Official Primary Ballot Nonpartisan Office and Referendum February 20, 2024

February 20, 2024 Notice to voters: if you are voting on Election Day, your ballot must be initialed by two (2) election inspectors. If you are voting absentee, your ballot must be initialed by the municipal clerk or deputy clerk. Your ballot may not be counted without initials (see end of ballot for initials).

General Instructions	County	Municipal (cont.)
If you make a mistake on your ballot or have a question, ask an election inspector for help (absentee voters: contact your municipal clerk).	County Executive Vote for 1	Town Board Supervisor Vote for not more than
To vote for a name on the ballot, fill in the oval next to the name like this:	Candidate	Candidate
To vote for a name that is not on the ballot, write the name on the line marked	Candidate	Candidate
"write-in" and fill in the oval next to the name like this:	Candidate	Candidate
Judicial	── write-in:	Candidate
Court of Appeals Judge District Vote for 1	County Supervisor District Vote for 1	Candidate
Candidate	Candidate	O write-in:
Candidate	Candidate	◯ write-in:
Candidate	── write-in:	Town Clerk Vote for 1
── write-in:	Multi-Jurisdictional Judge	Candidate
Circuit Court Judge Branch Vote for 1	Municipal Judge for the Town of and Village of Vote for 1	Candidate
Candidate	Candidate	Candidate
Candidate	Candidate	O write-in:
Candidate	write-in:	Town Treasurer Vote for 1
── write-in:	Municipal	Candidate
	Village President Vote for 1	Candidate
	Candidate	Candidate
	Candidate	◯ write-in:
	write-in:	
Continue voting at top of next column.	Continue voting at top of next column.	Continue voting on back of ballot.

Sanitary District	Referendum	Official Primary Ballot
Sanitary District Commissioner Vote for 1	To vote in favor of a question, fill in the oval next to "Yes," like this:	Nonpartisan Office and Referendum February 20, 2024
Candidate	To vote against a question, fill in the oval next to "No," like this:	for
Candidate	Level of government conducting	
Candidate	referendum (State, tech college, county, municipal, school district)	Municipality and ward number(s)
write-in:	Question (number if necessary) Shall the?	Ballot issued by
School District	Yes	
Name of School District (optional) School Board Member	◯ No	Initials of election inspectors
Vote for not more than Candidate		Absentee ballot issued by
Candidate		Initials of Municipal Clerk or Deputy Clerk
Candidate		
Candidate		If issued by SVDs, both must initial Certification of Voter Assistance
Candidate		I certify that I marked or read aloud this ballot at the request and direction of a voter who is authorized under Wis. Stat. §6.82 to receive assistance.
write-in:		
		Signature of assistor
		For Official Use Only
		Inspectors: Identify ballots required to be remade:
		Overvoted
		Damaged
		Other
		If this is the Original Ballot, write the serial number here:
Continue voting at top of next column.		Initials of inspectors who remade ballot
	ided ballot. Ballot begins o	