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GOVERNMENT
ACCOUNTABILITY BOARD

**State of Wisconsin
Before the Government Accountability Board**

The Complaint of
REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE
Jennifer Toftness,
Complainant

against

VERIFIED COMPLAINT

COMMITTEE TO ELECT CINDY MOORE
Cindy Moore,
Respondent

This complaint is under Chapter 8 of the Wisconsin Statutes and GAB 2 of the State of Wisconsin Administrative Code. I, Jennifer Toftness allege that:

1. I am a resident of the State of Wisconsin, a qualified elector, and the Executive Director of the Republican Assembly Campaign Committee with a mailing address of 148 East Johnson Street, Madison, Wisconsin 53703.
2. The Committee to Elect Cindy Moore is the personal campaign committee for Cindy Moore ("Moore"), who listed her address, as filed with the Government Accountability Board, as 14735 W. Fleetwood Lane New Berlin WI 53131, has filed nomination papers with the Government Accountability Board for certification as a Democratic candidate for State Assembly for Wisconsin's 15th District (the "District") on the November 6, 2012 ballot.

CHALLENGES TO PAPERS IN THEIR ENTIRETY

Pursuant to GAB 2.05, "[e]ach candidate for public office has the responsibility to assure that his or her nomination papers are prepared, circulated, signed and filed in compliance with statutory and other legal requirements."

1. The title of office is incorrect on papers 1-33 and therefore in violation of GAB 2.05. *See* Exhs. A-X. Therefore all signatures on pages 1-33 of Respondent's nomination papers are invalid, and should not be accepted.
2. The certification statement which reads, in part, "so that voters will have the opportunity to vote for () him or () her for the office listed above[]" has not been designated on pages 1-16, 18-20, 25-33 and therefore is in violation of GAB 2.05. *See* Exhs. A-X. Therefore, all signatures on pages 1-16, 18-20 and 25-33 of Respondent's nomination papers are invalid, and should not be accepted.

3. The name of the municipality is not specified on pages 20 or 24-33 and therefore is in violation of GAB 2.05. *See* Exhs. A-X. Therefore, all signatures on pages 20 and 24-33 are invalid, and should not be accepted.
4. The District number is illegible under the “District or Jurisdiction” number heading on pages 7, 9-21 and 26-33 and therefore is in violation of GAB 2.05. *See* Exhs. A-X. Therefore, all signatures on pages 7, 9-21 and 26-33 are invalid, and should not be accepted.

CHALLENGES TO INDIVIDUAL SIGNATURES

5. To be valid, the petitions must contain “a complete address, including municipality of residence for voting purposes, and the street and number, if any, of the residence...shall be listed for each signature on a nomination paper.” GAB 2.05(12).
6. Signatures may not be counted where the “address of the signer is missing or incomplete, unless the residency can be determined by the information provided on the nomination paper.” GAB 2.07(16)(c).
7. If it is established that “the address of the signer, is not valid, the signature may not be counted.” GAB 2.07(3)(c).
8. In addition, Wisconsin law requires that “each signer of a nomination paper shall list his or her municipality of residence for voting purposes, the street and number, if any, on which the signer resides.” Wis. Stat. § 8.15(2).
9. Page 17, line 4 of Respondent’s nomination papers is missing the required street address information, in violation of Wis. Stat. § 8.15(2) and GAB 2.05(12). A copy of page 17 is attached as Exhibit A.
10. Page 23, lines 1-7 of Respondent’s nomination papers list a single identical commercial address, in violation of Wis. Stat. § 8.15(2) and GAB 2.05(12). A copy of page 23 is attached as Exhibit B. A web page for the commercial address has been provided as Exhibit C.

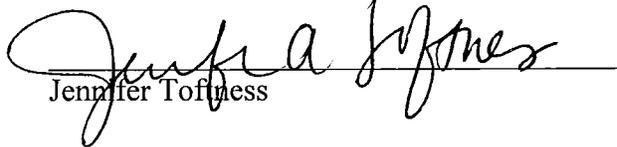
WHEREFORE, Complainant prays that the Government Accountability Board review the sufficiency of Respondent’s nomination papers and declare them to be invalid in whole or in part; and render such other relief that the Government Accountability Board may deem just and equitable.

Date: June 4, 2012.



Jennifer Toftness
Republican Assembly Campaign Committee

I, Jennifer Toftness, being first duly sworn on oath state that I personally read the above complaint, and that the above allegations are true based on my personal knowledge and, as to those stated on information and believe, I believe them to be true.


Jennifer Toftness

STATE OF WISCONSIN)
) ss.
County of Dane)

Sworn to before me this 4 day of June, 2012.

Elise Dietsch

My commission expires 7/24/15, or is permanent



NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1.	3135 S. Manor Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/12/12
2.	3135 S. Manor Ct LA	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/12/12
3.	12212 W. Rainbow Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-21-12
4.	82010 W. McMyron St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/21/12
5.	0354 W. 102nd Street	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/21/12
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, Caitlin Moore **CERTIFICATION OF CIRCULATOR**, certify:
(Name of circulator)
 I reside at 14735 W Fleetwood Ln New Berlin, WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-12-12 / 5-21-12 Caitlin Moore
(Date) (Signature of circulator)

EXA

NOMINATION PAPER FOR PARTISAN OFFICE

9

Candidate's name; no titles may be used. Cindy Moove		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W. Fleetwood Ln.		Name of municipality for voting purposes <input checked="" type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City New Berlin	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53146	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/12	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Representative to Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 2	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Nicole Fischer</i>	21955 W. Broodale Dr. New Berlin, WI 53146	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
2. <i>W. D. Fischer</i>	21955 W. Broodale Dr. New Berlin, WI 53146	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
3. <i>Kelly Richards</i>	21955 W. Broodale Dr. New Berlin, WI 53146	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
4. <i>Patti Fischer</i>	21955 W. Broodale Dr. New Berlin, WI 53146	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
5. <i>Steve Fischer</i>	21955 W. Broodale Dr. New Berlin, WI 53146	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
6. <i>Jim Richards</i>	21955 W. Broodale Dr. New Berlin, WI 53146	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
8. <i>Colleen Sawyer</i>	14905 W. Woodview Ct New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
9. <i>Thomas Szymanski</i>	14905 W. Woodview Ct New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5-28-12
10.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	

CERTIFICATION OF CIRCULATOR

I, Nicole Marie Fischer, certify:

(Name of circulator)

I reside at 21955 W. Broodale Drive, New Berlin, WI 53146

(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

05/28/12

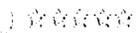
(Date)

Nicole Fischer

(Signature of circulator)

Ex B

Machine Improvements INC

[Write a Review](#)  Not Rated

21955 W Broadale Dr, New Berlin, WI 53146
<http://www.machineimprovements.com/>
(262) 970-8944

[Like](#) [Send](#) [Sign Up to see what your friends like.](#)

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Business Details

Category (Edit)
Machine Tools Rebuilding & Repair

Additional Information
Design Fixtures

- Products & Services (Edit)**
- Rebuilding
 - Repair Services
 - Systems Design
 - Tools



[View Website](#)



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- Create coupons
- Connect with customers

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NOMINATION PAPER FOR PARTISAN OFFICE

8

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Mary J. Monak</i>	2330 S. Johnson Rd New Berlin, WI 53146	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12
2. <i>Samuel Agha</i>	19331 W SOUTHMEADOW NEW BERLIN WI 53146	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12
3. <i>Mary D. D...</i>	15155 W. Woodland Dr New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12
4. <i>Kevin M. Reg</i>	3000 S. Hanke Dr New Berlin, WI 53146	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/15/12
5. <i>Sam D. Guymer</i>	17480 W. CLEVELAND NEW BERLIN	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12
6. <i>Ann & David</i>	17480 W CLEVELAND NEW BERLIN	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12
7. <i>David J. Greenwald</i>	21115 W. Lincoln Ave New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/18/12
8. <i>Maria DeTella</i>	17315 W Todd Ct New Berlin	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	5/8/12
9. <i>William J. Craig</i>	3380 S. El SIRRACO New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12
10. <i>Wallace Reuter</i>	33475. magdalena New Berlin, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12

CERTIFICATION OF CIRCULATOR

I, CINDY MOORE, certify:
(Name of circulator)
 I reside at 14735 W Fleetwood LN NEW BERLIN WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-8-12

(Date)

Cindy Moore

(Signature of circulator)

10

NOMINATION PAPER FOR PARTISAN OFFICE

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Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>George Bunday</i>	2335 S. Graylog Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/2012
2. <i>Ruth Bunday</i>	2335 S. Graylog Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/12
3. <i>Paul Borkhout</i>	2227 S 79th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5-8-12
4. <i>Sandy Molick</i>	15659 W Ridge	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-8-12
5. <i>Ray Wagon</i>	13215 WOLFORD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/12
6. <i>Kathy Moberly</i>	14725 W Fleetwood Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/12
7. <i>Tom Dunge</i>	3010 S. 145th ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/12
8. <i>Sandra Habersommer</i>	3580 S. 147th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/12
9. <i>Garb Verbos</i>	14273 Waters Way	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/12
10. <i>James Lamm</i>	3130 S PINEWOOD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/8/12

CERTIFICATION OF CIRCULATOR

I, CINDY MOORE, certify:

I reside at 14735 W. Fleetwood LN NEW BERLIN WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.8.12

(Date)

Cindy Moore

(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

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Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Gregory D. Schwartz</i>	15220 W. Park Terrace	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-8-12
2. <i>Dolores Hansen</i>	14280 Lenox Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-8-12
3. <i>Arlynn A. Poy</i>	14700 W Fleetwood	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/8/2012
4. <i>Jeff Kewen</i>	2125 S. 106 St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5/8/2012
5. <i>Cheri Minor</i>	10315 W. Thornfield West Allis WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5/8/2012
6. <i>Robert Redmond</i>	10401 W. Greenfield West Allis WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5-8-12
7. <i>James Caldwell</i>	2154 S. 107 St West Allis, 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-8-12
8. <i>Eric [Signature]</i>	2092 3102 St #112 West Allis 53207	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-8-12
9. <i>Michael [Signature]</i>	10540 W. Manor Park Dr West Allis, WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/8/12
10. <i>Butt C. [Signature]</i>	1621 S Triange N13 53151 Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City NEW BERLIN	5/11/12

I, CINDY MOORE (Name of circulator), certify:
I reside at 14735 W. Fleetwood LN NEW BERLIN WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).
5/11/12 (Date) Cindy Moore (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number, box number (if rural route), and name of street or road 14735 W. Fleetwood Ln		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes NEW BERLIN	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) DEMOCRATIC
Title of office Assembly District 15		District or Jurisdiction <input type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office DISTRICT 15	

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Byron Devine</i>	14315 W. Park Ct New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/5/12
2. <i>Carol Kostick</i>	3135 S Manor Ct New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/6/12
3. <i>Bridget Kehring</i>	3135 S. Manor Ct New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/5/12
4. <i>Christina Mohr</i>	3040 S. Rolling Dr. New Berlin WI 53146	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5.5.12
5. <i>Michelle</i>	15718 W. Ridge Rd New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-5-12
6. <i>Michelle</i>	1425 S. West Ln New Berlin, WI 53141	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/5/12
7. <i>Cathy Moore</i>	14735 W FLEETWOOD LN NEW BERLIN, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/11/12
8. <i>Patti</i>	19450 W Cleveland Ave New Berlin WI 53146	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
9. <i>Dave Nelson</i>	3040 S. Rolling Dr. New Berlin WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
10. <i>Laurenne J. Nelson</i>	3040 S. Rolling Dr New Berlin, WI 53146	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12

I, **Caitlin Moore** CERTIFICATION OF CIRCULATOR, certify:
(Name of circulator)
 I reside at **14735 W Fleetwood Ln New Berlin, WI 53151**
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-12-12 **Caitlin Moore**
(Date) (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W Fleetwood Ln		Name of municipality for voting purposes <input checked="" type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/06/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Representative to Assembly 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office Assembly District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	16000 Monterey Dr.	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/8/12
2. <i>Carolyn Radtke</i>	16000 W Monterey Dr	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/10/12
3. <i>Elizabeth Radtke</i>	16000 W Monterey Drive	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/11/12
4. <i>[Signature]</i>	2370 South Gray Jay Lane	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/11/12
5. <i>[Signature]</i>	2134 S Sunnyslope Rd	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/11/12
6. <i>Kelly Bergall</i>	17835 W. Rogers Dr.	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/11/12
7. <i>[Signature]</i>	13809 W Greenfield Ave.	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/11/12
8. <i>[Signature]</i>	3601 S Moorland Rd	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5-11-12
9. <i>Martha Radtke</i>	16000 W. Monterey Dr	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/12/12
10. <i>[Signature]</i>	14735 W. Fleetwood New Berlin	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/12/12

CERTIFICATION OF CIRCULATOR

I, Carolyn Radtke (Name of circulator), certify:
I reside at 16000 W Monterey Drive, New Berlin
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-12-12

(Date)

Carolyn Radtke

(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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, Village, or City	DATE OF SIGNING
1. <i>J.R. Schaefer</i>	14705 W. Fleetwood Lane New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
2. <i>John J. ...</i>	14730 W. Fleetwood New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
3. <i>David Tambornino</i>	14800 W. Fleetwood	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/13/12
4. <i>Ronald J. Verhaalen</i>	3015 S. 149th St. NEW BERLIN, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
5. <i>Margaret Verhaalen</i>	3015 S. 149th St. New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
6. <i>Paul Kostyura</i>	2970 S. 149th St. New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
7. <i>Thomas ...</i>	14930 W. Olivia Ln New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12
8. <i>Mary Skypa</i>	14945 W. Olivia Ln. New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-12-12
9. <i>T.G. Hoepf</i>	3020 S. 149 New Berlin 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-12-12
10. <i>Gayne Hoepf</i>	3020 S. 149 St New Berlin 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/12/12

I, CINDY MOORE, certify:
(Name of circulator)
I reside at 14735 W. Fleetwood LN NEW BERLIN WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/12/2012 (Date) Cindy Moore (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City NEW Berlin	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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, Village, or City	DATE OF SIGNING
1. <i>Stacy Bysse</i>	3045 S. 149th St New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/12/12
2. <i>Dana Van Voorhis</i>	14830 W. Fleetwood Lane	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/12/12
3. <i>Stephen Van Voorhis</i>	14830 W. FLEETWOOD LN	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/12/12
4. <i>Sharon Arndt</i>	14685 W. MEADOWSHIRE DR. NEW BERLIN, WI, 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City NEW BERLIN	5/14/12
5. <i>H. Chal</i>	14675 W. Meadowshire Dr New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/14/12
6. <i>Jim Blinda</i>	14620 W. Meadowshire Dr New Berlin WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City new Berlin	5/14/12
7. <i>Laurel Blinda</i>	14620 W Meadowshire New Berlin, WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/14/12
8. <i>Susan Wisniewski</i>	2269 Woodshire Ct. New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/14/12
9. <i>Karl Wisniewski</i>	2269 S. Woodshire Ct New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin WI	5/14/12
10. <i>Dany Stigler</i>	14685 W. Park Av New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/14/12

I, CINDY MOORE (Name of circulator), certify:
I reside at 14735 W. Fleetwood LN NEWBERLIN WI 53151 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/14/2012 (Date) Cindy Moore (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

9

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Cynthia Kumbach</i>	15612 Wilbur Rd ND	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/8/12
2. <i>Steve Fitzgerald</i>	1237 S. 122ND	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City WEST ALLIS	5/21/12
3. <i>Mary Thomas</i>	1214 S. 123rd St. <i>mary.irish@yahoo.com</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/21/12
4. <i>Kate Kalynski</i>	1943 S. 95th WEST ALLIS WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/21/12
5. <i>Micho Gruchich</i>	11833 W. Lakeside Dr. West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/21/12
6. <i>Steve Kopet</i>	222 S. 107th St. West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5/21/12
7. <i>Ben L. W. M.</i>	8517 W. Maple West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5/21/12
8. <i>Chris D.</i>	2230 S 65th St West Allis WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5/21/12
9. <i>W. L. M.</i>	5844 W. Scott St West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5/21/12
10. <i>Joan Pray</i>	1450 S 86th St West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	5/21/12

I, Joan Pray, certify:
(Name of circulator)
 I reside at 16205 W. Allison Ln New Berlin 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

May 28 2012 (Date) Joan C. Pray (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

7

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	8754 W. Lapham St West Allis, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/21/12
2. <i>[Signature]</i>	6121 W Lapham St W Allis, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/21/12
3. <i>[Signature]</i>	1130 S. 96th West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/21/12
4. <i>[Signature]</i>	1129 S. 74 STREET WEST ALLIS 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WESTALLIS	5/21/12
5. <i>[Signature]</i>	6233 W. Cleveland Ave Milwaukee, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	5-21-12
6. <i>[Signature]</i>	2140 S. 98th West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-21-12
7. <i>[Signature]</i>	1472 S. 90th St West Allis 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WESTALLIS	5-21-12
8. <i>[Signature]</i>	1472 So. 90 St WEST ALLIS WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5-21-12
9. <i>[Signature]</i>	2650 South 62nd Street	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	5-21-12
10. <i>[Signature]</i>	2447 So. 84th St West Allis, WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City west Allis	5-21-12

CERTIFICATION OF CIRCULATOR

I, CINDY MOORE, certify:
(Name of circulator)
 I reside at 14735 W. Fleetwood LN NEW BERLIN WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-21-12 (Date) Cindy Moore (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>John M Leonardelli</i>	14331 W BRIAN ROAD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-17-2012
2. <i>[Signature]</i>	3580 S. Willow Glen New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/17/12
3. <i>[Signature]</i>	3580 S. Willow Glen New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/17/12
4. <i>Renee Burward</i>	3315 S. Regal Dr New Berlin 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	5/17/12
5. <i>Janine B. Helin</i>	13708 W. PROSPECT DR. New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/17/12
6. <i>Levin Nagy</i>	13111 W. PROSPECT DRIVE NEW BERLIN, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/17/12
7. <i>[Signature]</i>	13510 Terrywood Ct New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/18/12
8. <i>[Signature]</i>	13510 TERRYWOOD CT NEW BERLIN, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/18/12
9. <i>Jayne Guman</i>	14365 Justice Ln New Berlin, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-18-12
10. <i>Mary B. Schlegel</i>	13510 Terrywood Ct New Berlin, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/18/12

CERTIFICATION OF CIRCULATOR

I, CINDY MOORE, certify:
(Name of circulator)
 I reside at 14735 W. Fleetwood Ln New Berlin WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-18-12

(Date)

Cindy Moore

(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1.	14565 FAIRFIELD DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12
2.	3230 S. 149th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
3.	3225 S. 149th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
4.	14801 Fleetwood	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
5.	14801 W Fleetwood Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
6.	3565 S. McIntosh Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
7.	3565 S. McIntosh Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
8.	3535 S. McIntosh Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
9.	3555 S McIntosh Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151
10.	3560 S McIntosh Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-24-12 53151

CERTIFICATION OF CIRCULATOR

I, CINDY MOORE, certify:
(Name of circulator)
 I reside at 14735 W. Fleetwood LN NEW BERLIN, WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.25.2012
(Date) (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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, Village, or City	DATE OF SIGNING
1. <i>Chuck Bedwell</i>	13690 W. Forest Kn.	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
2. <i>Terry Bedwell</i>	13690 W Forest Kn New Berlin WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
3. <i>Erin Wilkerson</i>	3024 S. 149th ST New Berlin	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
4. <i>Paul M Zandt</i>	3170 S. 149th St New Berlin	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
5. <i>Jan Thompson</i>	3220 S. 149th St. New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
6. <i>[Signature]</i>	3070 S. 149th St. New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City	5/25/12
7. <i>Nichole Ford</i>	14905 W. Juncos Pl. New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
8. <i>KACtel</i>	3295 149th St WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
9. <i>Sara Tuttle</i>	3275 149th St. WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
10. <i>[Signature]</i>	3230 S. 149th New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12

CERTIFICATION OF CIRCULATOR

I, CINDY MOORE, certify:
(Name of circulator)
 I reside at 14735 W. Fleetwood LN NEW BERLIN WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.25.2012 (Date) Cindy Moore (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Paul Klumb</i>	2019 S. 106 ST. WEST ALLIS, WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City WEST ALLIS	5-24-12
2. <i>Shirley Callantoni</i>	2086 S. 103 rd West Allis WI	<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City WEST ALLIS	5-24-12
3. <i>J. Miller</i>	2048 S. 105 ST WEST ALLIS WI	<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City WEST ALLIS	5-24-12
4. <i>Lisa Saager</i>	2125 S. 105 th ST. WEST ALLIS WI 53227	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City WEST ALLIS	5/24/12
5. <i>Betty Keffling</i>	2132 So. 105 ST West Allis WI 53227	<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City West Allis	5/24/12
6. <i>Maureen Hennel</i>	2131 So 105 West Allis 53227	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City West Allis	5/25/12
7. <i>Craig Cooper</i>	2131 So. 105 th West Allis 53227	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City West Allis	5/25/12
8. <i>Susan Baldwin</i>	2215 S. 105 St West Allis WI 53227	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City West Allis	5/24/12
9. <i>Jan R. Anderson</i>	14825 W. Fleetwood Ln. New Berlin	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
10. <i>Forrest L. Anderson</i>	14825 W. Fleetwood Ln New Berlin	<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City New Berlin	5/25/12

CERTIFICATION OF CIRCULATOR

I, Cindy Moore, certify:
(Name of circulator)

I reside at 14735 W. Fleetwood Ln New Berlin WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/25/2012 (Date) Cindy Moore (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Madeline Cruz</i>	1753 S. 70th West Allis WI 53224	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-18-12
2. <i>Jim Murray</i>	2875 S. 93rd St West Allis, WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-18-12
3. <i>Kathleen H. Carter</i>	2744 S. 98th St West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-18-12
4. <i>Tom Lewyng</i>	2666 S. Seymour Pl West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-18-12
5. <i>Valerie Rebeck</i>	2117 So 105 St West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-18-12
6. <i>Paula Lewin</i>	2125 S. 106 WEST ALLIS, 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5-23-12
7. <i>Gail Chavormont</i>	2020 S. 103rd Ct West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-23-12
8. <i>Kelly Stendler</i>	3620 S. Sandalwood Dr. New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-23-12
9. <i>Michael Kohl</i>	7766 W. Honey Creek Parkway	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-23-12
10. <i>Marian Salas</i>	1612 S. 76th #206	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-24-12

CERTIFICATION OF CIRCULATOR

I, Jackie Jacoby, (Name of circulator) certify:
 I reside at 5105 W 205th Valerie Dr, Moskego, WI 53150
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-25-12

(Date)

Jackie Jacoby
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Ann Costello</i>	11650 S. Carriagelane	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-8-12
2. <i>Robert Bellard</i>	723 S. 94 St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-9-12
3. <i>Deane Robinson</i>	2400 S. 100th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/9/12
4. <i>Katie Lund</i>	13835 W. Montana Ave. New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/10/12
5. <i>Kelce Krzycki</i>	2109 S. 79th West Allis, WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/15/12
6. <i>Chester Redmond</i>	2033 S. 104 St West Allis, WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/16/12
7. <i>John Rademacher</i>	2033 S 104 St WEST ALLIS WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5/17/12
8. <i>Victoria Jasin</i>	1037 S. 111th St. West Allis, WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/18/12
9. <i>Celeste Zaffrann</i>	2055 S. Elm Grove Rd. New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-18-12
10. <i>Marilyn Habigk</i>	2051 So. 106th St. W. Allis WI 53222	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-18-12

CERTIFICATION OF CIRCULATOR

I, Jackie Jacoby, certify:
(Name of circulator)
 I reside at 5105 Waosth Valerie Dr, Mukago, WI 53150
(Circulator's residence - include number, street and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.18.12

(Date)

Jackie Jacoby
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

9

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	2010 South 10th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/22/2012
2. <i>[Signature]</i>	7211 W. Lincoln Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/22/2012
3. <i>Stephanie Parker</i>	1023 S. 115th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/22/2012
4. <i>Alan M. Smith</i>	1605 S. 169TH ST.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/2012
5. <i>[Signature]</i>	2450 S. Graylog Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/2012
6. <i>Chloe Helmer</i>	11615 S. Arcadian	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/2012
7. <i>Joy Frontounis</i>	13780 W Park Ave.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/2012
8. <i>Chris Frontounis</i>	13780 W. Park Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/2012
9. <i>Marcia Dewey</i>	4525 W Quimby Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City N. Berlin	5/22/2012
10. <i>[Signature]</i>	13495 W. Wilbur Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/2012

I, CINDY MOORE, certify:
(Name of circulator)
 I reside at 14735 W. FLEETWOOD LN NEW BERLIN, WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.22.2012 Cindy Moore
(Date) (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moose		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W. Fleetwood Lane		Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date Nov 6, 2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Representative to Assembly Dist 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office Dist 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Thadd J. Laurado</i>	2120 Chancel Ct New Berlin WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 5 2012
2. <i>Kenneth J. Bergman</i>	2105 CHANCELL CT NEW BERLIN WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	MAY 6 2012
3. <i>Bob Kain</i>	21680 W. Falber Dr. New Berlin WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 11 2012
4. <i>Casey Bedwell</i>	13690 W. Forest Knoll Dr. New Berlin WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 11 2012
5. <i>[Signature]</i>	14085 W Mendonshire dr new Berlin WI	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 11 2012
6. <i>Thomas Laurado</i>	2120 Chancel Ct. New Berlin WI, 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 11 2012
7. <i>Tom Williams</i>	2120 S Chancel Ct New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 12 2012
8. <i>[Signature]</i>	2120 S. Chancel Ct New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 13 2012
9. <i>[Signature]</i>	2120 S. Chancel Ct New Berlin, WI, 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	May 13, 2012
10. <i>Cindy Moose</i>	2105 Chancel Ct	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City NEW BERLIN	5-27-12

I, THADD J. LAURADO, certify:
(Name of circulator)
 I reside at 2120 Chancel Ct New Berlin WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.27.12 (Date) Thadd J. Laurado (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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, Village, or City	DATE OF SIGNING
1.	2235 Foxglove Ct New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/18
2.	2235 Foxglove Ct New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/18/12
3.	1622 S. Berlin Ave NEW BERLIN	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City new berlin	5/26/12
4.	1622 S. Berlin Ave New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/28/12
5.	1627 S. Triangle Ave. New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/26/2012
6.	1627 S Triangle Ave New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-26-12
7.	1621 S. Triangle Ave. New Berlin, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/26/12
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, Brett C. Bunes, certify:
(Name of circulator)
I reside at 1621 S. Triangle New Berlin WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.26.2012 (Date)
 (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane			Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City 2	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic	
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)			Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Pat Thompson</i>	<i>3500 S. McIntosh New Berlin</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>New Berlin</i>	<i>5/25</i>
2. <i>Sam Robinson</i>	<i>258 S. 83rd St West Allis</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>West Allis</i>	<i>5/26</i>
3. <i>Lyndi D. Dolphin</i>	<i>2524 S 83 West Allis WI</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>West Allis</i>	<i>5/26</i>
4. <i>Edward J. Mchowny</i>	<i>2526 S. 83 West Allis</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>West Allis</i>	<i>5/26</i>
5. <i>Krisha Wachowicz</i>	<i>8526 S. 83 St West Allis</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>West Allis</i>	<i>5/26</i>
6. <i>Josie Medley</i>	<i>2604 A 83 St In Allis Wis</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>W. Allis</i>	<i>5-26</i>
7. <i>Charles Turner</i>	<i>2511 So 84 St West Allis</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>W. ALLIS</i>	<i>5-26-2012</i>
8. <i>Mary Bolik</i>	<i>2541 So. 84 St West Allis WI 53127</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>W. ALLIS</i>	<i>5-26</i>
9. <i>John F. O'Connell</i>	<i>3485 S. Long Acre NEW Berlin</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>N. Berlin W. ALLIS</i>	<i>5/26</i>
10. <i>Julia Annunzio</i>	<i>3485 S. 10th Ave Dr. NEW Berlin</i>	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City <i>N. Berlin</i>	<i>5/26</i>

I, Cindy Moore (Name of circulator), certify:
I reside at 14735 W. Fleetwood Ln New Berlin WI 53151
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.26.2012
(Date)

Cindy Moore
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane			Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (8 words or less) Democratic	
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)			Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	14685 W. meadowshire Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/16/2012
2. <i>Charles J. Averkamp</i>	14685 W. meadowshire Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/16/12
3. <i>[Signature]</i>	14685 W. meadowshire Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/17/12
4. <i>[Signature]</i>	14685 W meadowshire Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/19/12
5. <i>Brendon Banni</i>	2290 S. Woodshire Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/25/12
6. <i>Mary Matuszewski</i>	14301 W. Lincoln Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/25/12
7. <i>[Signature]</i>	14301 W. Lincoln Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/25/12
8. <i>Lisa Buzski</i>	2290 S. Woodshire Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/24/12
9. <i>Lauron Buzski</i>	2290 S. Woodshire Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/24/12
10. <i>Genny Buzski</i>	2290 S. WOODSHIRE DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5/24/12

CERTIFICATION OF CIRCULATOR

I, Sharon Averkamp (Name of circulator), certify:
 I reside at 14685 W. Meadowshire Dr. New Berlin (Circulator's residence - include number, street, and municipality.) see #1-3

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.24.2012 (Date) Sharon Averkamp (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

4

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Debra Marcini</i>	<i>9419 W. Lapham St. West Allis, WI 53214</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>5/29/12</i>
2. <i>Darlene Ignatius</i>	<i>2169 S. 111th St. West Allis, WI 53227</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>5-29-12</i>
3. <i>Kathy Grosskreutz</i>	<i>9533 W. Lapham St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>5-29-12</i>
4. <i>Jarise Twinem</i>	<i>2014 S. 87th West Allis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>5/29/12</i>
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, *Jackie Dacoby* certify:

I reside at *5105 W 205th Valerie Dr, Muskego WI 53150*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-29-12 (Date)

Jackie Dacoby (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Carol Witt</i>	2375 S. Krahn Rd New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-26-12
2. <i>Alan Kresoman</i>	2365 S. Krahn Rd NEW BERLIN WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-27-12
3. <i>Ken Krasner</i>	2365 S. Krahn Rd. NEW BERLIN, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NEW BERLIN	5-27-12
4. <i>Steve Witt</i>	2375 S. Krahn Rd. New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-28-12
5. <i>Barry Witt</i>	2441 So Greenhills Dr. West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-28-12
6. <i>John Witt</i>	2375 S. Krahn Rd New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-28-12
7. <i>John Witt</i>	1505 S. 16th New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-29-12
8. <i>Phil Witt</i>	2370 S. Krahn Rd. New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-29-12
9. <i>Ann Witt</i>	2370 S. Krahn Rd New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-29-12
10. <i>John Witt</i>	14315 W. Park Ct. New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/29/12

I, Carol Witt CERTIFICATION OF CIRCULATOR, certify:

I reside at 2375 S. Krahn Rd. New Berlin, WI 53151
(Name of circulator)
 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-29-12 Carol Witt
(Date) (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

10

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. Dale C Kramer	15170 W. Lincoln	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/20/12
2. Kyle Thomas	15170 W. Lincoln	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/20/12
3. Liz Kruger	15165 W. Lincoln	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/20/12
4. [Signature]	3210 S. Manor Dr New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/25/12
5. Kathleen L. Niemelt	14415 W. Maybore Dr. New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/26/12
6. Ronald P. Wiemelt	14415 W. Maybore Dr. New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/26/12
7. [Signature]	13450 W. FOUNTAIN DR. NEW BERLIN WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/30/12
8. [Signature]	15264 RIDGE RD New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/27/12
9. Sue Kramer	15264 WI Ridge Rd. New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/27/12
10. [Signature]	14250 W FLEETWOOD LANE NEW BERLIN WI 53157	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City NEW BERLIN	5/28/12

I, Dale C Kramer (Name of circulator), certify:
I reside at 15170 W. Lincoln Ave. New Berlin, WI 53151 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/29/12 (Date) Dale C Kramer (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

9

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	15100 W. Cleveland Ave # 284	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-22-12
2. <i>[Signature]</i>	2415 S. Graylag Lane	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-22-12
3. <i>[Signature]</i>	4637 S. Fohr Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5-22-12
4. <i>[Signature]</i>	2507 S. 83rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/24/12
5. <i>[Signature]</i>	2534 S. 84th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/26/12
6. <i>[Signature]</i>	2534 S. 84th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/26/12
7. <i>[Signature]</i>	2990 S Rolling Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/28/12
8. <i>[Signature]</i>	2990 S. Rolling Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/28/12
9. <i>[Signature]</i>	2850 South 152nd St New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/28/12
10. <i>[Signature]</i>	2850 S 152nd St New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/28/12

I, Joan Pray, certify:
(Name of circulator)
 I reside at 16205 W. Allison Lane New Berlin
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/28/2012 (Date) Joan Pray (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

8

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number, box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City 2	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1.	10928 W. Hayes Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/25/12
2.	2416 S. 100th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/25/12
3.	13615 S. 96th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/25/12
4.	1220 S. 97th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/25/12
5.	2303 S. 92nd St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5/25/12
6.	7029 S. 76th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5/25/12
7.	2000 S. 110th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5-25-12
8.	9731 W. ROGERS ST.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5-25-12
9.	2431 S. 79th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	5-25
10.	2137 S. 79th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	5-29

I, Jackie Jacoby (Name of circulator), certify:
I reside at 505 W 205th Valerie Dr, Muskego, WI 53150.
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5-29-12
(Date)

(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

8

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Norma Luenen</i>	14250 W. Fieldpointe Dr New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/2012
2. <i>Uma Ferraris</i>	15110 W. Woodview New Berlin 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/28/12
3. <i>Holly Ruge</i>	2250 S. Lombardy New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/29/12
4. <i>Dane Albiger</i>	2250 S. Lombardy Ln New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/29/12
5. <i>Luigi</i>	3220 S. Ventura New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/29/2012
6. <i>Pat</i>	3220 S. Ventura Dr New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5-29-12
7. <i>Lyette McQuitty</i>	2821 S. Franklin Ct New Berlin WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5-29-12
8. <i>Michael</i>	2821 S. Franklin Ct. New Berlin, WI 53151	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5-29-12
9.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
10.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	

CERTIFICATION OF CIRCULATOR

I, Gale Kramer, (Name of circulator), certify:
I reside at 15170 W. Lincoln Ave. New Berlin, WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/29/12
(Date)

Gale C Kramer
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="checkbox"/> District number 15 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Cindy Stegler</i>	14685 W. Park Ave New Berlin, WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/14/12
2. <i>Dan Stegler</i>	14685 W. Park Avenue New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/14/12
3. <i>Dust Stegler</i>	14685 W. Park Ave New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/12
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, Cindy Stegler **CERTIFICATION OF CIRCULATOR**, certify:
(Name of circulator)
 I reside at 14685 W. Park Ave, New Berlin WI 53151
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/29/2012 Cindy Stegler
(Date) (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Marian Berger</i>	<i>8704 W. Harrison East Alle, Wis.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Alle</i>	<i>5-25-12</i>
2. <i>Neelke Schmitz</i>	<i>15711 W. Mayflower P.D. New Berlin, WI 53151</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>New Berlin</i>	<i>15 May 2012</i>
3.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
4.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, *Mary Beth Schultz*, certify:
(Name of circulator)
 I reside at *13510 Terrywood Ct New Berlin, WI 53151*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5.25.2012 (Date) *Mary Beth Schultz* (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

2

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number, box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	14325 W PARK CT	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5-29-12
2. <i>[Signature]</i>	14730 W Fleetwood W	<input type="radio"/> Town <input type="radio"/> Village <input checked="" type="radio"/> City New Berlin	5/29/12
3.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
4.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
5.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
6.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
7.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
8.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
9.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	
10.		<input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City	

I, John Devine (Name of circulator), certify:
 I reside at 14315 W. Park Ct., New Berlin (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/29/2012
(Date)

[Signature]
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Cindy Moore		Street, fire, or rural route number; box number (if rural route); and name of street or road 14735 W, Fleetwood Lane		Name of municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	
Name of municipality for mailing purposes New Berlin	State WI	Zip code 53151	Type of election <input checked="" type="radio"/> general <input type="radio"/> special	Election date 11/6/2012	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office Assembly District 15		District or Jurisdiction <input checked="" type="radio"/> District number 15 <input type="radio"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office District 15	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	3080 Rolling Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/6/12
2. <i>[Signature]</i>	2050 W Bates Pl	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/20/12
3. <i>[Signature]</i>	20050 W. Bates Pl	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/12
4. <i>[Signature]</i>	20050 W. Bates Pl	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	5/22/12
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, Wendy A Vernon, certify:
(Name of circulator)
 I reside at 20050 W Bates Pl, New Berlin WI 53146
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

5/29/12 (Date) Wendy Vernon (Signature of circulator)