☑ Town ☐ Village ☐ City Burlington	3/7/11
8. Michael [illegible]	817 SCNAPL RD	☑ Town ☐ Village ☐ City BURLINGTON	3/7/11
9. Nina Veenstra	8028 Monroe St Burlington WI 53105	☐ Town ☐ Village ☑ City Burlington	3/7/11
10. Tina Gundert Johnson	23824 127th St. Trevor, WI 53179	☑ Town ☐ Village ☐ City Salem	3/7/11

Certification of Circulator

I, Bonnie J. Ketterhagen, certify:
(name of circulator)

I reside at 2000 Crossway Rd. 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.

3-7-11 (date) Bonnie J. Ketterhagen (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. 710

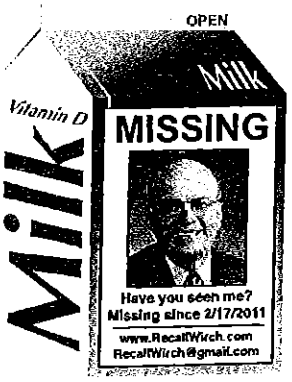
RECALL PETITION

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. John W. Spanton	9 N Browns Lake Burlington, WI	☐ Town ☐ Village ☐ City Burlington	3/07/11
2. Jon Antreassian	514 Dunford Dr Burlington 53105	☐ Town ☐ Village ☐ City Burlington	3/7/11
3. Hannah Lenoff	514 Dunford Dr. Burlington, WI 53105	☐ Town ☐ Village ☐ City Burlington	3/7/11
4. Darlene Martin	8625 McHenry Burlington, Wisc.	☐ Town ☐ Village ☐ City Burlington	3-7-11
5. Gary Raimer	248 Stratgate Pl Burlington WI 53105	☐ Town ☐ Village ☐ City Burlington	3-7-11
6. Carl Schutz	1766 Sycamore St. Twin Lakes, WI 53181	☐ Town ☐ Village ☐ City Twin Lakes	3-7-11
7. Jeffery A Stephens	8010 GATEWAY DRIVE BURLINGTON WI. 53105	☐ Town ☐ Village ☐ City Burlington	3-7-11
8. Lisa Cannon	313 E Market St Burlington WI 53105	☐ Town ☐ Village ☐ City Burlington	3/7/11
9. Martin Sanchez	26618 East Street Silverlake WI 53170	☐ Town ☐ Village ☐ City Silverlake	3/7/11
10. Sean Gascoigne	3807 15th St Apt K Kenosha, WI	☐ Town ☐ Village ☐ City Kenosha	3/7/11

Certification of Circulator

I, Nancy Huechsman, certify:
(name of circulator)

I reside at 8017 Valley Dr. Wind Lake, Wis 53185
(circulator's residence - include number, street, and municipality)

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

3/7/11
(date)

Nancy Huechsman
(signature of circulator)

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

-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
ym is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
1-8005, http://gab.wi.gov email: gab@wi.gov

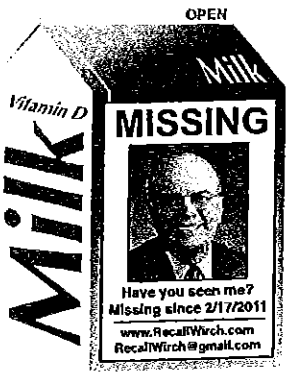
RECALL PETITION

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]	26225 75th Salem, WI. 53168	☒ Town ☐ Village ☐ City Salem	3-7-11
2. [illegible]		☐ Town ☐ Village ☐ City	
3. [illegible]	567 Edgewood Dr.	☐ Town ☐ Village ☒ City Burlington	3-7-11
4. Ellen M Munhol	820 N English Settlement Ave	☒ Town ☐ Village ☐ City Burlington	3-7-11
5. Stephen A. Brzoski	4017 Lake St. Burlington, WI. 53105	☒ Town ☐ Village ☐ City Burlington	3-7-11
6. Jacqueline Lancour	1156 Milwaukee Ave Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-7-11
7. Darlene J. Conrad	29834 Pinewood Dr Burlington WI 53105	☐ Town ☒ Village ☐ City Burlington	3-7-11
8. Brian Mathes	516 Storle Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-7-11
9. Joe Weithaus	33625 PALM DR Burlington WI, 53105	☒ Town ☐ Village ☐ City BURLINGTON	3-7-11
10. Becky Weithaus	33625 Palm dr. Burlington, WI 53105	☒ Town ☐ Village ☐ City Burlington	3-7-11

Certification of Circulator

I, Bonnie J. Ketterhagen, certify:
(name of circulator)

I reside at 2000 Crossway Rd. 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.

3-7-11
(date)

Bonnie J Ketterhagen
(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. 712

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 Martin	3104 Z Timber Ln Burlington, WI	☒ Town ☐ Village ☐ City Burlington	3-4-11
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, Mary F. Labadie (name of circulator), certify:

I reside at 303 Margaret St. Burlington
(circulator's residence - include number, street, and municipality)

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

3/7/11 (date)

Mary F Labadie (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170

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

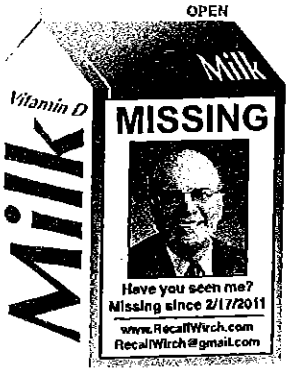
RECALL PETITION

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. Gilbert Van Asten Sr. John Van Asten Jr.	810 Hickory Rd Twin Lakes WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	3-7-11
2. Daniella Slavin Daniella Slavin	209 E. Market St. Apt #107 Burlington WI	☐ Town ☐ Village ☐ City Burlington	3-7-11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 2511 Driftwood Mail 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.

3-7-11
(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]	33719 Academy Rd Burlington, WI 53105	☒ Town ☐ Village ☐ City Burlington	3-7-11
2. Carol De Bell	416 S. Cogswell Dr #3 Silver Lake WI 53170	☐ Town ☒ Village ☐ City Silver Lake	3-7-11
3. Jolene Toelle	32805 Geneva Rd Burlington Wis 53105	☐ Town ☐ Village ☐ City Burlington	3-7-11
4. Charles E. Toelle	32805 Geneva Rd. Burlington, Wis.	☐ Town ☐ Village ☐ City Burlington	3-7-11
5. [illegible]	317 Alice St. BURLINGTON, WI	☐ Town ☐ Village ☒ City BURLINGTON	3-7-11
Kelley A Thorsgard	5905 381st Ave Burlington WI. 53105	☐ Town ☒ Village ☐ City Burlington	3-7-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Nelson R. Sohns, certify:
(name of circulator)

I reside at 2505 Red Oak Drive 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.

3-7-2011
(date)

Nelson R. Sohns
(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

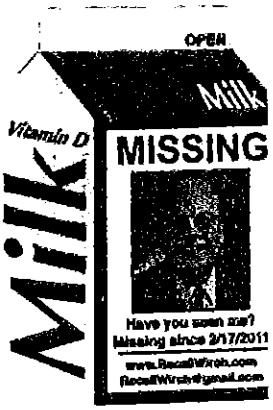
RECALL PETITION

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. Shey Lemieux	156 KARYL ST Burlington	☐ Town ☐ Village ☒ City Burlington	3/4/11
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, Mary LaBadie, certify:
(name of circulator)

I reside at 303 Margaret St Burlington
(circulator's residence - include number, street, and municipality)

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

3/5/11 (date) Mary L. LaBadie (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170

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

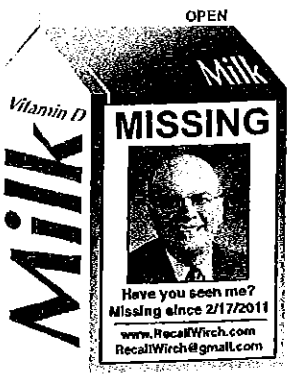
RECALL PETITION

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. Kelly Peyton	32830 Karcher Rd Burlington, WI 53105	☒ Town ☐ Village ☐ City Burlington	3/7/11
2. John Immel	6242 JONES RD BURLINGTON WI 53105	☒ Town ☐ Village ☐ City LYONS	3/7/11
3. Nikki Immel	6242 Jones Rd Burlington WI 53105	☒ Town ☐ Village ☐ City Lyons	3/7/11
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, Nancy Kueckman (name of circulator), certify:

I reside at 8017 Valley Drive Wind Lake Wis. 53185
(circulator's residence - include number, street, and municipality)

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

3/7/11 (date) Nancy Kueckman (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. Jody Veesenmeyer	116 W State St. Burlington	☐ Town ☐ Village ☒ City Burlington	3/7/11
2. Lewis Veesenmeyer	116 W. State St. Burlington WI	☐ Town ☐ Village ☒ City Burlington	3/7/11
3. Elizabeth Meininger	1101 So. Pine St. #312 Burlington	☐ Town ☐ Village ☒ City Burlington	3/7/11
4. Maggie DeVries	1220 Valley Rd Twin Lakes WI	☐ Town ☒ Village ☐ City Twin Lakes	3/7/11
5. Tamara Ledene	115 Bassett St. Twin Lakes WI	☐ Town ☒ Village ☐ City Twin Lakes	3/7/11
6. Michael Vos	132 N. Kendrick Ave Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3/7/11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Steve Slender (name of circulator), certify:

I reside at 32820 48th st Burlington, WI 53105 (circulator's residence - include number, street, and municipality)

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

3/7/11 (date)

Steve Slender (signature of circulator)

Please mail this form to:

Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170
www.RecallWirch.com • RecallWirch@gmail.com

(Rev. 6/2003) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. It is presented by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 (608) 266-8005 http://gab.wi.gov

Page No. 718

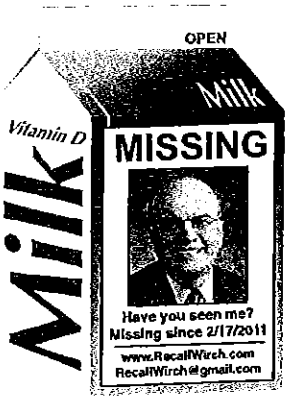
RECALL PETITION

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]	~~149 South River Rd~~ ~~Burlington WI 53105~~	☒ Town ☐ Village ☐ City ~~Burlington~~	~~3-7-11~~
2. [illegible]	2801 KNOLLCREST DR BURLINGTON 53105	☒ Town ☐ Village ☐ City BURLINGTON	3-7-11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Erla Mae Clearmont (name of circulator), certify:

I reside at 341 E Market St #205 - Burlington
(circulator's residence - include number, street, and municipality)

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

March 7, 2011 (date) Erla Mae Clearmont (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. 719

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. Cathy LaBadie	309 S. Oakland Ave Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/5/11
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. Mary LaBadie, certify:
(name of circulator)

I reside at 303 Margaret St Burlington
(circulator's residence - include number, street, and municipality)

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

3/6/11 (date)

Mary T. LaBadie (signature of circulator)

Please mail this form to: Recall Wirch
P.O. Box 26 • Silver Lake, WI 53170

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

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]	29746 Plank Rd Burlington WI	☐ Town ☐ Village ☐ City Burlington	3-5-11
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, Kirk K Anderson, certify:
(name of circulator)

I reside at 210 S. School St. Mayville, WI 53050.
(circulator's residence - include number, street, and municipality)

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

3/5/11
(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. 721

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

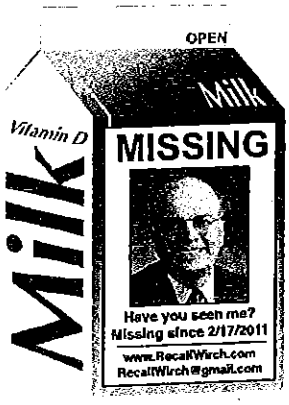
RECALL PETITION

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]	30815 CEDAR DR	☑ Town ☐ Village ☐ City: BURLINGTON WI 53105	3-6-11
2. Veronica Ortiz	1624 Murphy Ave	☑ Town ☐ Village ☐ City: Burlington WI 53105	3-6-11
3. Thomas Weiss	141 CHAPEL TERR	☐ Town ☐ Village ☑ City: BURLINGTON 53105	3-6-11
4. [illegible]	117 N PERKINS BLVD	☐ Town ☐ Village ☑ City: Burlington WI 53105	3-6-11
5. Stacie Fuller	8839 FISH HATCHERY RD BURLINGTON WI	☑ Town ☐ Village ☐ City: BURLINGTON WI	3.6.11
6. Teresa A Luebling	30203 Poplar Dr Burlington WI 53105	☑ Town ☐ Village ☐ City: Burlington WI 53105	3-6-11
7. Michael E Luebling	30203 Poplar Dr Burlington WI	☑ Town ☐ Village ☐ City: Burlington WI 53105	3-6-11
8. Thomas J. Moguine IV.	40300 81st street Genoa City, WI 53128	☑ Town ☐ Village ☐ City: Wheatland	3-6-11
9. Brooke Heilkamp	440 Donald Drive Burlington, WI 53105	☐ Town ☐ Village ☑ City: Burlington, WI	3-6-11
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Philip A Ketterhagen Philip A Ketterhagen, certify:
(name of circulator)

I reside at 2000 Crossway Rd 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.

3-6-11 (date) Philip A Ketterhagen (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

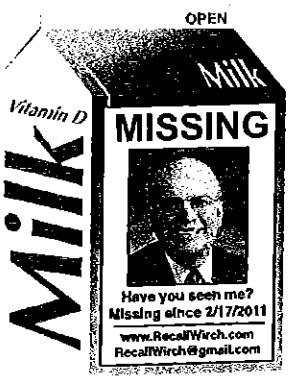
RECALL PETITION

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]	1272 Serena Lane Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/6/2011
2. [illegible]	30500 79TH ST SALEM WI 53168	☒ Town ☐ Village ☐ City SALEM	3-6-2011
3. [illegible]	4250-348th AVE Burlington WI, 53105	☒ Town ☐ Village ☐ City Burlington	3-6-2011
4. [illegible]	433 Edward st Burlington WI, 53105	☐ Town ☐ Village ☒ City Burlington	3-6-2011
5. [illegible]	1201 Hillside Circle Burlington, WI. 53105	☐ Town ☐ Village ☒ City Burlington	3-6-2011
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 35300 State ST Burlington Wis 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.

3-6-11
(date)

Charles Krause
(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

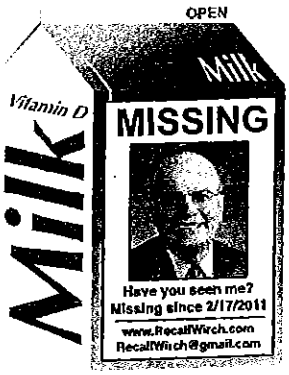
RECALL PETITION

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. [signature]	301 Haynes Ct Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/6/11
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, Edna Mae Cleavmont, certify:
(name of circulator)

I reside at 341 E Market St #205 Burlington, 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.

March 6, 2011 — Edna Mae Cleavmont
(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 State Senate District in 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.)

Initiative is proposed the officials in Wisconsin 22nd State Senate District in Wisconsin

THE MUNICIPALITY 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. Betty Weir	3005 Crossway	☒ Town ☐ Village ☐ City Burlington	3/3/11
2. Becky Melby	2718 Crossway Rd	☒ Town ☐ Village ☐ City Burlington	3-3-11
3. William Melby	2718 Crossway Rd	☒ Town ☐ Village ☐ City Burlington	3/3/11
4. Bonnie Ketterhagen	2000 Crossway Rd	☒ Town ☐ Village ☐ City Burlington	3-4-11
5. Philip G Ketterhagen	2000 CROSSWAY Rd	☒ Town ☐ Village ☐ City BURLINGTON	3-4-11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Bonnie J. Ketterhagen, certify:
(name of circulator)

I reside at 2000 Crossway Rd. 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.

3-4-11
(date)

Bonnie J. Ketterhagen
(signature of circulator)

GAB-170 (Rev. 6-2011) This form is distributed by the Government Accountability Board. P.O. Box 7984, Madison, WI 53707-7984 (608) 266-8005, http://gab.wi.gov and gab@wi.gov

Page No. 125

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
	8237-25TH KENOSHA WI 53143	☐ Town ☐ Village ☒ City KENOSHA	3/5/11
2.	39920 102ND St TREVOR, WI 53179	☒ Town ☐ Village ☐ City SALEM	3-5-11
3.	23010 83 ST Salem W.	☒ Town ☐ Village ☐ City Salem	3/5/11
4.	5825 24TH Ave KENOSHA	☐ Town ☐ Village ☒ City KENOSHA	3/5/11
5.	256 [illegible] BURLINGTON WI	☐ Town ☐ Village ☐ City BURLINGTON	3/5/12
6.	12910 60th St Bristol WI 53104	~~☐ Town~~ ☒ Village ☐ City Bristol	3/5/11
7.	22615 60th St Bristol, WI 53104	~~☐ Town~~ ☒ Village ☐ City Bristol	3/5/11
8.	22615 60th St Bristol WI 53104	☐ Town ☒ Village ☐ City Bristol	3/5/11
9.	1455 98th Ave Kenosha	☐ Town ☐ Village ☒ City Kenosha	3/5/11
10.	525 S. English Settlement Burlington	☐ Town ☒ Village ☐ City Dover	3/5/11

Certification of Circulator

I, Kirk K Anderson, certify:
(name of circulator)

I reside at 210 S. School St Mayville, WI 53050.
(circulator's residence - include number, street, and municipality)

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

3/5/11
(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. 726

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

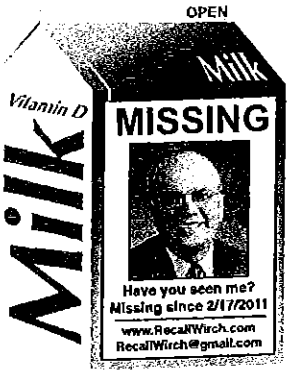
RECALL PETITION

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]	532 N Pine Apt 203 Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/6/11
2. Carol S. Burns	33509 Bohner Dr	☒ Town ☐ Village ☐ City Burlington	3/6/11
3. Lorraine M. Harris	117 N. Perkins Blvd. Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/6/11
4. Genie Applebee	6326 Wheatland Rd Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3/6/11
5. Wm. Applebee	6326 Wheatland Rd. Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington WI	3/6/11
6. J.R. Rumel	53105 Peter Abood Dr	☒ Town ☐ Village ☐ City Burlington	3/6/11
7. [illegible]	395 Dunford Dr Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3/6/11
8. Stephen Tilistyak	246 S. Tent Rd. Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	Mar. 6, 2011
9. Russell J. Kaystonvik	424 DUNFORD DRIVE BURLINGTON 53105	☐ Town ☐ Village ☒ City BURLINGTON	3.6.11
10. Jan [illegible]	35110 67th St BURLINGTON, WI 53105	☒ Town ☐ Village ☐ City Wheatland	3/6/11

Certification of Circulator

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

I reside at 35300 STATE ST Burlington WIS 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.

3-6-11
(date)

Charles Krause
(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

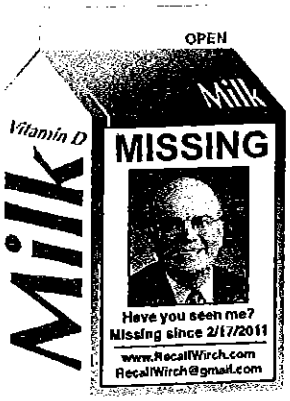
RECALL PETITION

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. Stephen M. Sherry	513 Storle Ave	☐ Town ☐ Village ☒ City Burlington	3/6/11
2. Cynthia Delgatto	0002-35218 Ave,	☒ Town ☐ Village ☐ City Burlington	3/6/11 WI 53105
3. James Daniel	357 E Market #209	☐ Town ☐ Village ☐ City Burlington	53105 3-61
4. THEODORE GOLDFARB	2110 259th AVE	☐ Town ☐ Village ☐ City SALEM	3/6/11
5. Richard L Benson Richard L Benson	377 Dunford Drive Burlington WI	☐ Town ☐ Village ☒ City Burlington	3/6/11
6. Jayne Benson	377 Dunford	☐ Town ☐ Village ☒ City Burlington	3/6/11
7. Denise Fitzpatrick	35214 Chestnut BURL	☒ Town ☐ Village ☐ City BURLINGTON	3-6-11
8. Frank Lorbach FRANK LORBACH	864 UHEN CT BURL.	☐ Town ☐ Village ☒ City BURLINGTON	3/6/11
9. Cliff Carson	6208 235 Ave.	☐ Town ☒ Village ☐ City Paddock Lake	3/6/11
10. Joy F Alderson	816 Weiler Rd	☐ Town ☐ Village ☒ City Burlington	3/6/11

Certification of Circulator

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

I reside at 35300 State ST Burlington Wis. 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.

3-6-11
(date)

Charles Krause
(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

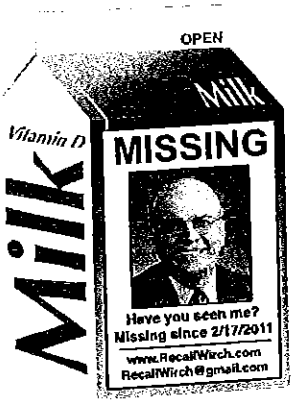
RECALL PETITION

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. Gerhard K. Willems	8307 WHEATLAND RD ROAD	☒ Town ☐ Village ☐ City BURLINGTON	MAR 6-11
2. William R. Persons Jr	141 MCHENRY ST	☐ Town ☐ Village ■ City BURLINGTON	3-6-11
3. Brian Jeem	10545 82 ST	☐ Town ☒ Village ☐ City Pleasant Prairie	3-6-11
4. Karen Brown	256 N KENDRICK	☐ Town ☐ Village ☒ City Burlington	3-6-11
5. RICHARD Ellingson	241 S KANE ST	☐ Town ☐ Village ☒ City Burlington	3/6/11
6. Ron Wartman	11329 274th AV	☒ Town ☐ Village ☐ City SALEM	3/6/11
7. Carl E. Schumacher	7740 EVERGREEN TERRACE	☒ Town ☐ Village ☐ City BURLINGTON	3-6-11
8. Annette J. Gaussel	34010 Euclid DR	☒ Town ☐ Village ☐ City BURLINGTON	3-6-11
9. [illegible]	1116 EastBrook Dr	☐ Town ☐ Village ☒ City BURLINGTON	3-6-11
10. Bill Stenson	~~PO Box 146~~ 33724 Hillvest Dr	☒ Town ☐ Village ☒ City BURLINGTON	3-6-11

Certification of Circulator

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

I reside at 35300 State ST. Burlington Wis 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.

3-6-11
(date)

Charles I Krause
(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. 729

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

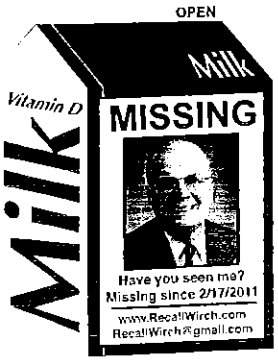
RECALL PETITION

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]	2000B CROSSWAY RD BURLINGTON, WI 53105	☑ Town ☐ Village ☐ City Burlington	3-3-2011
2. Terri Isfording	2000 B Crossway Rd. Burlington, WI. 53105	☑ Town ☐ Village ☐ City "	3-3-11
3. Mail Wirch Wi	2101 CROSSWAY RD BURLINGTON WI 53105	☑ Town ☐ Village ☐ City "	3-3-11
4. Debbie McMahon	2101 Crossway Burlington WI 53105	☑ Town ☐ Village ☐ City "	3-3-11
5. [illegible] Marden	220 Crossway Rd Burlington, WI 53105	☑ Town ☐ Village ☐ City "	3-3-11
6. Joyce T Zimmer	1705 Crossway Burlington WI 53105	☑ Town ☐ Village ☐ City "	3-3-11
7. David Miller	1705 Crossway Burlington WI 53105	☑ Town ☐ Village ☐ City "	3-3-11
8. Marjorie Brown	501 Crossway Rd Burlington WI 53105	☑ Town ☐ Village ☐ City "	3-3-11
9. Karin Schutterhelm	214 CROSSWAY Rd BURLINGTON WIS 53105	☑ Town ☐ Village ☐ City "	3-3-11
10. James Schutterhelm	214 CROSSWAY RD BURLINGTON WI 53105	☑ Town ☐ Village ☐ City "	3-3-11

Certification of Circulator

I, Bonnie J. Ketterhagen, certify:
(name of circulator)

I reside at 2000 Crossway 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.

3-4-11
(date)

Bonnie J. Ketterhagen
(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. 730

GAB-170 (Rev. 6-2007) The information collected is required by §§.8, 9.20 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: [illegible]
(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the [illegible]
(jurisdiction or district of officeholder)

petition for the recall of [illegible]
(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.**)*

[illegible]

THE MUNICIPALITY 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 lite no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. [illegible]	1811 Crossway Rd	☑ Town ☐ Village ☐ City Burlington	3/3/11
2. [illegible]	3319 CROSSWAY Rd	☑ Town ☐ Village ☐ City Burlington	3/3/11
3. Pat Kettles	3319 Crossway Rd Burlington WI	☐ Town ☐ Village ☐ City Burlington	3-3-11
4. [illegible]	3319 Crossway Rd Burlington WI	☑ Town ☐ Village ☐ City Burlington	3/3/11
5. Peg Budd	3319 Crossway Rd. Burlington, WI.	☑ Town ☐ Village ☐ City Burlington	3-3-11
6. Kyle M. Sorensen	3205 E. Crossway Rd Burlington 53105	☐ Town ☐ Village ☐ City Burlington	3-3-11
7. Kim R Sorensen	3205 E Crossway Rd Burlington, WI	☐ Town ☐ Village ☐ City Burlington	3-3-11
8. Margie Spencer	3115 Crossway Rd	☐ Town ☐ Village ☐ City Burlington	3-3-11
9. Pat Henderson	3202 Crossway Rd Burlington	☑ Town ☐ Village ☐ City Burlington	3-3-11
10. William J Weis	3005 Crossway RD Burlington WI	☐ Town ☐ Village ☐ City Burlington	3-3-11

Certification of Circulator

I, Bonnie J. Ketterhagen, certify:
(name of circulator)

I reside at 2000 Crossway Rd. 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.

3-4-11
(date)

Bonnie J. Ketterhagen
(signature of circulator)

Page No. 73

[illegible]

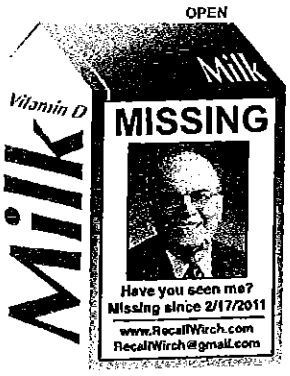
RECALL PETITION

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. Barb Zelenski	32950 Karcher Rd Burl. WI	☒ Town ☐ Village ☐ City Burlington	3/6/2011
2. Abbey Oehring	36765 55th Pl Burlington WI	☒ Town ☐ Village ☐ City Burlington	3/6/2011
3. Clifford Angelou	6039 Pine St Burlington	☐ Town ☐ Village ☒ City Burlington	3-06-2011
4. Lynn Hanson	33902 Fox St Burlington	☐ Town ☐ Village ☒ City Burlington	3-06-2011
5. Daniel Tarr	33509 Bohner Dr Burlington	☐ Town ☐ Village ☐ City Burlington	3-06-2011
6. Lynn Krueger	240 Chicory Rd Burlington WI	☐ Town ☐ Village ☒ City Burlington	3-6-11
7. [illegible]	817 Echo Dr. Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-6-11
8. [illegible]	403 Conrad St Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-6-11
9. Kristin Drettwan	832 Ridgemont Dr. Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-6-11
10. Blanche Sawicki	200 MEADOWLARK DR, APT. 11	☐ Town ☐ Village ☒ City BURLINGTON	3-6-11

Certification of Circulator

I, Erla Mae Oldermann, certify:
(name of circulator)

I reside at 341 E Market St #205. Burlington, 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.

March 10, 2011 (date) Erla Mae Oldermann (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

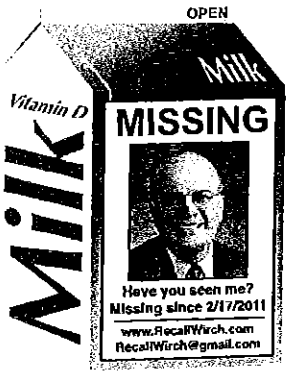
RECALL PETITION

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. Ray Slattery	813 TUCKAWAY CT TWIN LAKES, WI 53181	☐ Town ☒ Village ☐ City TWIN LAKES	3/6/2011
2. Beverly L. Crocks	8700 SCHAAL RD. Burlington WI	☒ Town ☐ Village ☐ City Burlington	3/6/2011
3. [illegible]	8700 SCHAAL RD BURLINGTON, WI	☒ Town ☐ Village ☐ City BURLINGTON	3-6-2011
4. [illegible]	32830 KARAGER RD	☒ Town ☐ Village ☐ City BURLINGTON	3-6-2011
5. Thomas Rudolph	8417 WREN ST. Burlington WI	☒ Town ☐ Village ☐ City BURLINGTON	3-6-11
6. Amanda Deplowse	395 Bunford Drive Burlington, WI.	☐ Town ☐ Village ☒ City Burlington	3-6-11
7. Sarah Wirz	425 S Pine St Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-6-11
8. Jay Blake	25201 Kickapoo Drive Kansasville WI 53139	☒ Town ☐ Village ☐ City Dover	3-6-11
9. [illegible]	33902 Fulton Rd Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3-6-11
10. [illegible]	318 N. Spring St WI 53105	☒ Town ☐ Village ☐ City Burlington	3-6-11

Certification of Circulator

I, Philip A Ketterhagen (name of circulator), certify:

I reside at 2000 CROSSWAY Rd 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.

3-6-2011 (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

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

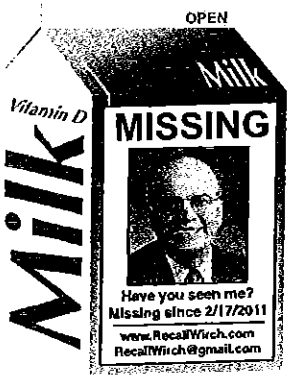
RECALL PETITION

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.	513 DUNFORD DR BURLINGTON WI	☐ Town ☐ Village ☒ City Burlington	3-6-11
2.	308 HAYNES CT Burlington WI	☐ Town ☐ Village ☒ City BURLINGTON	3-6-11
3.	308 Haynes Ct Burlington, WI	☐ Town ☐ Village ☒ City BURLINGTON	3-6-11
4.	18110 259th TREVOR WI	☐ Town ☒ Village ☐ City Salem	3-6-11
5.	708 Chicory Rd Burlington WI	☐ Town ☐ Village ☒ City Burlington	3-6-11
6.	325 S. Perkins Blvd. Burlington WI 53105	☐ Town ☐ Village ☒ City Burlington	3-6-11
7.	325 S Perkins Burln	☐ Town ☐ Village ☒ City Burlington	3.6.11
8.	315 Echo Dr. Burlington, WI	☐ Town ☐ Village ☒ City Burlington	3/6/11
9.	8358 Schaal Rd. Burlington, WI 53105	☒ Town ☐ Village ☐ City Burlington town	3/6/11
10.	8358 Schaal Rd. BURLINGTON, WI 53105	☒ Town ☐ Village ☐ City BURLINGTON town	3/6/11

Certification of Circulator

I, Philip A Kettenhagen, certify:
(name of circulator)

I reside at 2000 CROSSWAY RD 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.

3-6-11
(date)

Philip A Kettenhagen
(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

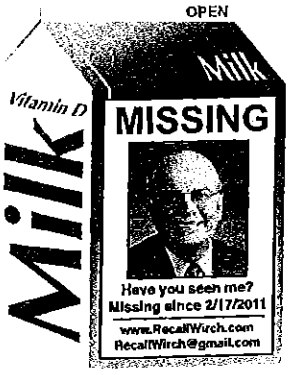
RECALL PETITION

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]	509 Orchard St	☐ Town ☐ Village ☒ City Burlington	3/6/11
2. [illegible]	1427 River Knoll Burlington	☒ Town ☐ Village ☐ City Burlington	3/6/11
3. Tom Bistof	N27 River Knoll St Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3/6/11
4. [illegible]	30412 Rottershagen Rd	☒ Town ☐ Village ☐ City Burlington	3-6-11
5. Bill Bonham	30137 Meadow Dr Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3-6-11
6. Joy Bonham	30137 Meadow Dr Burlington WI	☒ Town ☐ Village ☐ City Burlington	3-6-11
7. [illegible]	28145 Silver Lake Rd SALEM, WI 53168	☒ Town ☐ Village ☐ City SALEM	3-6-11
8. Joyce Garland	33604 Karcher Burl. WI. 53105	☒ Town ☐ Village ☐ City Burlington	3-6-11
9. Ralph Garland	33604 Karcher Rd Burlington	☒ Town ☐ Village ☐ City Burlington	3-6-11
10. [illegible]	548 McCole Rd Twin Lakes, WI 53181	☒ Town ☐ Village ☐ City Twin Lakes	3-6-11

Certification of Circulator

I, Philip A Rottershagen, certify:
(name of circulator)

I reside at 2000 CROSSWAY RD 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.

3-6-11
(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. 735

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. Gene Renzaw	9132 - PRAIRIE VILLAGE DR.	☐ Town ☒ Village ☐ City PLEASANT PRAIRE	2/25/11
2. [illegible]	4238-91st PLACE	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/1/11
3. Patricia A. Thiele	4238-91st Place	☐ Town ☒ Village ☐ City Pleasant Prairie	3/1/11
4. Riley Fulmer	9163-42ND CT.	☐ Town ☒ Village ☐ City PLEASANT PRAIRE	3-1-11
5. Catherine Fulmer	9163-42nd Ct.	☐ Town ☒ Village ☐ City Pleasant Prairie	3-1-11
6. John Z. Cypel	9194 - Prairie Village Dr	☐ Town ☒ Village ☐ City Pleasant Prarie	3-2-11
7. Frank Stange	9129 Prairie Village	☐ Town ☒ Village ☐ City Pleasant Prairie	3/5/11
8. Sue Stange	9129 Prairie Village	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/5/11
9. Michael Tenuta	9224 PRAIRIE VILLAGE DR	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/7/11
10. Patricia Tenuta	9224 Prairie Village Dr	☐ Town ☒ Village ☐ City Pleasant Prairie	3/7/11

Certification of Circulator

I, KENNETH C. MUEHLBAUER, certify:
(name of circulator)

I reside at 9128 PRAIRIE VILLAGE DR PLEASANT PRAIRIE, 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.

3/9/2011
(date)

Kenneth C. Muehlbauer
(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

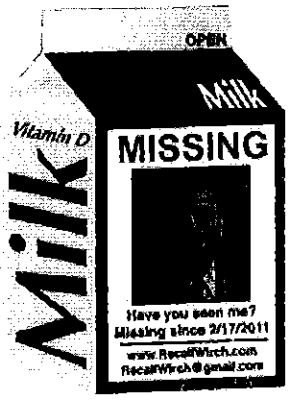
RECALL PETITION

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. Karin Kinzler	4724 41st St. Kenosha, WI 53144	☐ Town ☐ Village ☒ City KENOSHA	2-24-11
2. [illegible]	9114 Prairie Village Dr. Kenosha, WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	2-27-11
3. [illegible]	3989 Prairie Vil. Dr. Kenosha, WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3-2-11
4. [illegible]	5801 38th AVE Kenosha, WI 53144	☐ Town ☐ Village ☒ City KENOSHA	3-2-11
5. Delores Marenelle	1803 80 ST Kenosha, WI 53143	☐ Town ☐ Village ☒ City KENOSHA	3-2-11
6. [illegible]	9116 Prairie Village Dr. Kenosha, WI 53142	☐ Town ☐ Village ☐ City PLEASANT PRAIRIE	030311
7. [illegible]	8201 43RD Kenosha, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	030411
8. [illegible]	5410 65th St. Kenosha, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3-5-11
9. [illegible]	5937 83rd St. Kenosha, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3-9-11
10. [illegible]	10312 63rd St Kenosha, WI 5314[illegible]	☐ Town ☐ Village ☒ City KENOSHA	3-9-11

Certification of Circulator

I, NED R. BROOKS, certify:
(name of circulator)

I reside at 4137 PRAIRIE VILLAGE DR., KENOSHA 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.

3-9-11
(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] Savaglia	2205-7th Street Kenosha, WI 53140	☐ Town ☐ Village ☐ City SOMERS	3/6/11
2. Lilia Gomez	110 22nd Ave. Racine, WI 53403	☒ Town ☐ Village ☐ City Somers	3-6-11
3. [illegible]	6217 83rd Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-7-11
4. Deanna Conte	8700-12th St. Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3.7.11
5. [illegible]	N9163 EAST WOOD DR EAST TROY WIS	☐ Town ☐ Village ☐ City [illegible]	3-7-11
6. [illegible]	N9163 East Wood E. Troy WI	☐ Town ☐ Village ☐ City [illegible]	[illegible]
7. Dies Nizson	4060 110th St Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/7/11
8. Sandra Andersen	10919 82 ST Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/7/11
9. Dan Bailey	341 100th Ave Kenosha	☒ Town ☐ Village ☐ City Somers	3/7/11
10. [illegible]	9300 12th PL Kenosha	☒ Town ☐ Village ☐ City Somers	3-7-11

Certification of Circulator

I, KENNETH C. MUEHLBAUER (name of circulator), certify:

I reside at 9128 PRAIRIE VILLAGE DR. PLEASANT PRAIRIE, 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.

3/7/2011 (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 §§ 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) 266-8005, 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. Donald J. Reel	8030-15th AVE KENOSHA, WI. 53143	☐ Town ☐ Village ☒ City KENOSHA	3/8/11
2. Robert W Reese	6206 94th Ave. Kenosha,	☐ Town ☐ Village ☒ City Kenosha	3/8/11
3. [illegible]	8745 33rd AVE KENOSHA, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3/8/2011
4. Gerald Kedel	3511-86TH PLACE KENOSHA	☐ Town ☐ Village ☒ City KENOSHA	3/8/2011
5. Theresa Kostrow	3300-60th St Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/8/11
6. [illegible]	6115 57th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/8/11
7. [illegible]	5207 15th Ave [illegible]	☐ Town ☐ Village ☒ City Kenosha	3/8/11
8. [illegible]	6113 11th Ave Kenosha WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/8/11
9. [illegible]	6425 238th Ave Paddock Lk WI 53168	☐ Town ☒ Village ☐ City ~~Kenosha~~ RB 3/8/11	3/8/11
10. [illegible]	3025 Green Bay Rd. Kenosha, WI.	☐ Town ☐ Village ☒ City Kenosha	3/8/11

Certification of Circulator

I, Kenneth C. Muehlbauer (name of circulator), certify:

I reside at 9128 Prairie Meadow Dr Pleasant Prairie, 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.

3/9/2011 (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. 6/2001) 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 and/or 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. Carol A. Ruef	8030 - 15th Avenue Kenosha, Wi 53143	☐ Town ☐ Village ☒ City Kenosha	3/8/11
2. Kim James	12151 2nd AVE Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/8/11
3. Eileen Krowski	20609 84th PL Bristol WI	☒ ~~Town~~ ☒ Village ☐ City Bristol	3/8/11
4. Jil Wilson	6706 3RD Ave	☐ Town ☐ Village ☒ City Kenosha	3/8/11
5. William R Peterson	33808 - 98th Street Twin Lakes, WI 53181	☒ Town ☐ Village ☐ City Randall	3-8-11
6. H Nourigat	32803 GENEVA RD Burlington WI	☒ Town ☐ Village ☐ City Burlington	3-8-11
7. Riane Nourigat	32803 Geneva Rd Burlington WI	☐ Town ☐ Village ☒ City Burlington (Kenosha City)	3-8-11
8. Pamela [illegible]	7208 49th Ave Kenosha	☐ Town ☐ Village ☒ City Kenosha	03-08-11
9. Mark Castelli	5026 Harrison Rd Kenosha	☐ Town ☐ Village ☒ City Kenosha	3-8-11
10. Peter Mayer	5514 - 86 ST PL - PR 53158	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3-8-11

Certification of Circulator

I, Jeremiah M. Barnard (Jeremiah M. Barnard), certify:
(name of circulator)

I reside at 11126 11th 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.

03/08/11
(date)

Jeremiah M. Barnard
(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-1 (Rev. 6/2007) The information on this form is required by §§ 5.49(2) and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 2984, Madison, WI 53707-2984, 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]	8560 235th Ave Salem WI 53168	☒ Town ☐ Village ☐ City Salem	3-8-2011
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, KENNETH C. MUEHLBAUER (name of circulator), certify:

I reside at 9128 PRAIRIE VILLAGE DR. PLEASANT PRAIRIE, 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.

3/10/2011
(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. 6/2004) The information on this form is required by §§. 5.40 & 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707. FAX 608/265-5505. http://elections.state.wi.us/ Page No. 741

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. Ronald B Grunseth	2310-100th Ave	☒ Town ☐ Village ☐ City Somers	3-7-11
2. DAVID P. SALERNO	11515-155 Lot 104 Sturtevant WI 53177	☒ Town ☐ Village ☐ City Somers	3-7-11
3. Elizabeth Salerno	11515-1 St Lot 104 Sturtevant 53177	☒ Town ☐ Village ☐ City Somers	3-7-11
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, KENNETH C. MUEHLBAUER (name of circulator), certify:

I reside at 9128 PRAIRIE VILLAGE DR. PLEASANT PRAIRIE, 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.

3/10/2011
(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-476 (Rev. 6/2011) 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, 608.266.8005, 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. Hillary Ehellinger	6530 42nd Avenue Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/8/2011
2.	710 Sheridan Road #704 Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/8/2011
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, Jeremiah Barnard, certify:
(name of circulator)

I reside at 11126 11th 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.

03-08-2011
(date)

Jeremiah M. Barnard
(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. 6/2001) 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. George J Thomas II	9168 Prairie Village Dr	☐ Town ☑ Village ☐ City Pleasant Prairie	3-6-11
2. Stephanie M. Thomas	9168 Prairie Village Drive	☐ Town ☑ Village ☐ City Pleasant Prairie	03/06/11
3. Kurt A Roemer	3935-48th Ave	☐ Town ☐ Village ☑ City Kenosha	3/6/11
4. Alexis A. Roemer	3935-48th ave	☐ Town ☐ Village ☑ City Kenosha	3/6/11
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, KENNETH C. MUEHLBAUER, certify:
(name of circulator)

I reside at 9128 PRAIRIE VILLAGE DR PLEASANT PRAIRIE, 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.

3/10/2011
(date)

Kenneth C. Muehlbauer
(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. 744

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.	5610 - 33rd AVE. KENOSHA, WI. 53144	☐ Town ☐ Village ☒ City KENOSHA,	2-27-11
2.	5610 33rd Ave KENOSHA WI 53144	☐ Town ☐ Village ☒ City KENOSHA	2-28-11
3.	7800 144th AVE BRISTOL, WI	☐ Town ☒ Village ☐ City BRISTOL, WI	2-28-11
4.	5108-24PL KENOSHA, WI 53144	☐ Town ☐ Village ☒ City KENOSHA	2-28-11
5.	8744-47 AVE KENOSHA, WI 53142	☐ Town ☐ Village ☒ City Kenosha	2/28/11
6.	5133 22 AVE KENOSHA, WI 53140	☐ Town ☐ Village ☒ City KENOSHA	3/1/11
7.	1686 34 Ave Kenosha WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/3/11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Norm LeWand, certify:
(name of circulator)

I reside at 5610 - 33rd AVE, KENOSHA, WI. 53144 - 4109.
(circulator's residence - include number, street, and municipality)

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

3-8-11
(date)

(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. 745

GAB-170 (Rev. 6/2017) 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

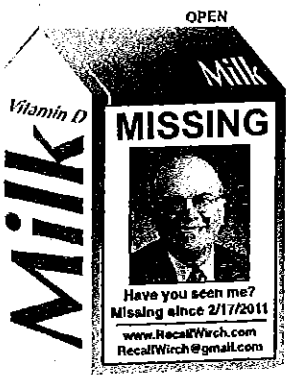
RECALL PETITION

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. Jerome F. Binsfeld	4620 HARRISON RD Kenosha, WI 53140	☐ Town ☐ Village ☑ City Kenosha	3/8/11
2. Maria Rodriguez	2106-52 ST Kenosha, WI	☐ Town ☐ Village ☑ City Kenosha	3/8/11
3.		☐ Town ☐ Village ☐ City	
4. [illegible]	3393 115th St Pleasant Pr. WI 53158	☐ Town ☑ Village ☐ City Pleasant Prairie	3/8/11
5. Robert [illegible]	6513 238th Ave Paddock Lake, WI 53168	☐ Town ☑ Village ☐ City Paddock Lake	3/8/11
6. [illegible]	8204 63rd Ave Kenosha, WI 53142	☐ Town ☐ Village ☑ City Kenosha	3/8/11
7. Donald [illegible]	11331-47th Ave Pleasant Pr. 53158	☐ Town ☐ Village ☐ City Pleasant Prairie	3/8-11
8. Sandra [illegible]	11331-47th Ave Pl. Prairie	☐ Town ☑ Village ☐ City Pleasant Prairie	3/8-11
9. Ruth Rodriguez	6672 102nd St Pleasant Prairie	☐ Town ☑ Village ☐ City Pleasant Prairie	3/8/11
10. Thomas Conforti	9294-62nd Ct Pl. Pr, WI 53158	☐ Town ☑ Village ☐ City Pleasant Prairie	3/8/11

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.

03/09/2011 (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

Page No. 746

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

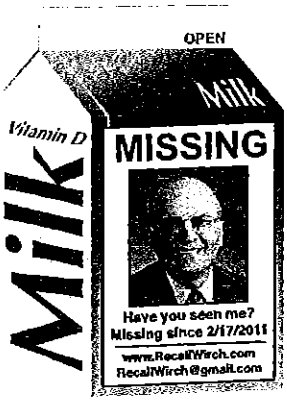
RECALL PETITION

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. Kristine Corfont	9294-Grand Court Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/8/11
2. [illegible]	2319 11th Place Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/8/11
3. Mary E. Domes	10105-32nd Ave Pl. Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/8/11
4. John D Gulley	883 MANOR DR SILVER LAKE WI 53170	☐ Town ☒ Village ☐ City Silver Lake	3/8/11
5. [illegible]	3215 121st St. Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/8/11
6. [illegible]	11129 237th Ave Salem WI	☐ Town ☒ Village ☐ City Salem	3/8/11
7. David J Leptich	17100 93RD STREET BRISTOL WI 53104	☐ Town ☒ Village ☐ City Bristol	3/8/11
8. Becky Gammon BECKY GAMMON	2547 Lincoln Rd Kenosha 53143	☐ Town ☐ Village ☒ City Kenosha	3/8/11
9. [illegible]	4637 114 St Pleasant Pr	☐ Town ☒ Village ☐ City Pleasant Prairie	3/8/11
10. [illegible]	101 Wisconsin Ave Twin Lakes WI 53181	☐ Town ☒ Village ☐ City Twin Lakes	3/8/11

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.

March 8, 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

Page No. 747

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 Jura	10827-86 Ct Pleasant Prairie, WI	☐ Town ☒ Village ☐ City PL. Prairie	3-8-11
2. Judith Copponi	3913-86 Place Kenosha WI 53142	☐ Town ☒ Village ☐ City Pl. Prairie	3-8-11
3. Joe Copponi	3913-86 PLACE KENOSHA WI 53142	☐ Town ☒ Village ☐ City Pl. Prairie	3-8-11
4. Joann Anagnostou	10718-41 AVE Pleasant Prairie	☐ Town ☒ Village ☐ City Pl. Prairie	3/8/11
5. Joann Rochnow	8222 65th Place Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/8/11
6. Christa McDust	8516-48th Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/8/11
7. Margaret Kokenko	3519-17th St Kenosha, WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/8/11
8. Gary Kuhnke	38225 87th Place Burlington, WI	☒ Town ☐ Village ☐ City RANDALL	3/8/11
9. [illegible]	2802 Springbrook Rd Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pl. Prairie	3/8/11
10. [illegible]	4305 67th St Kenosha WI 53142	☐ Town ☐ Village ☐ City Kenosha	3/8/11

Certification of Circulator

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

I reside at 4816-84th Street, Kenosha, Wisconsin (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.

March 9, 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 9 (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

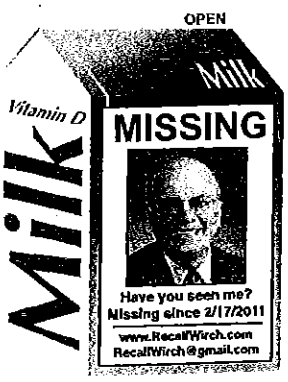
RECALL PETITION

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. Mary Ellen J. Guttormson	8307-43rd Ave Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	3/06/2011
2. Marsalyn Stecz	7932-34 Avenue Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/06/2011
3. [illegible]	8922-17th ave Kenosha Wis.	☐ Town ☐ Village ☒ City Kenosha	3/6/011
4. [illegible]	1709-32ND KENOSHA WI	☐ Town ☐ Village ☒ City KENOSHA	3/6/2011
5. [illegible]	1709-32nd Ave Kenosha, Wi.	☐ Town ☐ Village ☒ City Kenosha	3/6/2011
6. [illegible]	7932-34TH AVE Kenosha, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3-6-2011
7. [illegible]	6108-60th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-7-11
8. [illegible]	7018 57th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-7-11.
9. Theresa M. Madsen	4603-39th ave Kenosha Wis 53144	☐ Town ☐ Village ☒ City Kenosha	3-7-11
10. [illegible]	10806-79th Street Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3-7-11

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.

3/8/11
(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

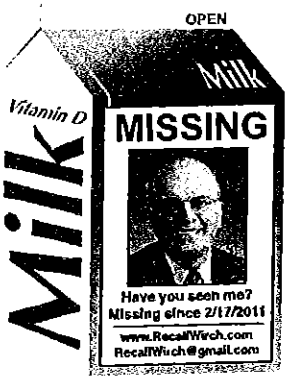
RECALL PETITION

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

(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. Virginia B Mjilu	6316 47th Ave. Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-6-11
2. [illegible]	5708 64th St Kenosha W. 53148	☐ Town ☐ Village ☒ City Kenosha	3-6-11
3. [illegible]	10627 - 79 ST. Pl. Prairie 53158	☐ Town ☒ Village ☐ City Pl. Prairie	3-6-11
4. [illegible]	8315 43 Ave Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pl Prairie	3/6/11
5. Dollie L Cannon	8315 43 Ave Kenosha WI 53142	☐ Town ☐ Village ☐ City Pl Prairie	3/6/11
6. [illegible]	6217 34th Ave. Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/6/11
7. Linda Henne	6916 236th Ave Salem, WI 53168	☐ Town ☒ Village ☐ City Salem	3/6/11
8. [illegible]	3628 81 St Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-6-11
9. Harry L Moore, JR	7113 - 41st Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/6/11
10. Horst Wentzel	4750 - 83 STR. Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3/6/11

Certification of Circulator

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

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.

3/8/11 (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

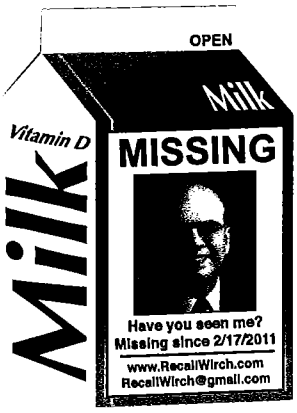
RECALL PETITION

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

(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. Heidi [illegible]	5316 57th St Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3-6-11
2. Allan Silva	3705-27th St. Kenosha, WI 53144	☐ Town ☐ Village ☒ City Kenosha	3-6-11
3. Crystal Hillman	1463-39th Ave Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3-6-11
4. [illegible]	6048-43rd Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-6-11
5. Howard Schmeling	5209-63rd Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-6-11
6. Marlene Schmeling	5209-63 St Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-6-11
7. Victor Wanfort	7309-57TH AVE KENOSHA WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3-6-11
8. [illegible]	N1449 Hussian Blvd Lake Geneva, WI 53143	☐ Town ☐ Village ☒ City ~~Bloomfield~~	~~3-6-11~~
9. Brett [illegible]	6523 5th Ave Kenosha, WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/6/11
10. Robert Miller	6316 47th Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/6/11

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.

3/8/11
(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

Page No. 751

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

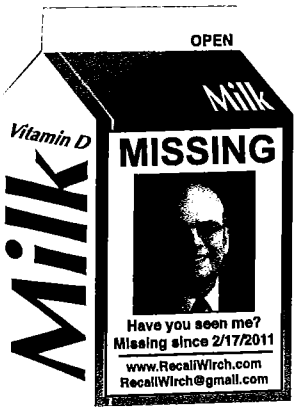
RECALL PETITION

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. Renna Anderson	3103 89 St. Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/6/11
2. Bruce Henne	6916 236th Ave Salem, WI, 53168	☐ Town ☒ Village ☐ City Salem	3/6/11
3. Randy Gillmore	1403 39th Ave Kenosha, WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/6/11
4. Janet Hagen	1962 - 76th Street Kenosha, WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/6/11
5. Jane, E Berg	3403 - 51st Ave Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/6/11
6. [illegible]	9083 First Ridge Dr Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/6/11
7. [illegible]	3132 - 106th Place Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/6/11
8. [illegible]	3132 - 106th Place Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/6/11
9. [illegible]	6012 59th Ave Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/06/11
10. [illegible]	5316 89th St Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3-6-11

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.

3/8/11 (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

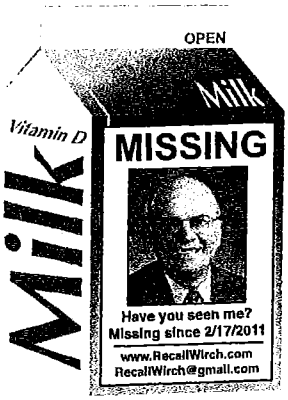
RECALL PETITION

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

*(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]	8755 - 3rd AVE PLST PRAIRIE	☐ Town ☒ Village ☐ City PLST PRAIRIE	3/7/11
2. Jackie L Snider	13324 TIMBER RIDGE DR PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/7/2011
3. [illegible]	269 56TH AVE KENOSHA WI 53144	☒ Town ☐ Village ☐ City SOMERS	3-7-2011
4. C Salminen	12040 44th Ave PL. Pr. WI 53158	☐ Town ☒ Village ☐ City PL. Prairie	3-7-11
5. Erwin Schmidt	7939 - COOPER RD KENOSHA WI	☐ Town ☒ Village ☐ City PL PRAIRIE	3-7-11
6. [illegible]	6415 104 St Pleasant Prairie	☐ Town ☐ Village ☐ City Pl. Prairie	3-7-11
7. [illegible]	7705 - 19 Ave Kenosha	☐ Town ☐ Village ☐ City Kenosha	3-7-11
8. [illegible]	7709 19 ave Kenosha WI	☐ Town ☐ Village ☐ City Kenosha	3/7/11
9. Judy Rasch	7218 54th ave. Kenosha, Wisc.	☐ Town ☐ Village ☐ City Kenosha	3/7/11
10. [illegible]	Kenosha, WI 53144 4727 60th St	☐ Town ☐ Village ☐ City Kenosha	3/7/11

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.

3/8/11 (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

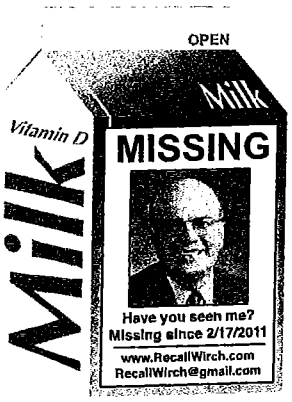
RECALL PETITION

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

(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. A Argyris	3007 85th St #15 Kenosha	☐ Town ☐ Village ☒ City Kenosha	3/10/11
2. Brian Schulz	2509 47th court Kenosha	☐ Town ☐ Village ☒ City Kenosha	3/10/11
3. David Stender DAVID STENDER	8302 26TH AVE KENOSHA WI 53143	☐ Town ☐ Village ☒ City KENOSHA	3/10/11
4. Hill, Scott	8302 26th Ave Kenosha WI 53143	☐ Town ☐ Village ☒ City Kenosha	3-10-11
5. Moore, Chris	6715 244th Str Paddock Lake, WI	☐ Town ☒ Village ☐ City Paddock Lake	3-10-11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 6313 42nd 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.

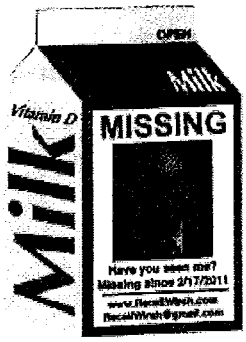
3/11/11
(date)

John Infante
(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. Andrew Johnson	5715 67 Street	☐ Town ☐ Village ☒ City Kenosha	2-25-11
2. [illegible]	5710 67th STREET	☐ Town ☐ Village ☒ City Kenosha	2-27-11
3. Martha Johnson	5715 67th St.	☐ Town ☐ Village ☒ City Kenosha	2-28-11
4. [illegible]	5704 67th St	☐ Town ☐ Village ☒ City Kenosha	3-7-11
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, Andrew Johnson (name of circulator), certify:

I reside at 5715 67 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.

3-10-11 (date) Andrew Johnson (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. 755

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.	5210 65TH PL KENOSHA WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3-10-11
2.	2006 · 35th St Kenosha, Wi. 53140	☐ Town ☐ Village ☒ City Kenosha	3·10·11
3.	9925 4th Ave P Prairie WI	☐ Town ☒ Village ☐ City P.Prairie	3·10·11
4.	6330 57th Ave Kenosha, Wi. 53142	☐ Town ☐ Village ☒ City Kenosha	3-10-11
5.	4719 60 ST Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3-10-11
6.	5925 81ST Kew, 53142	☐ Town ☐ Village ☒ City Kenosha	3-10-11
7.	6042 60th Ave Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/10/11 53142
8.	6062 60th Ave Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/10/11 53142
9.	5403 85th St. Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11 53158
10.	7403 98TH AVE	☐ Town ☐ Village ☐ City Kenosha WI	3-10-11

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.

3/10/11
(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. 02/2011) 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
608-266-8005, http://gab.wi.gov, email: gab@wi.gov

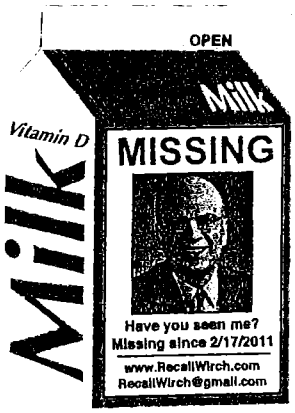
RECALL PETITION

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. Fred Christ	6814 32nd Ave	☒ Town ☐ Village ☐ City Kenosha	3/10/11
2. Robin DeFoe	6814 32nd Ave	☒ Town ☐ Village ☐ City Kenosha	3/10/11
3. Robert J. Ellison	8402 26th Ave	☐ Town ☐ Village ☒ City Kenosha	3/10/11
4. Sam A. Cavalier	5224-85th St PL PR WI	☐ Town ☒ Village ☐ City Kenosh	3-10-11
5. Renisha Light	7403 98th Ave. unit C	☐ Town ☐ Village ☒ City Kenosha	3-10-11
6. Katherine HARRIS	2008 73rd St Kenosha,	☐ Town ☐ Village ☒ City Kenosha	3/10/11
7. Paula Feckler	10840 36th Ct Pleasant Pr 53158	☐ Town ☒ Village ☐ City Kenosha	3/10/11
8. Robin Gyr	6918 27th Ave Kenosha, WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/10/11
9. [illegible]	6571 57th Ave Kenosha WI 53142	☒ Town ☐ Village ☒ City Kenosha	3/10/11
10. Marie Hayden	5815-69st Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/10/11

Certification of Circulator

I, Elliot Retzlaff, 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.

3-10-11
(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.

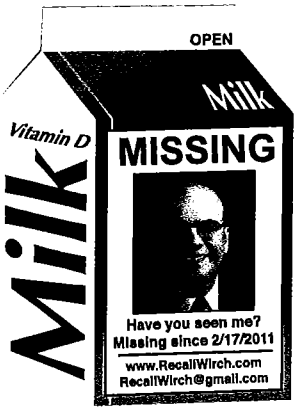
RECALL PETITION

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
Renee Wendt	10811 7th Street Sturtevant, WI	☒ Town ☐ Village ☐ City Somers	2/26/11
2. [illegible]	10811 7th St. Sturtevant, WI 53177	☒ Town ☐ Village ☐ City Somers	2/26/11
3. Samuel Adam Sacket	1714 32nd Street Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	2/26/11
4. Charline Sacket	1714-32nd ST Kenosha WI 53140	☐ Town ☐ Village ☒ City Kenosha	2/26/11
5. Louis Cerpi	1511-15th Court Kenosha WI 53140	☐ Town ☐ Village ☒ City Kenosha	2/26/11
6. Christine C. Pessi	1511-15th Court Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	2-26-2011
7. Patricia L. Knapp	2403 35th St. Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	2-27-2011
8. Christopher J. Knapp	2403 35th St Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	2-27-2011
9. Emily Knapp	2403 35th St Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	2-27-2011
10. Joseph Lesnik	9717-31st St. 53140	☐ Town ☐ Village ☒ City Kenosha	3-9-2011

Certification of Circulator

I, John S. Sacket Jr., certify:
(name of circulator)

I reside at 1714 32nd St. 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.

3/10/11
(date)

John S. Sacket Jr.
(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. Lee E. Lawson	5131 106th St PLEASANT PRAIRIE	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11
2. James A Lawson	5131-106th St. Pleasant Prairie,	☐ Town ☒ Village ☐ City Pleasant Prairie	10.mar.11
3. Austin Rightler	8201 Lexington Pl #4 Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11
4. Michael J Gallagher	1315 172 AV UNION GROVE	☒ Town ☐ Village ☐ City PARIS	3/10/11
5. Linda G Gallagher	1315-172 Av. Union Grove	☒ Town ☐ Village ☐ City Paris	3-10-11
6. [illegible]	4718 78th Pl Kenosha	☐ Town ☐ Village ☒ City Kenosha	3-10-11
7. Kenneth Tibor	8612 3RD AVE PLEASANT PRAIRIE, WI	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/10/11
8. Paulette Tibor	8612 3RD Ave Pleasant Prairie WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11
9. [illegible]	3028 13TH AVE Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/10/11
10. Phillip L. Sano	9249 44th CT UNIT 162 PLEASANT PRAIRIE, WIS.	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11

Certification of Circulator

I, Kevin Pursell (name of circulator), certify:

I reside at 3916 16th Avenue 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.

3-10-11
(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 2984, Madison, WI 53707-7984 (608-266-8005, fax: 267-0500, 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]	7441 352nd Avenue Burlington Wis 53105	☐ Town ☐ Village ☒ City BURLINGTON	3-2-2011
2. [illegible]	5710 64th St KENOSHA, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3-2-2011
3. Dennis Williams	8213 68th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3-4-2011
4. [illegible]	10200 64th Ave Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3-4-2011
5. R.C. [illegible]	12630 254th CT TREVOR, WI 53179	☒ Town ~~☐ Village~~ ☐ City ~~TREVOR~~ SALEM	3-8-2011
6. Michael [illegible]	1726 75TH STREET KENOSHA, WI 53143	☐ Town ☐ Village ☒ City KENOSHA	3-8-2011
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 5710 64th Street 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)

[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. 760

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

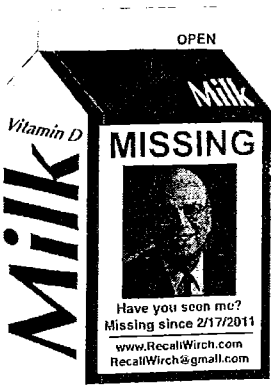
RECALL PETITION

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]	8716 13pl PO Box 355 Somers WI	☐ Town ☒ Village ☐ City Somers WI.	3/9/11
2. [illegible]	1400 39th Ave Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3/9/11
3. [illegible]	1350 136th Ave	☒ Town ☐ Village ☐ City Paris	3/9/11
4. John A. Jaminet	11222-38TH KENOSHA, WIS. 53144	☒ Town ☐ Village ☐ City SOMERS	9MAR2011
5. [illegible]	4421-18 St Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	3-9-11
6. [illegible]	10404 208th Ave Trevor WI 53168	☒ Town ☐ Village ☐ City Salem	3-9-11
7. [illegible]	226 EAST ELM SILVER LAKE WI 53170	☐ Town ☐ Village ☐ City SILVER LAKE	3-9-11
8. [illegible]	8300 9th St PO Box 53	☒ Town ☐ Village ☐ City Somers	3-9-11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Jacqueline F Leipzig, certify:
(name of circulator)

I reside at 8707-10th Pl. 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.

3-9-11 (date) Jacqueline F Leipzig (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

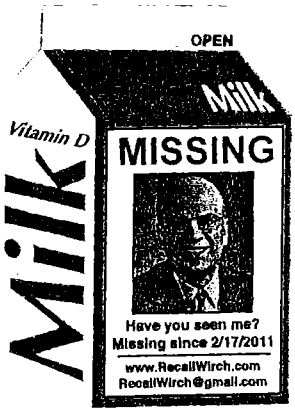
RECALL PETITION

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 lire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jeffrey A Pocard	822 116TH ST	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/10/11
2. [illegible]	10116 38TH Ave P.P. 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3-10-11
3. Clifford J Bragg	11125-88 St. PP. 53158	☐ Town ☒ Village ☐ City Pleasant Praine	3-10-11
4. Dr Andrea Wood	11307 60th PL Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-10-11
5. Heather Keung	7216 286th Ave Salem, WI 53168	☒ Town ☐ Village ☐ City Salem	3/10/11
6. Diane Jensen Sprud	8505 108th Ave Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Kevin Pursell (name of circulator), certify:

I reside at 3916 10th Avenue 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.

3-10-11
(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.02/2007) 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

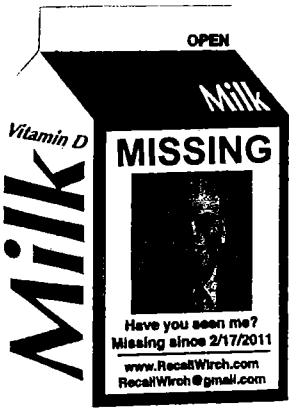
RECALL PETITION

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. Craig Rausch	9722 11TH AVE PLEASANT PRAIRIE, WI	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE.	3/9/11
2. Jennifer Rezze	5332 68th St Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/11
3. Carol B	1636 136th Ave Union Grove, WI 53182	☒ Town ☐ Village ☐ City Paris	3/9/11
4. [illegible]	8630 113th Pl Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/9/11
5. [illegible]	6727 37TH AVE KENOSHA, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3/9/11
6. [illegible]	2328 ROOSEVELT RD KENOSHA, WI.	☐ Town ☐ Village ☒ City KENOSHA	3/9/2011
7. Beth Olsen	8630 113th Ave Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/9/2011
8. [illegible] Vore	14551 10TH ST. Pleasant Praire WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/9/2011
9. [illegible]	22327 85TH PL SALEM, WI 53168	☒ Town ☐ Village ☐ City SALEM	030911
10. Norman [illegible]	1372 30TH Ave 9F Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/9/11

Certification of Circulator

I, PETE LOEWEN, certify:
(name of circulator)

I reside at 4305 - 4TH 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.

3-9-2011
(date)

Pete Loewen
(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

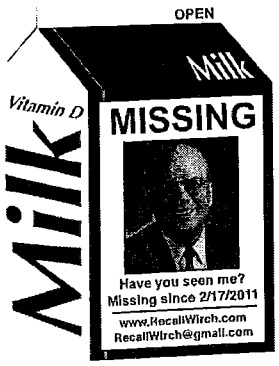
RECALL PETITION

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. Carl H Jensen	6011 - 71st	☐ Town ☐ Village ☒ City Kenosha	3-10-11
2. Judy Jensen	6011 - 71st	☐ Town ☐ Village ☒ City Kenosha	3-10-11
3. [illegible]	10906 8[illegible] ST	☐ Town ☒ Village ☐ City Pleasant Prairie	3-10-11
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, Robert E. Alexander, certify:
(name of circulator)

I reside at 5728 81st St 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.

3-10-11
(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. 764

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@gab.wi.gov

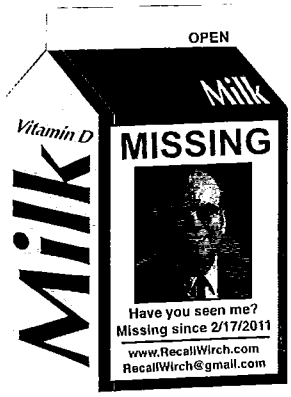
RECALL PETITION

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.	6619 100th AVE KENOSHA, WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3/10/11
2.	12585 TIMBER RIDGE DR PLEASANT PR. WI 53158	☐ Town ☒ Village ☐ City PLEASANT PR	3/10/11
3.	913 92nd Place Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11
4.	6806-26 Ave Kenosha, WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/10/11
5.	3604 86th Street Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/10/11
6.	8121 17th Ave Kenosha WI 53143	☐ Town ☐ Village ☒ City Kenosha	3·10·11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Caroline A. Kotzer, certify:
(name of circulator)

I reside at 12716 257th Ave., Trevor, WI 53179, 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.

3-10-11
(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. 765

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

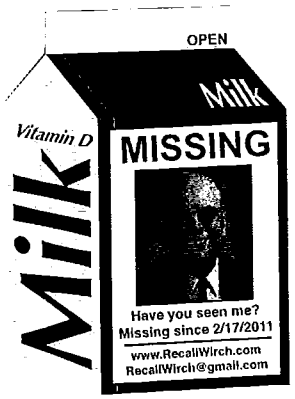
RECALL PETITION

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. Donna Finnan	3323 85th St D Kenosha Wis	☐ Town ☐ Village ☒ City Kenosha	3/10/11
2. [illegible]	3708 Van Buren Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3/10/11
3. [illegible]	8960 31st Ave Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/10/11
4. Elaine M. Schaalmayer	9903 3rd Ave Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3/10/11
5. [illegible]	916 72nd St Kenosha WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/10/11
6. [illegible]	5517 61 KENOSHA, WI, 53142	☐ Town ☐ Village ☒ City KENOSHA	3/10/11
7. Edna Wessling	4534 60th Ave Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/10/11
8. [illegible]	9460 43rd Ave P. Prairie 53158	☐ Town ☒ Village ☐ City Pl Prairie	3/10/11
9. Diana Moreland	9590-42nd CT Pleasant Prairie, 53158	☐ Town ☒ Village ☐ City P. Prairie	3/10/11
10. [illegible]	6619-100th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/10/11

Certification of Circulator

I, Caroline A. Katzer, certify:
(name of circulator)

I reside at 12716 257th Ave., Trevor, WI 53179, 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.

3-10-11
(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. 766

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

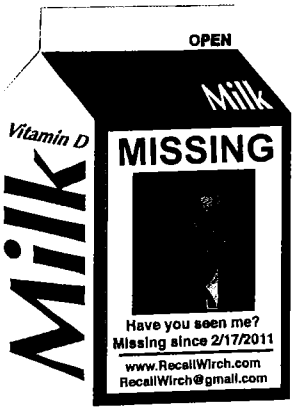
RECALL PETITION

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 Thomas	8354-23 Ave Kenosha 53143	☐ Town ☐ Village ☒ City Kenosha	3/10/11
2. Sharon Thomas	8354-23 Ave Kenosha 53143	☐ Town ☐ Village ☒ City Kenosha	3/10/11
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, Caroline A. Katzer, certify:
(name of circulator)

I reside at 12716 257th Ave., Trevor, WI 53179, 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.

3-10-11 (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

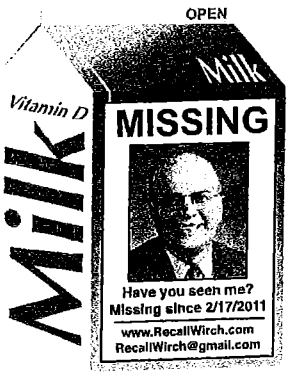
RECALL PETITION

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.	3010 104th street	☐ Town ☑ Village ☐ City Pleasant Prairie	3/10/11
2.	8427 17th Ave	☐ Town ☐ Village ☑ City Kenosha	3-10-11
3.	7329 90ND Ave	☐ Town ☐ Village ☑ City Kenosha	3-10-11
4.	8425 25th AVE	☐ Town ☐ Village ☑ City KENOSHA	3-10-11
5.	8330 32nd St	☑ Town ☐ Village ☐ City Pleasant Prairie	3/10/11
6.	2732-85th St	☐ Town ☐ Village ☐ City Kenosha	3/10/11
7.	2732-85th St	☐ Town ☑ Village ☐ City Kenosha	3/10/11
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 40ND 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.

3/11/11 (date) (signature of circulator)

JA

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

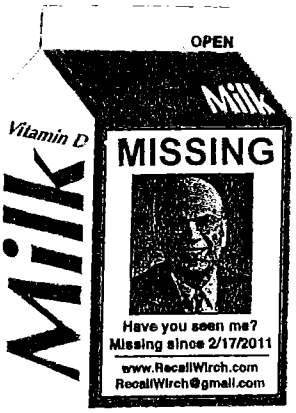
RECALL PETITION

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
Sandra J Moran	3123-55 Ct #56 Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/10/11
2. [illegible]	8522-43 Ave Kenosha, WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11
3. Matt C [illegible]	6865-94th Pl HH Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	3/10/11
4. Vanessa Jackson	1614 62nd St Kenosha WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/10/11
5. Leticia Molina	1616 62nd St Kenosha WI 53143	☐ Town ☐ Village ☒ City Kenosha	3-10-11
6. [illegible]	6500-67th St Kenosha WI 53142	☐ Town ☐ Village ☐ City Kenosha	3-10-11
7. [illegible]	4826-69th St Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-10-11
8. Carol Pingitore	4826-69th St Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3/10/11
9. Margaret Kendall	3323 85th St Unit F Kenosha WI	☒ Town ☐ Village ☐ City Kenosha	3/10/11
10. Randolph Randy Shene	7328 14th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/10/11

Certification of Circulator

I, Kevin Purcell, certify:
(name of circulator)

I reside at 3916 10th Avenue 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.

3/10/11
(date)

Kevin Purcell
(signature of circulator)

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

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

Page No. 769

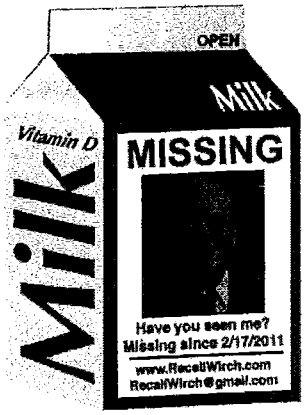
RECALL PETITION

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. Claudine Port	5926, 6th. Pl. Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/9/2011
2. [illegible]	5926 6th Pl Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/9/2011
3. [illegible]	8417-204th Circle Bristol, WI. 53104	☐ Town ☒ Village ☐ City Bristol	3/9/2011
4. [illegible]	9102 River Rd. Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/9/2011
5. [illegible]	6920-54th ST KENOSHA WI 53144	☐ Town ☐ Village ☒ City KENOSHA	3/9/2011
6. Lee S. Dougherty	7801-88th Ave #314 Pleasant Prairie WI	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/9/11
7. JASON WEBER	6023 92ND Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City KENOSHA	3/9/11
8. [illegible]	10015-29TH AVE 53158 PLEASANT PRAIRIE WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/9/2011
9. [illegible]	8222 65th Place Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/11
10. [illegible]	3131 100th AVE KENOSHA WI. 53144	☒ Town ☐ Village ☐ City SOMERS	3/11/2011

Certification of Circulator

I, Jeff Lauer, certify:
(name of circulator)

I reside at 8770 83rd Place, 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.

3/11/2011 (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. 770

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

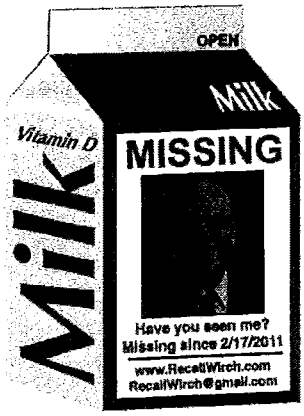
RECALL PETITION

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. Stephanie Chibas	3807 Van Buren Rd Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3/11/2011
2. H Kanonch	5712 41st Ave Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/11/11
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, Julie Leischner, certify:
(name of circulator)

I reside at 6523 5th 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.

3-11-11
(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. 71

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.	5624 35th St Apt 204 Kenosha	☐ Town ☐ Village ☒ City Kenosha	3/8/11
2. Nicole Collins	5624 35th St. Apt. 204 Kenosha	☐ 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, Nicholas D. Collins, certify:
(name of circulator)

I reside at 5624 35th St. Apt 204, Kenosha (city of).
(circulator's residence - include number, street, and municipality)

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

3/8/11
(date)

(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. 772

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

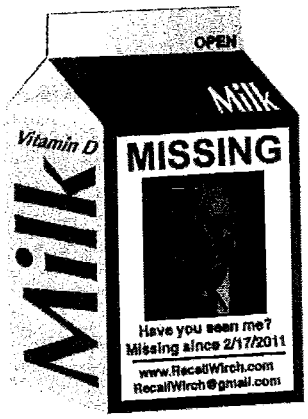
RECALL PETITION

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. [signature]	8310 - COOPER RD KENOSHA, WISC 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3-9-11
2. [signature]	7702 34th Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/11
3. [signature]	4821 57th St. Kenosha WI 53144	☐ Town ☐ Village ☒ City KENOSHA	3-9-11
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, Jeff Lauer (name of circulator), certify:

I reside at 8770-83rd PL 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.

3/9/2011 (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. 773

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

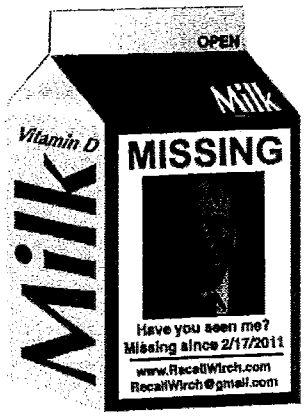
RECALL PETITION

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. Adam E Dennis	738 SYCAMORE KENOSHA, WI 53140	☐ Town ☐ Village ☐ City Kenosha	3/7/2011
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, Geri Dougherty - Geri DOUGHERTY, certify:
(name of circulator)

I reside at 9500 - 81st #317, Pleasant Pr. 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.

3-7-2011 (date) Geri Dougherty (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. 774

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

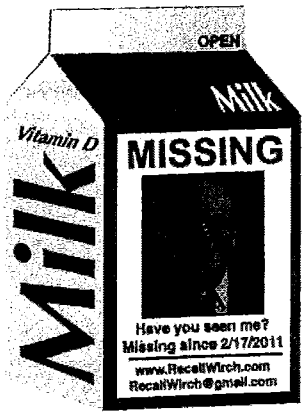
RECALL PETITION

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. William D. Hulk	2420 52nd ST. Apt #3 Kenosha, WI 53140	☐ ~~Town~~ ☐ Village ☒ City Kenosha	3/8/2011
2. David J. Kooch	6553 50th Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/8/2011
3. Harold Justice HAROLD JUSTICE	6211 242A4 SALEM WI 53168	☐ Town ☒ Village ☐ City Paddock LAKE	3-8-11
4. Donald Fa Jurnure	8200-75 ST Lot 27 KENOSHA WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/2011
5. Megan Pelini	7403 41st Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/2011
6. Keri Keri Martini	3319 27th Ave Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/9/2011
7. Richard Pelini	8354-25th Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3-9-11
8. Linda Falk	8200 65th PL Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-9-11
9. [illegible]	3446 16th PL Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/9/2011
10. [illegible]	8206 41st AVE Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/2011

Certification of Circulator

I, Jeff Lauer, certify:
(name of circulator)

I reside at 8770 83rd Place 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.

3/9/2011 (date) — Jeff Lauer (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. 775

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

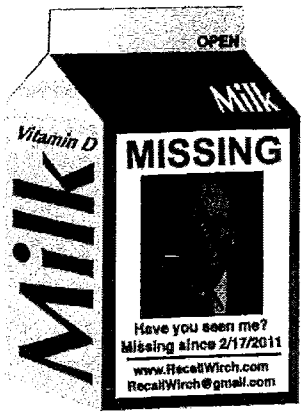
RECALL PETITION

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. Shannon Cathers	6404 92nd Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/11
2. James Larson	4819 85th ST KENOSHA, WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/9/11
3. Joe Sikkels	10320-160th Ave Bristol Wi 53104	☒ Town ☐ Village ☐ City Bristol	3/9/11
4. Jacqueline Todd	7801 88 Ave Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/9/11
5. [illegible]	7403 41st Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/11
6. [illegible]	6801 243rd Ave Salem WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	3/9/11
7. DANIEL LOOTS	6605 96th Avenue Kenosha WI	☐ Town ☐ Village ☒ City Kenosha	3/9/11
8. Sharon Franklin	7331 43rd Ave Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/9/11
9. Sarah Mecka	2304 82nd St. Kenosha, WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/9/11
10. Jennifer Lebrecht	9902 81st Place Pleasant Prairie, WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3/9/11

Certification of Circulator

I, Joel D. Peterson, certify:
(name of circulator)

I reside at 8315 10th Place, Somers, Wisc 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.

3/9/11 (date)

Joel D. Peterson (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. 776

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

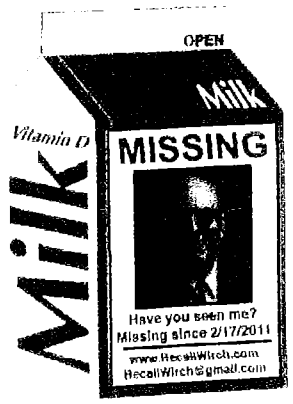
RECALL PETITION

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 Candy Crawford	4406 Harrison Rd. Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-2-11
2. Matthew Walkowski	7010-53rd St. Unit 76 Kenosha, WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/2/11
3. [illegible]	8215-57th Ave Kenosha WI 53142	☐ Town ☒ Village ☐ City Pleasant Prairie	3/2/11
4. Rachelle Pogorzelski	21808 105 St Trevor WI 53179	☒ Town ☐ Village ☐ City Trevor Salem	3/2/11
5. [illegible]	29821 75th St. Salem WI 53168	☒ Town ☐ Village ☐ City Salem	3-2-11
6. Barbara [illegible]	8629-46 Ave Kenosha WI 53144	☒ Town ☐ Village ☐ City Kenosha	3/2/11
7. TODD PEMBROW	5024 308th AVE Salem WI 53168	☒ Town ☐ Village ☐ City Salem	3/2/11
8. David E. [illegible]	8629-46th AVE. KENOSHA, WI	☐ Town ☐ Village ☒ City KENOSHA	3/03/11
9. Mary Kay Belcher	4812-17th St. Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/3/11
10. [illegible]	5314-82 St Kenosha WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/4/11

Certification of Circulator

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

I reside at 4211 18th Street 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.

3/10/2011
(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. 777

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. Amber Belcher	4812 17th St Kenosha, WI 53144	☐ Town ☐ Village ☒ City Kenosha	3/3/11
2. Greg Belcher	1769-21 Ave Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3/3/11
3. [illegible]	3623 28th AV Kenosha	☐ Town ☐ Village ☒ City Kenosha	3/3/11
4. Elsa Richards	5619 St. Andrews Ct. 101 Racine, WI 53405	☐ Town ☐ Village ☒ City Racine	3/3/11
5. Ashley Richer	6323 60th avenue Kenosha, Wi 53142	☐ Town ☐ Village ☒ City Kenosha	3/3/11
6. Nicole Booth	1910 89th St Kenosha, WI 53143	☐ Town ☐ Village ☒ City Kenosha	3/3/11
7. Rachel Smith	4812 17th St. Kenosha, WI 53144	☐ Town ☐ Village ☒ City Kenosha	3-3-11
8. Rachel DeGuero	4731 Harding Rd Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-3-11
9. Tasya Exner	8733 Majestic Hills Dr Sturtevant WI 53177	☐ Town ☒ Village ☐ City Sturtevant	3-3-11
10. Jeff Belcher	4812 17th street Kenosha wi 53144	☒ Town ☐ Village ☐ City Somers	3-3-11

Certification of Circulator

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

I reside at 4211 18th Street 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.

3/11/2011
(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. 778

GAB-170 (Rev. 6/2005) 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. Small, take-out pad

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. Pennie Smo RN	4211 18th Street Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	3/2/11
2. Nemi Valeah RN	1808 16th Ave Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3-2-11
3. Ginger Saaski	8222 Poppy Dr Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3/2/11
4. [illegible]	7301 40th AVE Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3/2/11
5. Rhonda Cowry	1808 16th Ave Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/2/11
6. Carl DeFrath	4215½ Washington Racine, WI 53405	☐ Town ☐ Village ☒ City Racine	3/2/11
7. [illegible]	8411 Lexington Pl 308 6902 30th AVE	☐ Town ☒ Village ☐ City Pleasant Prairie	3/2/11
8. [illegible]	Kenosha WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-2-11
9. [illegible]	4814 26th St. Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	3-2-11
10. Rita Bu	1769-21 Ave Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3-3-11

Certification of Circulator

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

I reside at 4211 18th Street 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.

3/11/2011
(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. 6/2005) 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://elections.state.wi.us, email: gab@wi.gov

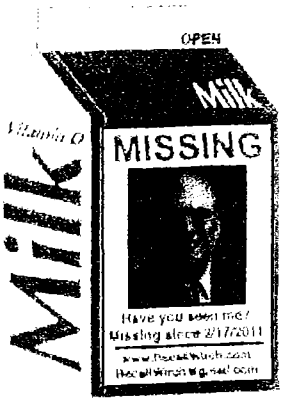
RECALL PETITION

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 Melissa Hansen	1727-41ST Place Kenosha WI 53140	☐ Town ☐ Village ☒ City Kenosha	3-8-11
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 G. Gruno (name of circulator), certify:

I reside at 4211 18th Street 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.

3/14/2011
(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. 6-2005) The information on this form is required by ch. 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. 780

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. Cody Gano	4211 18th Street Kenosha WI 53144	☒ Town ☐ Village ☐ City Somers	3-2-11
2. Pamela Jantz	3808-31 Ave Kenosha Wi. 53144	☐ Town ☐ Village ☒ City Kenosha	3-3-11
3. [illegible]	4412 18th ST Kenosha, WI 53140	☐ Town ☐ Village ☒ City Somers	3-3-11
4. David L Hamm	3940-95 ST KENOSHA, WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3-4-11
5. [illegible]	5314-82ND ST Kenosha, WI 53142	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3-4-11
6. [illegible]	34324-96TH ST TWIN LAKES WI 53181	☒ Town ☐ Village ☐ City RANDALL TOWNSHIP	3/7/11
7. [illegible]	5511-41 AVE KENOSHA WI.	☐ Town ☐ Village ☒ City KENOSHA	3/7/11
8. [illegible]	1730-22 AVE Kenosha 53140	☐ Town ☐ Village ☒ City Kenosha	3/10/11
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 4211 18th Street 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.

3/10/2011
(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@gab.wi.gov

Page No. 781

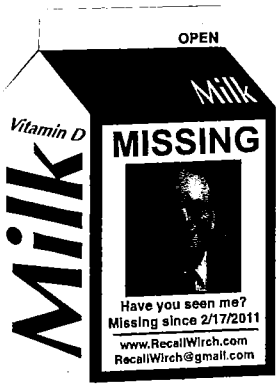
RECALL PETITION

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]	10826 267th AVE TREVOR, WI	☒ Town ☐ Village ☐ City SALEM	3-4-11
2. Frank [illegible]	20720 - 75ST BRISTOL WI	☒ Town ☐ Village ☐ City BRISTOL	3-4-11
3. GERALD DAYBOLL	34800 GENEVA Rd. NEW MUNSTER	☒ Town ☐ Village ☐ City WHEATLAND	3-4-11
4. Myron Hayes	10506 80 ST Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3-4-11
5. [illegible]	9910 269th court Trevor WI 53179	☒ Town ☐ Village ☐ City Salem ~~Trevor~~	3-4-11
6. [illegible]	Kenosha WI 53142 7803 32nd AVE	☐ Town ☐ Village ☒ City Kenosha	3-4-11
7. [illegible]	24128 78th ST Salem WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	3-4-11
8. [illegible]	1515 47th Ave Kenosha, WI 53144	☒ Town ☐ Village ☐ City Somers	3/4/11
9. [illegible]	1908-21st Ave Kenosha, WI 53140	☐ Town ☐ Village ☒ City Kenosha	3/4/11
10. Cadie Lourigan	1087-180th Ave Union Grove, WI 53182	☒ Town ☐ Village ☐ City Paris	3/4/11

Certification of Circulator

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

I reside at 1087 180th Ave Paris Township.
(circulator's residence - include number, street, and municipality)

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

03/08/11
(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. 782

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

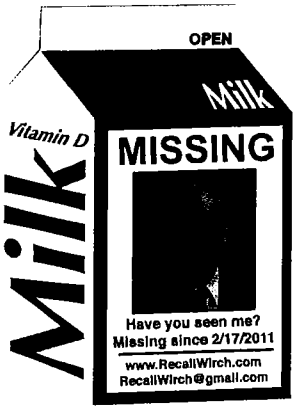
RECALL PETITION

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. John Howard Jaskulski	4742 - 42 Ave Kenosha WI 53144	☒ Town ☐ Village ☐ City Kenosha	3-11-11
2. Larry L Harris	9930 - 74th Court C Kenosha, WIS 53142	☐ Town ☐ Village ☒ City Kenosha	3-11-11
3. Richard J. Olson	8735 Old Green Bay Pleasant Prairie, WIS	☐ Town ☒ Village ☐ City Pleasant Prairie	3-11-11
4. Jerry Hurd	13911 60th St Bristol WI	☒ Town ☐ Village ☐ City Bristol	3.11.11
5. Kristy Beine	5214 31st Street Kenosha, WI	☐ Town ☐ Village ☒ City Kenosha	3-11-11
6. Reed Pyfer	10120 69th Street Kenosha	☐ Town ☐ Village ☒ City Kenosha	3-11-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Caroline A. Katzer, certify:
(name of circulator)

I reside at 12716 257th Ave., Trevor, WI 53179, 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.

3-11-11
(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. 783

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

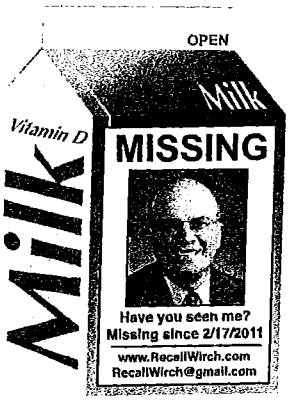
RECALL PETITION

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. Rita M. Mantooth	1609 · 22nd St. KENOSHA WI 53140-1830	☐ Town ☐ Village ☒ City Kenosha	03/04/11
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, Rita M. Mantooth, certify:
(name of circulator)

I reside at 1609 · 22nd St. 22nd DISTRICT 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.

March 4, 2011 (date)

Rita M. Mantooth (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
Michael G. Wende	7114 96th AVE KENOSHA, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3MAR11
2. Esther L Wende	7114 96th Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3MAR11
3. Richard W. Zeller	7210, 96th Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	7MAR11
4. Kimberly A. Zeller	7210 96th Ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	7MAR11
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 G. WENDE, certify:
(name of circulator)

I reside at 7114 96th 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.

7 MARCH 2011 (date)

Michael G. Wende (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

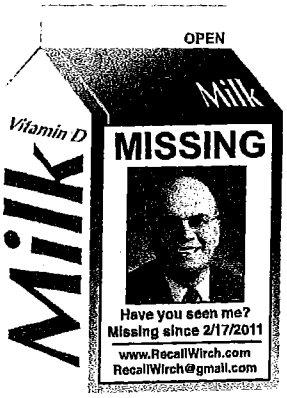
RECALL PETITION

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. Linda Meyer	27051-101st St Trevor Wis 53179	☒ Town ☐ Village ☐ City Salem	3/8/11
2. [illegible]	27051-101st St Trevor Wis 53179	☒ Town ☐ Village ☐ City Salem	3/8/11
3. Todd Meyer	27051-101st St Trevor Wis 53179	☒ Town ☐ Village ☐ City Salem	3/8/11
4.	27069-101st St Trevor Wis 53179	☒ Town ☐ Village ☐ City Salem	3/8/11
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Linda J Meyer (name of circulator), certify:

I reside at 27051-101st St Trevor Wis 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.

3/8/11 (date)

Linda J. Meyer (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

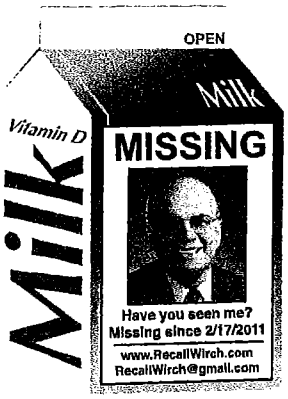
RECALL PETITION

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. Keaton Crowe Keaton Crowe	24402 118th Street Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	3/7/2011
2. Kim Crowe Kimberly S. Crowe	24402 118th Street Trevor, WI 53179	☒ Town ☐ Village ☐ City Salem	3/7/11
3. Darrell Crowe Darrell Crowe	24402 118th Street Trevor WI 53179	☒ Town ☐ Village ☐ City Salem	3/8/11
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, Keaton Crowe, certify:
(name of circulator)

I reside at 24402 118th 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.

3/8/11
(date)

Keaton Crowe
(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

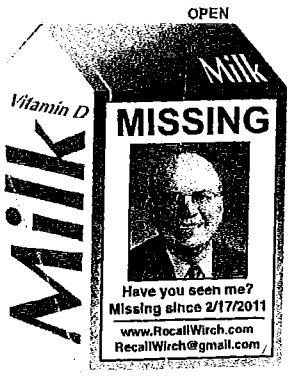
RECALL PETITION

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. Renee J McNally	11444 11th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	3/8/2011
2. Michael McNally	11444 11th Ave	☐ Town ☒ Village ☐ City Pleasant Prairie	3/8/2011
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, Renee S. McNally, certify:
(name of circulator)

I reside at 11444 11th Ave 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.

3-8-2011 (date) — Renee J McNally (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. 788

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

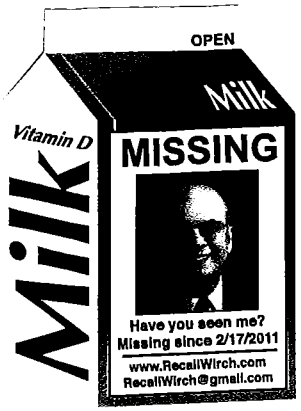
RECALL PETITION

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. Ellen Giles	4714 Pershing Blvd Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	2-27-11
2. [illegible]	4714 - Pershing Blvd Kenosha, WI 53144	☐ Town ☐ Village ☒ City Kenosha	02-27-11
3. [illegible]	4714 Pershing Blvd Kenosha WI 53144	☐ Town ☐ Village ☒ City Kenosha	2-27-11
4. James L. [illegible] Jr	5407 36th Ave Kenosha Wi. 53144	☐ Town ☐ Village ☒ City Kenosha	3-4-11
5. John Sedey	11616 136th Ave Kenosha WI 53142	☒ Town ☐ Village ☐ City Kenosha	3-6-11
6. Michele Sedey	11616 136th Ave Kenosha, WI	☐ Town ☐ Village ☐ City Kenosha	3-6-11
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Darlene M Giles, certify:
(name of circulator)

I reside at 8638 - 14th 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.

March 8, 2011 (date) Darlene M Giles (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. 789

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

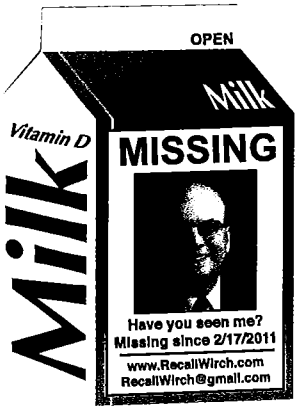
RECALL PETITION

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. Patricia A. Formella Pat Formella	5304-87 Place Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	3-7-11
2. Patricia A. Formella Ronald J. Formella	5304 87th Pl. Pleasant Prairie	☐ Town ☒ Village ☐ City Pleasant Prairie	3-7-11
3. Ronald J. Formella Melissa Dickman Melissa Dickman	8019 50th ave Kenosha, WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-8-11
4. Colleen Deininger Colleen Deininger	4905-85th Pl Kenosha WI 53142	~~☒ Town~~ ☐ Village ☒ City Kenosha	3-8-11
5. Pat Tinker Pat Tinker	6746 12 Ave Kenosha, WI 53143	☐ Town ☐ Village ☒ City Kenosha	3-8-11
6. Felicia Weill FWeill	8858 100th Pl. Ft Pleasant Prairie 53158	☐ Town ☒ Village ☐ City Pl. Prairie	3.8.11
7. Cara Sery Cara Sery	23803 70th St Salem, WI 53168	☐ Town ☒ Village ☐ City Paddock Lake	3-8-11
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Pat Formella, certify:
(name of circulator)

I reside at 5304-87 Place, 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.

3-9-11
(date)

Patricia A. Formella
(signature of circulator) Patricia A. Formella

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

Page No. 790

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

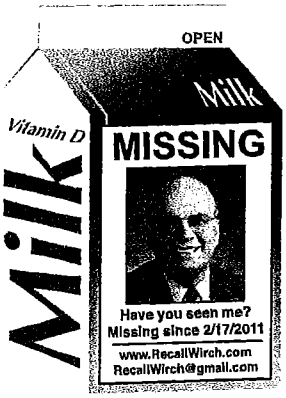
RECALL PETITION

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. John P Henry	24935 125Th St. Trevor, WI 53179	☒ Town ~~Trevor~~ Salem ☐ Village ☐ City	3/7/11
2. Loretta Frystak	24935 125TH St. TREVOR, WI 53179	☒ Town ~~Trevor~~ Salem ☐ Village ☐ City	3/7/11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, John P Henry, certify:
(name of circulator)

I reside at 24935 125TH 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.

3/7/11
(date)

John P Henry
(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

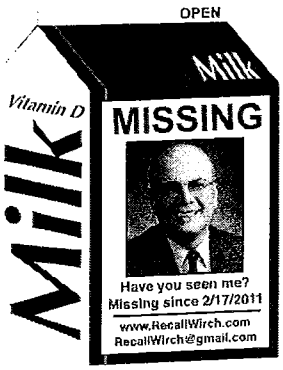
RECALL PETITION

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. Kathleen Cooper	1110 Berwick Ave.	☐ Town ☑ Village ☐ City Silver Lake	3/11/11
2. [illegible]	1110 Berwick AVE	☐ Town ☑ Village ☐ City Silver Lake	3-11-11
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, Kathleen Cooper, certify:
(name of circulator)

I reside at 1110 Berwick Ave Silver Lake 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.

3/11/11 (date) Kathleen Cooper (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. 792

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. Chris McCarty	11129 270th AVE	☒ Town ☐ Village ☐ City Salem ~~Trevor~~	3/10/11
2. Krista McCarty	11129 270th Ave	☒ Town ☐ Village ☐ City Salem ~~Trevor~~	3/10/11
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, Christopher J. McCarty (name of circulator), certify:

I reside at 11129 270th AVE Trevor WI 53179 (circulator's residence - include number, street, and municipality).

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

3-10-11 (date) Chris McCarty (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. 793

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, fax: 608/267-0500 email: gab@wi.gov

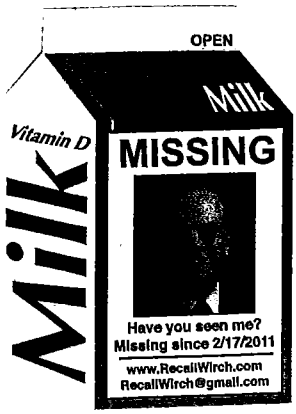
RECALL PETITION

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. David Spittlemeister	8221-108th Ave Pleasant Prairie WI 53158	☐ Town ☒ Village ☐ City Pleasant Prairie	3-1-11
2. [illegible]	4318 73RD ST KENOSHA WI 53142	☐ Town ☐ Village ☒ City Kenosha	3-1-11
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, Lucas Wirtz Lucas Wirtz, certify:
(name of circulator)

I reside at 6703 38th Ave 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.

3-11-11
(date)

Lucas Wirtz
(signature of circulator)

794

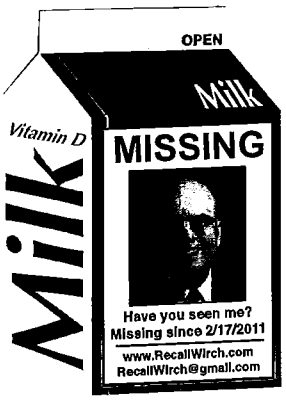
RECALL PETITION

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. Nancy Tenwinkel	29222 Durand Ave Burlington WI	☒ Town ☐ Village ☐ City Burlington	3/5/11
2. Roy Kern	7737 [illegible] Burlington WI	☒ Town ☐ Village ☐ City Burlington	3-5-11
3. Brian Fiatt	347 Meadowlark Dr Apt 12 Burlington, WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
4. Taylor Olson	464 Dardis Drive Burlington WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
5. [illegible]	4164 Dardis Dr Burlington WI	☐ Town ☐ Village ☒ City Burlington	3/5/11
6. Shannon Olson	464 DARDIS DRIVE BURLINGTON, WI 53105	☐ Town ☐ Village ☒ City BURLINGTON	3/5/11
7. Burleigh Olson	464 DARDIS DR. BURLINGTON WI 53105	☐ Town ☐ Village ☒ City BURLINGTON	3/6/11
8. Stacey Martin	29306 Durand Ave Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3/6/11
9. [illegible]	29306 Durand Ave Burlington WI 53105	☒ Town ☐ Village ☐ City Burlington	3/6/11
10. Susan D. Bailey	28901 Durand Ave Burlington, WI 53105	☒ Town ☐ Village ☐ City Burlington	3/8/11

Certification of Circulator

I, Virginia Mueller, certify:
(name of circulator)

I reside at 29308 Durand Ave., 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.

March 10, 2011 (date) — Virginia L. Mueller (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. 795

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. Betty D. Bailey	28901 Durand Ave Burlington, WI 53105	☒ Town ☐ Village ☐ City Burlington, WI	3/08/2011
2. [illegible]	2921 [illegible] St Burlington WI	☒ Town ☐ Village ☐ City Burlington, WI	3/08/11
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, Virginia Mueller, certify:
(name of circulator)

I reside at 29308 Durand Ave., Burlington, Wis 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.

March 10, 2011 — (date)

Virginia L. Mueller — (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. 796

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

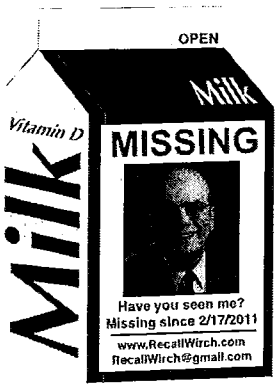
RECALL PETITION

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. Nick Earnest	8510 - 82nd ST #107 PLEASANT PRAIRIE, WI	☐ Town ☒ Village ☐ City PLEASANT PRAIRIE	3/4/11
2. John E Dall	11004-79th ST Pleasant Prairie, WI	☐ Town ☒ Village ☐ City Pleasant Prairie	3/4/11
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, NICHOLAS EARNEST, certify:
(name of circulator)

I reside at 8510 - 82nd ST #107, PLEASANT PRAIRIE, 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.

3/4/11
(date)

Nick Earnest
(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. 797

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. Rachel Fox	157 Bay Ridge Ln Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/5/2011
2. Scott M Fox	157 Bay Ridge Ln Burlington, WI 53105	☐ Town ☐ Village ☒ City Burlington	3/5/2011
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, Scott Fox, certify:
(name of circulator)

I reside at 157 Bay Ridge Ln. 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.

3-5-2011 (date) Scott M Fox (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

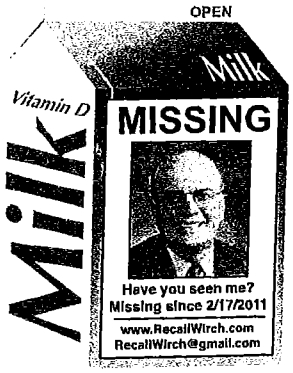
RECALL PETITION

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. John Bartoli	2305 - 28 Ave Kenosha	☐ Town ☐ Village ☒ City Kenosha	3/4/11
2. [illegible]	3706 75th St. KENOSHA, WI. 53142	☐ Town ☐ Village ☒ City KENOSHA	3/7/11
3.		☐ Town ☐ Village ☐ City	
4.		☐ Town ☐ Village ☐ City	
5.		☐ Town ☐ Village ☐ City	
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

I, Marge Rohs, certify:
(name of circulator)

I reside at 5402 - 54th Street, Kenosha WI 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.

3-9-2011
(date)

Marge Rohs
(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

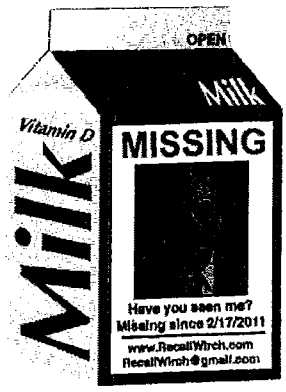
RECALL PETITION

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. Kathy Janas Ellertson	4843 Springbrook Rd	☐ Town ☒ Village ☐ City Pleasant Prairie	2/25/11
2. [illegible]	4843 Springbrook Rd	☐ Town ☒ Village ☐ City Pleasant Prairie	2/25/11
3. Alex Flores	4871 Spring brook Rd.	☐ Town ☒ Village ☐ City Pleasant Prairie	3-10-11
4. [illegible]	4871 Springbrooke Rd.	☐ Town ☒ Village ☐ City Pleasant Prairie	3-10-11
5. Dorothy Ann Hofman	4871 Springbrook Rd	☐ Town ☒ Village ☐ City Pleasant Prairie	3-10-11
6.		☐ Town ☐ Village ☐ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	

Certification of Circulator

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

I reside at 4843 Springbrook Rd 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.

3/10/11 (date) Kathy Janas Ellertson (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. 800

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