

State of Wisconsin  
Wisconsin Elections Commission

Republican Party of Wisconsin  
Mark Morgan  
Complainant,

Against

Richard Pulcher  
Respondent.

AFFIDAVIT & RESPONSE TO NOMINATION PAPER CHALLENGE  
GEORGE GILLIS on behalf of RICHARD PULCHER

I, George Gillis, hereby state as follows:

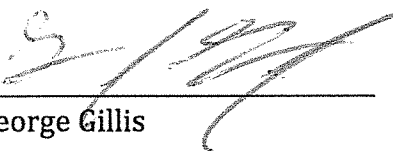
1. This affidavit is in response to a challenge filed by Mark Morgan, residing at 148 East Johnson Street Madison WI 53703, as to the sufficiency of nomination papers to place Richard Pulcher on the ballot for the State Senate, District 29. The challenge to sufficiency was filed on June 4, 2018.
2. I am a qualified elector in and resident of the State of Wisconsin. I am the Executive Director of the Democratic Party of Wisconsin with offices at 15 N. Pinckney Street, Suite 200, Madison, WI 53703. I am filing this response on behalf of Richard Pulcher.
3. Complainant has made insufficient challenges to disqualify Richard Pulcher as a candidate for State Senate, District 29. To wit:
  - a. On June 1, 2018, Respondent filed nomination papers with the Wisconsin Elections Commission to be placed on the November 6, 2018 ballot for State Senate District 29. The Respondent's nomination papers contained 435 valid signatures as determined by initial review of Wisconsin Election Commission staff.
  - b. Respondent, Richard Pulcher, provided on June 7, 2018 an Affidavit correcting information for 39 signatures.
  - c. Of the 53 challenged signatures, 18 were identified by Complainant as invalid despite clear guidance on previous rulings in the Common Nomination Paper Challenges Manual. Despite the Commission issuing a previous decision on this issue, the respondent offered corrections on 12 of the 18 signatures.
    - i. Apartment Numbers: "Staff has recommended that signatures be found in substantial compliance where the insufficiency is a missing apartment number."

- d. Complainant has provided insufficient evidence that the elector did not comply with State Statutes to support their claim of invalidity for 6 signatures on 6 separate pages are invalid: Page 2 Line 6, Page 14 Line 4, Page 16 Line 6, Page 30 Line 8, Page 32 Line 3, Page 35 line 5/6. The burden of proof is on the Complainant to prove the defect and Complainant has offered circumstantial evidence at best.
  - e. After considering signatures repaired by respondent's affidavit (39), and signatures the Complainant claimed are invalid without evidence of such (6), the remaining 8 challenges are insufficient to bring Respondent below the 400 signature threshold.
4. Due to the Complainant's inability to demonstrate that Respondent collected fewer than 400 signatures as required by Wisconsin Statute, Respondent asks that the Complaint be rejected, and full ballot access granted to Respondent Richard Pulcher.

I, George Gillis, being duly sworn upon oath, state that I personally read the above complaint and that the above listed allegations are true and correct based upon my personal knowledge and my review of the nomination papers and other public records, and as to those allegations stated on my information and believe, I believe them to be true.

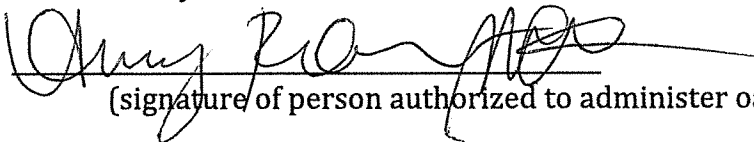
Dated this 7 day of June, 2018.

Respectfully submitted,

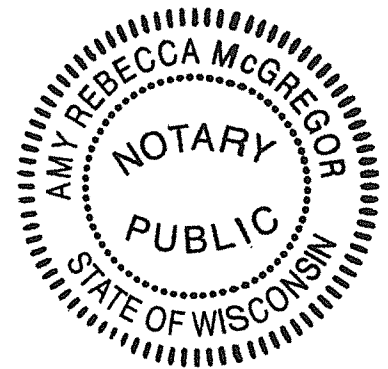
  
 \_\_\_\_\_  
 George Gillis

Subscribed and sworn to before me

this 7<sup>th</sup> day of June, 2018.

  
 \_\_\_\_\_  
 (signature of person authorized to administer oaths)

My commission expires 12/14/21 or is permanent   
 Notary Public , or \_\_\_\_\_



# Affidavit of Nomination Paper Circulator

STATE OF WISCONSIN    }  
  } ss.  
Dane County                }

I, Richard Pulcher, being duly sworn, state:

1. This affidavit is made to supplement and correct the certification(s) of circulator on the nomination papers for Richard Pulcher, State Senate Candidate District 29, as described in this affidavit.
2. I reside at W13276 South Street, Lublin Wisconsin 54447.
3. Of the 53 signatures challenged, 18 challengers were for signatures lacking apartment numbers. Pursuant to previous guidance in the Nomination Paper Challenges Manual it was my understanding that "Staff has recommended that signatures be found in substantial compliance where the insufficiency is a missing apartment number."
4. I personally circulated the original of the attached nomination papers numbered 2, 7, 20, 31, 42, 44, 47, and 48.
5. I personally obtained each of the signatures on the above numbered pages of my nomination papers. Despite the Commission issuing a previous decision determining that lack of apartment number should be found in substantial compliance, I am offering the following corrections to provide apartment numbers.

Table One: Apartment Unit Numbers

Page	Line	Correction Offered
2	3	120 S. Well Street Apt. #6 Gilman, WI 54433. Municipality of Residence: Village of Gilman.
2	4	120 S. Well Street Apt. #5 Gilman, WI 54433. Municipality of Residence: Village of Gilman.
7	9	712 Scott Street, Wausau WI 54403. Municipality of Residence: City of Wausau.
20	3	N1226 Taylor Street Apt. #14 Lublin, WI 54447. Municipality of Residence: Village of Lublin.
20	4	N1226 Taylor Street Apt. #14 Lublin, WI 54447. Municipality of Residence: Village of Lublin.
31	9	611 West Street Apt. A Wausau, WI 54401. Municipality of Residence: City of Wausau.

42	3	524 N. 2nd Street Apt. #5 Medford, WI 54451. Municipality of Residence: City of Medford.
44	1	705 East 4th Street South Apt. #19 Ladysmith, WI 54848. Municipality of Residence: City of Ladysmith.
47	1	400 River Drive Apt #383 Wausau, WI 54403. Municipality of Residence: City of Wausau.
48	6	705 East 4th Street South Apt. #4 Ladysmith, WI 54848. Municipality of Residence: City of Ladysmith.
48	9	705 East 4th Street South Apt. # 8 Ladysmith, WI 54848. Municipality of Residence: City of Ladysmith.
48	10	705 East 4th Street Apt. #10 Ladysmith, WI 54848. Municipality of Residence: City of Ladysmith.

6. Of the 53 signatures challenged, 28 were challenged due to alleged incomplete addresses, claims that an addresses are businesses, ineligible signers, and claims that electors do not live at the listed address.
7. I personally circulated the original of the attached nomination papers numbered 3, 4, 5, 6, 11, 15, 19, 21, 29, 31, 32, 38, 41, 42, 43, and 48.
8. I inadvertently certified these signatures on the above-numbered nomination papers with incomplete addresses, dates, and municipality of residence information and make the following corrections:

Table Two: Additional Corrections

Page	Line	Correction Offered
5	7	8104 Wintergreen Rd. Wausau, WI 54401. Municipality of Residence: Town of Rib Mountain
5	8	8104 Wintergreen Rd. Wausau, WI 54401. Municipality of Residence: Town of Rib Mountain
15	8	4954 N. Tower Rd. Loretta, WI 54896. Municipality of Residence: Town of Draper
43	4	621 Lake Ave. E. Ladysmith, WI 54848. Municipality of Residence: City of Ladysmith
4	1	W5539 Pierce Street Sheldon, WI 54766. Municipality of Residence: Village of Sheldon
11	6	122 S Lincoln St, Stetsonville WI 54480. Municipality of Residence: Village of Stetsonville

3	7	7881 N Grindstone Ave Hayward, WI 54843. Municipality of Residence: Town of Bass Lake.
21	3	N1220 Railroad St, Lublin WI 54447. Municipality of Residence: Village of Lublin.
21	4	W13322 North St, Lublin WI 54447. Municipality of Residence: Village of Lublin.
21	5	N1263 Railroad St Lublin, WI 54447. Municipality of Residence: Village of Lublin.
21	6	N1263 Railroad St Lublin, WI 54447. Municipality of Residence: Village of Lublin.
29	3	N539 County Road A T, Withee WI 54498. Municipality of Residence: Town of Maplehurst
31	4	500 Grand Ave Apt 407 Wausau, WI 54403. Municipality of Residence: City of Wausau
32	4	802 W Rosecrans St, Wausau, WI 54401. Municipality of Residence: City of Wausau
38	2	417 S 4th St Medford, WI 54451. Municipality of Residence: City of Medford.
38	9	N1904 7th Ave, Lublin WI 54447. Municipality of Residence: Town of Roosevelt.
38	10	N1904 7th Ave, Lublin WI 54447. Municipality of Residence: Town of Roosevelt.
48	3	518 Menasha Ave E Ladysmith, WI 54848. Municipality of Residence: City of Ladysmith.
48	4	518 Menasha Ave E Ladysmith, WI 54848. Municipality of Residence: City of Ladysmith.
6	10	N1309 County Road F, Lublin WI 5447. Municipality of Residence: Town of Roosevelt. Date of Signing: 5/10/2018
42	4	Date of Signing: 5/26/2018
19	1	N285 8½ Ave, Lublin WI 54447. Municipality of Residence: Town of Roosevelt.

6. For the signature on Page 41 Line 10, I personally obtained the signature of the elector who averred that their address was as stated. In my efforts to respond to this Complaint,

my own search of records indicate that the address has been a residence for others in the past. I am attaching a record of said search as Exhibit A.

I further certify that I am a qualified elector of Wisconsin. I personally circulated the originals of the attached nomination papers, the page numbers of which are listed above, and I personally obtained each of the signatures on that page.

I know that the signers are electors of the 29th Senate District. I know that each person signed 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 affidavit is punishable under ss.12.13(3)(a), 946.32(1)(a), Wis. Stats.

Richard Pulaski  
(signature of circulator)

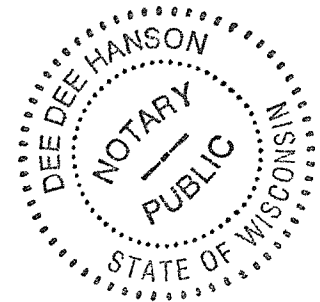
Subscribed and sworn to before me

this 7<sup>th</sup> day of June, 2018.

Dee Dee Hanson  
(signature of person authorized to administer oaths)

My commission expires March 19, 2022 or is permanent

Notary Public , or \_\_\_\_\_



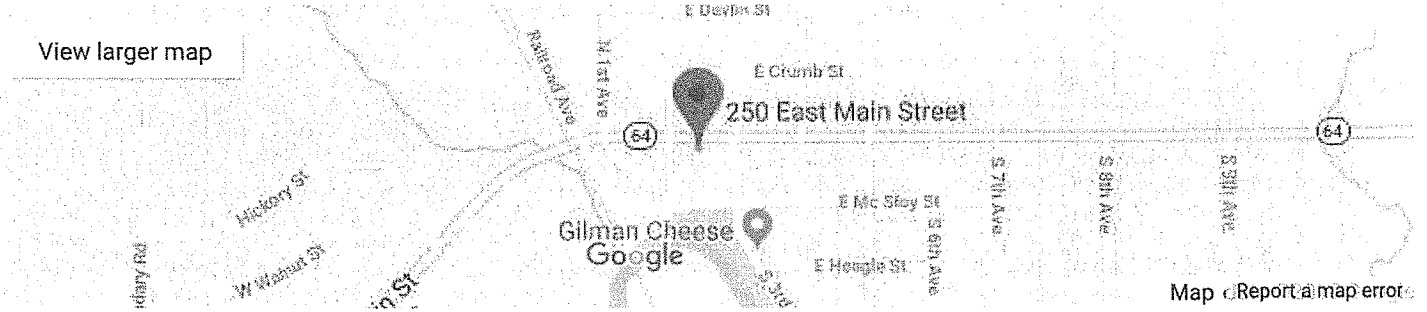


250 E Main St, Gilman WI 54433

Exhibit A



3 records found for 250 E Main St Gilman WI 54433



### Mr Thomas A Kowalczyk

Lives in: Gilman, WI

Used to live: Gilman, WI

AKA: Thomas Kowalczyk , Tom Kowalczyk , T Kowalczyk , Mr Thomas A Kowalczyk

Related to: [Thomas Kowalczyk](#)

[VIEW FREE DETAILS](#)

### Ms Doreen J Shatwell

Lives in: Gilman, WI

Used to live: Gilman, WI, Lublin, WI, Harrison, AR

AKA: Doreen Shatwell , Ms Doreen J Shatwell , Doreen J Shatnell , Doreen J Shazwell

Related to: [Jeffery L Shatwell](#) , [Joey L Shatwell](#) , [Mac A Shatwell](#) , [Kathy K Shatwell](#) , [Cindy S Shannon](#) , ...

[VIEW FREE DETAILS](#)

### Mr James L Harris

Lives in: Owen, WI

Used to live: Owen, WI, Curtiss, WI, Hayward, WI, Bruce, WI, Birchwood, WI

AKA: Jim Harris , James Harris , James Lharris , Mr James L Harris

Related to:

[VIEW FREE DETAILS](#)



Directory: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

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**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required): no titles may be used.  
**Richard Pulcher**

Candidate's residential address (required) *No P.O. box addresses*  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
 Town of **Lublin**  
 Village of  
 City of

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)  
**WI 54447**

State (required) **WI** Zip code **54447**

Type of election (required)  
 general  
 special

General Election date (required) **Mo/Da/Year**  
**11/6/2018**

Name of Party or Statement of Principle (required) **Democrat**

Title of office (required)  
**WI State Senate**

District or Jurisdiction (required if applicable)  
 District number **29**  
 Jurisdiction (county) \_\_\_\_\_

Name of Jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Da/Year
<i>[Signature]</i>	<del>Marcie Boie</del>			
1. <i>[Signature]</i>	Marcie Boie	W14708 ROOSEVELT DR THORO WY 54771	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Roosevelt</b>	4-18-18
2. <i>[Signature]</i>	John Ager	155 S 6TH AVE GILMAN, WI 54433	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Gilman</b>	4-18-18
3. <i>[Signature]</i>	Belle M. McArthur	120 S. W 2Lk St Gilman, WI 54433	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Gilman</b>	4-18-18
4. <i>[Signature]</i>	Ted Drymiller	130 S. Well St Gilman WI 54433	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Gilman</b>	4-18-18
5. <i>[Signature]</i>	Edith E. Roback	310 E. DAVIN ST GILMAN, WI 54433	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Gilman</b>	4-18-18
6. <i>[Signature]</i>	Charles Anderson	155 E. Davlin	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Gilman</b>	4-18-18
7. <i>[Signature]</i>	Richard Pulcher	W13276 South St	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4-18-18
8. <i>[Signature]</i>	Holly E Adams	W1682 Leland Rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Pershing</b>	4-25-18
9. <i>[Signature]</i>	William K Brennan	400 W Kner side Dr Gilman WI 54433	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Gilman</b>	4-25-18
10. <i>[Signature]</i>	Richard Pulcher	W13276 South Street Lublin	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4-25-18

**CERTIFICATION OF CIRCULATOR**  
 I certify: I reside at **W13276 South Street Lublin**  
 (Name of circulator)  
 (Circulator's residential address - Include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).  
**Richard Pulcher**  
 4-25-18

**NOMINATION PAPER FOR PARTISAN OFFICE**

9

Candidate's name (required); no titles may be used.  
**Richard Palcher**

Candidate's residential address (required) No P.O. box addresses  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
 Town of **Lublin**  
 Village of  
 City of

Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality)  
**WI 54147**

State (required)  
**WI**

Zip code  
**54147**

District or Jurisdiction (required if applicable)  
 District number **29**  
 Jurisdiction (County)

Type of election (required)  
 general  
 special

General Election date (required) Mo/Day/Year  
**11/6/2018**

(Required) Name of party or statement of Principle (5 words or less)  
**Democrat**

Title of office (required)  
**WI State Senate**

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Day/Year
<i>Roberta Maul</i>	Roberta Maul	116 Robb St.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <b>Schafoia</b>	5/30/18
<i>David L Gamble</i>	David L Gamble	221 Scott St 437	<input type="checkbox"/> Town <input type="checkbox"/> Village of <b>WAUSAU</b>	5/30/18
<i>Sciocia Goodrich</i>	Sciocia Goodrich	2075 Tereshma Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village of <b>Kronenwetter</b>	5/30/18
<i>Lurida Shobani</i>	Lurida Shobani	1133 Spruce St Wausau	<input type="checkbox"/> Town <input type="checkbox"/> Village of <b>Wausau</b>	5/30/18
<i>Richard Le Clair</i>	Richard Le Clair	513 Stark St Wausau	<input type="checkbox"/> Town <input type="checkbox"/> Village of <b>Wausau</b>	5/30/18
<i>Britany Warden Vaggenberg</i>	Britany Warden Vaggenberg	2504 Juniper Lane Wausau	<input type="checkbox"/> Town <input type="checkbox"/> Village of <b>Rib Mountain</b>	5/30/18
<i>Paul Seiser</i>	Paul Seiser	7601 Laurel Rd Wausau	<input type="checkbox"/> Town <input type="checkbox"/> Village of <b>Rib Mtn</b>	5/30/18
<i>Aidan Richardson</i>	Aidan Richardson	72 Scott St Wausau	<input type="checkbox"/> Town <input type="checkbox"/> Village of <b>Wausau</b>	5/30/18
<i>Nancy Anderson</i>	Nancy Anderson	3804 Swan St	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village of <b>Rib Mtn</b>	5/30/18

1. Richard Palcher (Name of circulator) certify: I reside at W13276 South Street Lublin (Circulator's residential address - include number, street, and municipality)

I further certify, I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

Richard Palcher (Signature of circulator)

5-30-18 (Date)

Page No. 7

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required): no titles may be used.  
Richard Palcher

Candidate's residential address (required) No P.O. box addresses  
 Street, fire, or rural route number, box number (if rural route); and name of street or road  
W13276 South Street

Candidate's municipality for voting purposes (required).  
Lublin

(name of municipality)

Candidate's municipality for mailing purposes (required) if different than residential address or voting municipality)  
WI State (required) Zip code 54147

Title of office (required)  
WI State Senate

District or Jurisdiction (required if applicable)  
 District number 29  Jurisdiction (county) \_\_\_\_\_

Type of election (required)  
 general  special

General Election date (required) Mo/Dav/Year  
11/6/2018

Name of Jurisdiction or district in which candidate seeks office (required)  
Senate District 29

(Required) Name of Party or Statement of Principle (5 words or less)  
Democrat

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Dav/Year
<u>Samantha Jones</u>	<u>Samantha Jones</u>	<u>11241 GUNWON ST. EAST, WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Justin Jones</u>	<u>Justin Jones</u>	<u>11241 Church Street</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-28-18</u>
<u>Brenda L. VanDerweert</u>	<u>Brenda L. VanDerweert</u>	<u>11226 Taylor Street</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Josh VanDerweert</u>	<u>Josh VanDerweert</u>	<u>11226 Thylone St</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Mary K. Stenmeier</u>	<u>Mary K. Stenmeier</u>	<u>11213 418 2nd</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Joe T. Nowicki</u>	<u>Joe T. Nowicki</u>	<u>W13454 50 ST</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Terry O. Elliott</u>	<u>Terry O. Elliott</u>	<u>W13478 South St.</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Van Elliott</u>	<u>Van Elliott</u>	<u>11150 Cass St</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Frank J. Laskowski</u>	<u>FRANK J. LASKOWSKI</u>	<u>W13302 Kuhlman St.</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>
<u>Andrew R. Madlan</u>	<u>Andrew R. Madlan</u>	<u>11179 Pulaski St.</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Lublin</u>	<u>4-29-18</u>

1. Richard Pulcher certify: I reside at W13276 South Street, Lublin.  
 (Name of circulator) (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

Richard Pulcher  
 4-29-18

**NOMINATION PAPER FOR PARTISAN OFFICE**

10

Candidate's name (required); no titles may be used.  
Richard Paleher

Candidate's residential address (required) No P.O. box addresses  
 Street, fire, or rural route number; box number (if rural route); and name of street or road  
W13276 South Street

Candidate's municipality for voting purposes (required).  
 Town of  
 Village of  
 City of  
Lablin  
 (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required) WI Zip code 54147

Type of election (required)  
 general  
 special

General Election date (required) Mo/Dav/Year 11/6/2018 (Required) Name of Party or Statement of Principle (5 words or less) Democrat

Title of office (required)  
WI State Senate

District or Jurisdiction (required if applicable)  
 District number 29  
 Jurisdiction (county)

Name of jurisdiction or district in which candidate seeks office (required)  
Senate District 29

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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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Dav/Year
1. <u>Greg Daniels</u>	TEEN GERMANE	1001 Newen Avenue	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Redlands</u> <input type="checkbox"/> City	5-19-18
2. <u>Allyson Leahy</u>	Allyson Leahy	112 N 12th Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Wausau</u> <input type="checkbox"/> City	5/19/18
3. <u>Devereaux Kesler</u>	Devereaux Kesler	313 Clark St. Apt. 1	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Wausau</u> <input type="checkbox"/> City	5/19/18
4. <u>Wayne Olson</u>	WAYNE OLSON	500 GADE AV APT 407	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Wausau</u> <input type="checkbox"/> City	5/19-18
5. <u>Robert J. Lark</u>	Robert J. Lark	572 Williams St.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Rothschild</u> <input type="checkbox"/> City	5/19/18
6. <u>Colleen Gerrick</u>	Colleen Gerrick	1001 Yankee Ave.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Rothschild</u> <input type="checkbox"/> City	5-19-18
7. <u>Kevn Ward</u>	KEVN WARD	608 KENT ST	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Wausau</u> <input type="checkbox"/> City	5-19-18
8. <u>James Bonnell</u>	JAMES BONNELL	863 Greenhill Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Wausau</u> <input type="checkbox"/> City	5-19-18
9. <u>Thane Lapsuke</u>	THANE LAPSUKE	611 WEST ST	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Wausau</u> <input type="checkbox"/> City	5-19-18
10. <u>Kurt Hase</u>	KURT HASE	703 WEST ST	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village of <u>Wausau</u> <input type="checkbox"/> City	5-19-18

CERTIFICATION OF CIRCULATOR  
 I, Richard Paleher, certify: I reside at W13276 South Street, Lablin  
 (Name of circulator) (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

Richard Paleher  
 (Date) 5-19-18

Page No. 21

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no aliases may be used.  
Richard Palcher

Candidate's residential address (required) *Also P.O. box addresses*  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
W13276 South Street

Candidate's municipality for voting purposes (required).  
Lublin (name of municipality)

Candidate's mailing address; including municipality for mailing purposes (required if different than residential address or voting municipality)  
 State (required) WI Zip code 54147

District or Jurisdiction (required if applicable)  
 District number 27  Jurisdiction (county) \_\_\_\_\_

Title of office (required)  
WI State Senate

Name of Jurisdiction or District in which candidate seeks office (required)  
Senate District 29

General Election date (required) *Mo/DaY/Year*  
11/6/2018

(Required) Name of Party or Statement of Principle (5 words or less)  
Democrat

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/DaY/Year
<u>Brandon Miller</u>	<u>Brandon Miller</u>	<u>W13851 Teen Dr Lublin WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Rosevelt</u>	<u>5-26-18</u>
<u>Tom Ochelt</u>	<u>Tom Ochelt</u>	<u>W13043 St Hwy 64</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Roosevelt</u>	<u>5-26-18</u>
<u>Lufan Purdy</u>	<u>Lufan Purdy</u>	<u>534 N. 2nd St Medford WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Medford</u>	<u>5-26-18</u>
<u>Leslie Anderson</u>	<u>Leslie Anderson</u>	<u>504 N 2nd St Apt 1a</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Medford</u>	<u>5-25-18</u>
<u>Cheryl Czopka</u>	<u>Cheryl Czopka</u>	<u>524 N 2nd St Apt 16</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Medford</u>	<u>5-26-18</u>
<u>Britney Longmire</u>	<u>Britney Longmire</u>	<u>524 N 2nd St Apt 5</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Medford</u>	<u>5-26-18</u>
<u>Travis Smith</u>	<u>Travis Smith</u>	<u>524 N 2nd St Apt 3</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Medford</u>	<u>5-26-18</u>
<u>Ursula Gorce</u>	<u>Ursula Gorce</u>	<u>11235 West St</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Lublin</u>	<u>5-26-18</u>
<u>Raymond Stearns</u>	<u>Raymond Stearns</u>	<u>14719 West St</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Lublin</u>	<u>5-26-18</u>
<u>Pauline DeVan</u>	<u>Pauline DeVan</u>	<u>W14719 Cty. Rd. F</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Lublin</u>	<u>5-26-18</u>

Richard Palcher (Name of circulator)  
 I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

**CERTIFICATION OF CIRCULATOR**  
 I reside at W13276 South Street Lublin  
 (Circulator's residential address - include number, street, and municipality)

**NOMINATION PAPER FOR PARTISAN OFFICE**

10

Candidate's name (required; no titles may be used): **Richard Palcher**  
 Candidate's residential address (required; No P.O. Box addresses):  
 Street, fire, or rural route number, box number (if rural route), and name of street or road: **W13276 South Street**  
 Candidate's municipality for voting purposes (required):  
 Town of **Ladwin**  
 Village of **Ladwin**  
 City of **Ladwin**  
 Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality):  
 State (required): **WI** Zip code: **54447**  
 District or Jurisdiction (required if applicable):  
 District number: **29**  
 Jurisdiction (county): \_\_\_\_\_  
 Name of jurisdiction or district in which candidate seeks office (required): **Senate District 29**  
 General Election date (required) Mo/Da/Year: **11/6/2018**  
 (Required) Name of Party or Statement of Principle (5 words or less): **Democrat**

Title of office (required): **WI State Senate**  
 the undersigned, request that the candidate, whose name and residential 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

Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Day/Year
1. Evelyn R. Sommerberg	705 E 4th St S.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
2. Lynn A. Lesik	705 E 4th St S. Apt 7	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
3. STEVEN DAUGHTY	705 E 4th St Apt 8	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
4. THOMAS L NELSON	705 E 4th St, Apt 3	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
5. PAT COLLINS	705 E 4th St Apt 7	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
6. PHYLIS WANSON	705 E 4th St Apt 13	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
7. CRAIG SMITH	705 E 4th St Apt 15	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
8. CHERYL TATROW	705 E 4th St, Apt 16	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
9. LISA MAJKA	705 E 4th St, S. 118	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18
10. NICOLE FRIGO	705 E 4th St S Apt 19	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Ladwin	5-21-18

**CERTIFICATION OF CIRCULATOR**  
 Name of circulator: **Richard Palcher**  
 certify: I reside at **W13276 South Street, Ladwin**  
 (Circulator's residential address - include number, street, and municipality)

further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. 5.603. 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. 5.12.13(3)(e).  
 Signature: **Richard Palcher**  
 Date: **5-21-18**  
 (Initial) **RP**  
 Page No. **11**



**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.  
Richard Falcher

Candidate's residential address (required) *Also P.O. box addresses*  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
W13276 South Street

Candidate's municipality for voting purposes (required).  
 Town of  
 Village of  
 City of  
Lublin

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required)  
WI

Zip code  
54447

Type of election (required)  
 general  
 special

General Election date (required) *Mo/Da/Year*  
11/6/2018

(Required) Name of Party or Statement of Principle (5 words or less)  
Democrat

Title of office (required)  
WI State Senate

District or Jurisdiction (required if applicable)  
 District number  
 Jurisdiction (county)  
29

Name of jurisdiction or district in which candidate seeks office (required)  
Senate District 29

The undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) <small>(Rural address must also include box or fire no)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes</small>	Date of Signing <small>Mo/Da/Year</small>
<u>Jean M Schopp</u>	Jean M Schopp	400 River Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5-30-18
<u>Carol Heam</u>	Carol Heam	708 Fulton St #110	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5-30-18
<u>Pauline Blaschka</u>	Pauline Blaschka	1418 S 3rd Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5-30-18
<u>Ann Ann</u>	ANN BOLENBAUGH	920 S 8TH AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5/30/18
<u>Pauline Blaschka</u>	Bilanne Bolenbaugh	920 S. 8th Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5/30/18
<u>Dianne Hahn</u>	Dianne Hahn	2706 Henderson Drive	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5-30-18
<u>Wayne Waldhart</u>	Wayne Waldhart	1015 CALLOWAY ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5-30-18
<u>Mila Ann</u>	Mila Ann	820 Sycamore Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5-30-18
<u>Susan Carlson</u>	Susan Carlson	1849 3rd Ln.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5-30-18
<u>Slivia Tinoslo</u>	Slivia Tinoslo	653 Brooks Pl. #12	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5/30/18

**CERTIFICATION OF CIRCULATOR**

I, Richard Falcher certify: I reside at W13276 South Street Lublin

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally calculated 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).

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.

**Richard Palcher**

Candidate's residential address (required) No P.O. box addresses  
Street, fire, or rural route number, box number (if rural route), and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
 Town of  
 Village of  
 City of

**LaBlin**

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

**WI State Senate**

State (required) **WI**  
Zip code **54047**

Type of election (required)  
 General  
 special

General Election date (required) Mo/Day/Year  
**11/6/2018**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Day/Year
<i>Allen E. Campos</i>	ALLEN E. Campos	W14015 Hamilton Dr	<input checked="" type="checkbox"/> Town of <b>Juniata</b> <input type="checkbox"/> Village of <b>Shelburne</b> <input type="checkbox"/> City of <b>Upperville</b>	5-21-18
<i>Joan Campos</i>	JOAN CAMPOS	W14015 Hamilton Dr	<input checked="" type="checkbox"/> Town of <b>Juniata</b> <input type="checkbox"/> Village of <b>Shelburne</b> <input type="checkbox"/> City of <b>Upperville</b>	5-21-18
<i>Robert Baye</i>	Robert Baye	518 Menasha Ave	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5/21/18
<i>Joseph S. Baye</i>	Joseph S. Baye	518 Menasha Ave	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5/21/18
<i>Josh Satten</i>	Josh Satten	719 E 6th Street South	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5/21/18
<i>Harvey Miller</i>	Harvey Miller	705 E 2nd St S	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5/21/18
<i>Matthew Hymnicki</i>	Matthew Hymnicki	516 Park Ave	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5-21-18
<i>Linda Tangen</i>	Linda Tangen	705 E 4th St #	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5-21-18
<i>Janet S. Baye</i>	Janet S. Baye	105 E 4th St S	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5-21-18
<i>John Bohun</i>	JOHN BOHUN	505E 4th St S	<input checked="" type="checkbox"/> Town of <b>Lady Smith</b> <input type="checkbox"/> Village of <b>Lady Smith</b> <input type="checkbox"/> City of <b>Lady Smith</b>	5-21-18

**CERTIFICATION OF CIRCULATOR**

I, Richard Palcher (Name of circulator) certify: I reside at W13276 South Street LaBlin (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

5-21-18 (Date)

Richard Palcher (Signature of Circulator)



**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.  
Richard Falcher

Candidate's residential address (required) No P.O. Box addresses  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
W13276 South Street

Candidate's municipality for voting purposes (required).  
 Town of  
 Village of  
 City of  
Lablin

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required) Zip code  
WI 54447

Type of election (required)  
 General  
 special

General Election date (required) Mo/Day/Year  
11/6/2018

(Required) Name of Party or Statement of Principle (5 words or less)  
Democrat

Title of office (required)  
WI State Senate

District or Jurisdiction (required if applicable)  
 District number  
 Jurisdiction (county)

Name of Jurisdiction or district in which candidate seeks office (required)  
Senate District 29

I, the undersigned, request that the candidate, whose name and residential 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, with different than municipality of residence, is not sufficient. The name of the municipality of residence must always be listed.

Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Day/Year
<u>Catherine Oldenburg</u>	<u>Catherine Oldenburg</u>	<u>157 Ethel St</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Wausau</u>	<u>5/26/18</u>
<u>Charles Oldenburg</u>	<u>Charles Oldenburg</u>	<u>157 Ethel St</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Wausau</u>	<u>5/26/18</u>
<u>Jared Yach</u>	<u>Jared Yach</u>	<u>N8075 Bellvue Rd.</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Township</u>	<u>5/26/18</u>
<u>Dawn V. Herbst</u>	<u>Dawn V. Herbst</u>	<u>2809 Springdale Ave</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Wausau</u>	<u>5/26/18</u>
<u>Steel Byrne</u>	<u>Steel Byrne</u>	<u>2712 W Wausau Ave</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Wausau</u>	<u>5/26/18</u>
<u>Jane Allard</u>	<u>Tara Allard</u>	<u>416 Elm St Rothschild</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Rothschild</u>	<u>5/26/18</u>
<u>Mark Sperry</u>	<u>Mark Sperry</u>	<u>7881 W Grandchester</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Ross Lake</u>	<u>5/26/18</u>
<u>LORALYN ECKSTROM</u>	<u>LORALYN ECKSTROM</u>	<u>16058 W THIRD ST</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>HAVERDA</u>	<u>5/26/18</u>
<u>Nils Eckstrom</u>	<u>Nils Eckstrom</u>	<u>16058 W 3rd St</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Haverd</u>	<u>5/26/18</u>

**CERTIFICATION OF CIRCULATOR**

I, Richard Pulcher certify: I reside at W13276 South Street, Lablin  
 (Name of circulator) (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circled 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)(j).

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used. **Richard Pulcher**

Candidate's residential address (required) *No P.O. box addresses*  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
 Town of **Lublin**  
 Village of **Lublin**  
 City of

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)  
**WI** State **WI** Zip code **54447**

District or Jurisdiction (required if applicable)  
 District number **29**  
 Jurisdiction (county)

Title of office (required)  
**WI State Senate**

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

General Election date (required) *Mo/Da/Year*  
**11/6/2018**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

**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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) <small>(Rural address must also include box or fire no)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes</small>	Date of Signing <small>Mo/Da/Year</small>
1. Ashley Smazal	Ashley Smazal	W5539 Preece St Sheldon WI 54760	<input checked="" type="checkbox"/> Town of Sheldon	5/21/18
2. Andy Bentley	Andy Bentley	W6546 Pierce St Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5/21/18
3. Vickie Bentley	Vickie Bentley	W5545 Preece St Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5/21/18
4. Ian Faulkley	Ian Faulkley	N7004 Ast. . Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5-21-18
5. Ashley Nelson	Ashley Nelson	W538 4th Ave. Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5-21-18
6. Sean Hensley	Sean Hensley	N582 4th AVE Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5-21-18
7. Sasha Dixon	Sasha Dixon	W5580 View St Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5-21-18
8. Jeffrey Smazal	Jeffrey Smazal	W5539 Pierce St, Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5-21-18
9. Donald Rink	Donald Rink	W 7905 Eastern town Sheldon	<input checked="" type="checkbox"/> Town of Sheldon	5/22/18

**CERTIFICATION OF CIRCULATOR**

I, **Richard Pulcher**, certify: I reside at **W13276 South Street, Lublin**.

(Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

Richard Pulcher

Page No. **4**

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.

**Richard Palcher**

Candidate's residential address (required) (No P.O. Box addresses)

Street, fire, or rural route number, box number (if rural route), and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).

**Lablin**

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required) Zip code  
**WI 54147**

Type of election (required)  
 General  
 special

General Election date (required) (Mo/Da/Year)  
**11/6/2018**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

Title of office (required)

**WI State Senate**

District or Jurisdiction (required if applicable)  
 District number  
 Jurisdiction (county)

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Da/Year
	Kathleen Schneck	4023 Roy St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Emily Schneck	4023 Troy St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Carrie A Anderson	2004 Fern Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Tom Tolmanse	1305 Tomgwill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Elaine Bertino	2405 N. 76 Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Anna Beilbuss	2309 Town St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Joe Schwantes	8104 Wintersgreen Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Amanda Schwantes	8104 Wintersgreen Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18
	Deb Gnat	12720 N 60th Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/26/18

**CERTIFICATION OF CIRCULATOR**

I, Richard Palcher certify: I reside at W13276 South Street Lablin (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally validated 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)(e).

**S**

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.

Richard Palcher

Candidate's residential address (required) *No P.O. box addresses*  
 Street, fire, or rural route number; box number (if rural route); and name of street or road  
W13276 South Street

Candidate's municipality for voting purposes (required).  
 Town of Lablin  
 Village of Lablin  
 City of \_\_\_\_\_

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State Senate

State (required) WI Zip code 54447

Type of election (required)  
 general  
 special

General Election date (required) Mo/Dav/Year  
11/6/2018

(Required) Name of Party or Statement of Principle (5 words or less)  
Democrat

Title of office (required)

Name of jurisdiction or district in which candidate seeks office (required)  
Senate District 29

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Dav/Year
<u>Amy Brinkhoff</u>	<u>RICHARD PALCHER</u>	<u>10607 N Keweenaw Rd</u>	<input checked="" type="checkbox"/> Town of <u>Lablin</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>4-5-18</u>
<u>Mia Nussell</u>	<u>Christine Nowak</u>	<u>W13544 South St</u>	<input checked="" type="checkbox"/> Town of <u>Lablin</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5-5-18</u>
<u>Steve Tyunik</u>	<u>Steve Tyunik</u>	<u>W1450 Hwy 73</u>	<input checked="" type="checkbox"/> Town of <u>Roosevelt</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5/6/18</u>
<u>Gina Timm</u>	<u>Gina Timm</u>	<u>W1450 Hwy 73</u>	<input checked="" type="checkbox"/> Town of <u>Roosevelt</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5/6/18</u>
<u>Craig Amundson</u>	<u>Craig Amundson</u>	<u>518 Shaddock St.</u>	<input checked="" type="checkbox"/> Town of <u>Medford</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5/8/18</u>
<u>Paul Finkler</u>	<u>Paul Finkler</u>	<u>42A Pine St</u>	<input checked="" type="checkbox"/> Town of <u>Medford</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5/8/18</u>
<u>Melissa Heinicke</u>	<u>Melissa Heinicke</u>	<u>207 Clark</u>	<input checked="" type="checkbox"/> Town of <u>Medford</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5/8/18</u>
<u>Mariya Miller</u>	<u>Mariya Miller</u>	<u>W6127 Buellien Ln</u>	<input checked="" type="checkbox"/> Town of <u>Medford</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5-8-18</u>
<u>Mary Wasylyk</u>	<u>Mary Wasylyk</u>	<u>W131 99 South St</u>	<input checked="" type="checkbox"/> Town of <u>Lablin</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5-10-18</u>
<u>Harry Stehle</u>	<u>Harry Stehle</u>	<u>1309 O.H.F</u>	<input checked="" type="checkbox"/> Town of <u>Lablin</u> <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<u>5-10-18</u>

**CERTIFICATION OF CIRCULATOR**

I, Richard Palcher certify: I reside at W13276 South Street Lablin, WI

(Name of circulator)

(Circulator's residential address - Include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

5-10-18

Richard Palcher

(Date)

(Signature of circulator)

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no aliases may be used.

**Richard Palcher**

Candidate's residential address (required) *Sto P.O. Box addresses*  
Street, fire, or rural route number; box number (if rural route); and name of street or road

013276 South Street

Candidate's municipality for voting purposes (required).

LaBlin

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required) **WI** Zip code **54147**

Type of election (required)  
 general  
 special

General Election date (required) *Mo/Da/Year*  
**11/6/2018**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

Title of office (required)

**WI State Senate**

District or jurisdiction (required if applicable)  
 District number **21**  
 Jurisdiction (county)

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) <small>(Rural address must also include box or fire no)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes</small>	Date of Signing <small>Mo/Da/Year</small>
<i>Mathyn Stroganik</i>	Kathryn Sroczynski	1600 Wertzburg Rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Johnson</b>	5-30-18
<i>Debbie E. Stoban</i>	Sally Stoban	1114 Alice	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Bothschild</b>	5-30-18
<i>Debra Jones</i>	Melissa Jones	1216 Washington St	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Mausel</b>	5-30-18
<i>Deborah Jones</i>	Deborah Jones	959 Stonebridge Rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Kronewetter</b>	5-14-18
<i>Alicia Jones</i>	Alicia Jones	959 Stonebridge Rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Kronewetter</b>	5-30-18
<i>Karla Russow</i>	Karla Russow	122 S Lincoln St	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Stetsonville</b>	5-30-18
<i>Bette Frmacher</i>	Bette Frmacher	1308 Francis	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Stetsonville</b>	5-30-18
<i>Ron Zuleger</i>	Ron Zuleger	1425 Lincoln	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Stetsonville</b>	5-30-18
<i>Greg Spallone</i>	GERI SPANBAUER	2048 Lincoln	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Stetsonville</b>	5-30-18
<i>James Schnabel</i>	James Schnabel	215 S. Lincoln	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Stetsonville</b>	5-30-18

**CERTIFICATION OF CIRCULATOR**

I, the undersigned, certify that I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

Name of circulator **Richard Palcher** Municipality **LaBlin**  
Residential address - include number, street, and municipality  
I reside at **2013276 South Street**

15-3A-18

R. D. N. D. N. N.



**NOMINATION PAPER FOR PARTISAN OFFICE**

10

Candidate's name (required): no titles may be used.  
**Richard Falcher**

Candidate's residential address (required) *No P.O. Box addresses*  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
**Lablin**

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)  
**WI State Senate**

State (required)  
**WI**

Zip code  
**54447**

District or jurisdiction (required if applicable)  
 District number **51**  
 Jurisdiction (county)

Type of election (required)  
 general  
 special

General Election date (required) *Mo/Da/Year*  
**11/6/2018**

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) <small>(Rural address must also include box or fire no)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes</small>	Date of Signing <small>Mo/Da/Year</small>
<i>[Signature]</i>	John W. Paul	912 South Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5-19-18
<i>[Signature]</i>	Joyce Gilbertson	906 S. 8th Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5-19-18
<i>[Signature]</i>	Stanford Gilbertson	906 S. 8th Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5-19-18
<i>[Signature]</i>	Dorota A. Nietert	713 Sherman St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/19/18
<i>[Signature]</i>	Chris Buford	925 S. 4th Ave.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/19/18
<i>[Signature]</i>	Megan Bickford	925 S 8th Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/19/18
<i>[Signature]</i>	Wendy R. Kins	889 S 8th Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5-19-18
<i>[Signature]</i>	Charles R. Howe	4954 N. Isaac Rd P.O. Box 246	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/20/18
<i>[Signature]</i>	Robert J. Manning	905 E. Tulip Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/20/18
<i>[Signature]</i>	Rich Weitzel	1531 Cedar Hedge Rd. Edger, WI 54416	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	5/20/18

**Richard Falcher** certifies: I reside at **W13276 South Street Lablin**

(Name of circulator) (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

**Richard Falcher**

(Name)  
**5-20-18**

Page No. **15**

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.

**Richard Pulcher**

Candidate's residential address (required) No P.O. box addresses

Street, fire, or rural route number, box number (if rural route), and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).

Town of  
 Village of  
 City of  
**Leblin**

(name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required) Zip code  
**WI 54447**

Type of election (required)  
 general  
 special

General Election date (required) Mo/Da/Year  
**11/6/2018**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

Title of office (required)

**WI State Senate**

District or Jurisdiction (required if applicable)  
 District number  
 Jurisdiction (county)

Name of jurisdiction or district in which candidate seeks office (required)

**Senate District 29**

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Da/Year
<i>[Signature]</i>	<b>HARRY WILGNER</b>	<b>PA 818 1/2 Ambler</b>	<input checked="" type="checkbox"/> Town of <b>Rosevelt</b>	<b>Apr 29/18</b>
<i>[Signature]</i>	<b>TIM USTIANOWSKI</b>	<b>W13520 Shiner Dr</b>	<input checked="" type="checkbox"/> Town of <b>Rosevelt</b>	<b>4/29/18</b>
<i>[Signature]</i>	<b>Daniel B Hamrick</b>	<b>W13620 Shiner Dr</b>	<input checked="" type="checkbox"/> Village of <b>Rosevelt</b>	<b>4/29/18</b>
<i>[Signature]</i>	<b>Jerry M. Kolve</b>	<b>W13283-50 St</b>	<input checked="" type="checkbox"/> Town of <b>Leblin</b>	<b>4/29/18</b>
<i>[Signature]</i>	<b>LEIGH E. SAHVAL</b>	<b>W1580 City Rd E</b>	<input checked="" type="checkbox"/> Town of <b>Rosevelt</b>	<b>4/30/18</b>
<i>[Signature]</i>	<b>Laura Hendricks</b>	<b>505 W. Walnut St.</b>	<input checked="" type="checkbox"/> Town of <b>Gilman</b>	<b>4/30/18</b>
<i>[Signature]</i>	<b>TRENE KONSSELLA</b>	<b>726 EAST MAIN ST</b>	<input checked="" type="checkbox"/> Town of <b>Gilman</b>	<b>4/30-18</b>
<i>[Signature]</i>	<b>RONALD KONSSELLA</b>	<b>725 EAST MAIN ST</b>	<input checked="" type="checkbox"/> Village of <b>GILMAN WI</b>	<b>4:30-18</b>
<i>[Signature]</i>	<b>Mick Keepers</b>	<b>115 South 4th Ave</b>	<input checked="" type="checkbox"/> Village of <b>Gilman</b>	<b>4-30-18</b>
<i>[Signature]</i>	<b>HELEN WACHSMUTH</b>	<b>165 EDVALLIN AVE</b>	<input checked="" type="checkbox"/> Town of <b>GILMAN</b>	<b>4,30-18</b>

**CERTIFICATION OF CIRCULATOR**

I, **Richard Pulcher** (Name of circulator) certify: I reside at **W13276 South Street, Leblin** (Circulator's residential address - includes number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

**NOMINATION PAPER FOR PARTISAN OFFICE**

18

Candidate's name (required); no titles may be used. <b>Richard Pulcher</b>		Candidate's residential address (required) No P.O. box addresses Street, fire, or rural route number, box number (if rural route); and name of street or road <b>W13276 South Street</b>		Candidate's municipality for voting purposes (required). <input type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Lublin</b>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <b>WI</b>	Zip code <b>54147</b>	Type of election (required) <input checked="" type="checkbox"/> general <input type="checkbox"/> special	General Election date (required) Mo/Dav/Year <b>11/6/2018</b>
Title of office (required) <b>WI State Senate</b>		District or Jurisdiction (required if applicable) <input checked="" type="checkbox"/> District number <b>39</b> <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office (required) <b>Senate District 29</b>	
1. the undersigned, request that the candidate, whose name and residential 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 <input type="checkbox"/> him or <input type="checkbox"/> 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Dav/Year	
1. <i>Waldo B. Asp</i>	Waldo B. Asp	16831 W Rainwater Road	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Argente</b>	4/27/18	
2. <i>Kevin Roberts</i>	Kevin Roberts	11111 St. RD 73	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>TASF</b>	4/28/18	
3. <i>Richard Pancyrz</i>	Richard Pancyrz	1220 Railroad Street	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4/29/18	
4. <i>Wilfred Niznik</i>	Wilfred Niznik	13323 South Street	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>LUBLIN</b>	4/29/18	
5. <i>William T. Niznik</i>	William T. Niznik	1263 W. Railroad	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4/29/18	
6. <i>Pamela J. Ewer</i>	Pamela J. Ewer	1263 W. Railroad	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4/29/18	
7. <i>Rita Niznik</i>	Rita Niznik	113365 Warsaw St.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4/29/18	
8. <i>Michael Thomas</i>	Michael Thomas	11224 Duvich St	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4/29/18	
9. <i>Danny L. Barnell</i>	Danny L. Barnell	111234 Church St	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4/29/18	
10. <i>Rachel Boie</i>	Rachel Boie	111241 Church St Apt 2	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <b>Lublin</b>	4-29-18	

1. Richard Pulcher certify: I reside at W13276 South Street Lublin  
(Name of circulator) (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

4-29-18 Richard Pulcher  
(Date) (Signature of circulator)



**NOMINATION PAPER FOR PARTISAN OFFICE**

10

Candidate's name (required): no titles may be used.  
**Richard Falcher**

Candidate's residential address (required) No P.O. Box addresses  
 Street, fire, or rural route number; box number (if rural route); and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
**Lublin**

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)  
**State Senate**

State (required)  
**WI**

Zip code  
**54447**

District or Jurisdiction (required if applicable)  
 District number **29**  
 Jurisdiction (county)

Type of election (required)  
 general  
 special

General Election date (required) Mo/Da/Year  
**11/6/2018**

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

(name of municipality)

I, the undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Da/Year
<i>Sue King</i>	Sue King	W19995 Parkstown Ave	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Thornel</b>	5/18/18
<i>Peg Stalheime</i>	Peg Stalheime	N2207 Cardinal Ave	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Little Blain</b>	5/16/18
<i>Richard Karlén</i>	Richard Karlén	N539 City Rd A	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Maplehurst</b>	5-17-18
<i>Robert Loveland</i>	ROBERT LOVELAND	W1102 WILDIRE RD	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>MAPLEHURST</b>	5-17-18
<i>Catherine Loveland</i>	Catherine Loveland	W1101 Middle Rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Maplehurst</b>	5/17/18
<i>GREG MURPHY</i>	GREG MURPHY	N1145 CLAY DR,	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>MAPLEHURST</b>	5-17-18
<i>Otho C. Wlk</i>	Otho C. Wlk	W11781 CITY A	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Maplehurst</b>	5-17-18
<i>Allen Moffitt</i>	Allen Moffitt	N1185 11th AVE	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Rosvelt</b>	5.17.18
<i>Carrie Moffitt</i>	Carrie Moffitt	N1185 11th Aven	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Rosvelt</b>	5-17-18
<i>Joyce Zachow</i>	Joyce Zachow	N342 CITY-T	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <b>Maplehurst</b>	5-17-18

**CERTIFICATION OF CIRCULATOR**  
 I, Richard Falcher certify: I reside at W13276 South Street Lublin, WI  
 (Name of circulator) (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this nomination paper and selector 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).

Richard Falcher  
 (Signature of circulator)

5-17-18  
 (Date)

Page No. 29

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.  
**Richard Pulcher**

Candidate's residential address (required) *No P.O. Box addresses*  
 Street, fire, or rural route number, box number (if rural route); and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
 Town of **Lablin**  
 Village of **Lablin**  
 City of

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)  
 State (required) **WI** Zip code **54147**  
 District or jurisdiction (required if applicable)  
 District number **29**  
 Jurisdiction (county)

General Election date (required) *Mo/DaY/Year*  
**11/6/2018**

Name of jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

(Required) Name of Party or Statement of Principle  
**Democrat**

Title of office (required)  
**WI State Senate**

The undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) <i>(Rural address must also include box or fire no)</i>	Municipality of Residence <i>Check the type and write the name of your municipality for voting purposes</i>	Date of Signing <i>Mo/DaY/Year</i>
1. <i>Cedron 2 wv</i>	<b>Audrey L Nabo</b>	<b>933 S 9th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5-19-18</b>
2. <i>Jesse Nels</i>	<b>Jesse Nels</b>	<b>933 South 9th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5/19/18</b>
3. <i>DiAnne Smith</i>	<b>DiAnne Smith</b>	<b>802 S 9th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5/19/18</b>
4. <i>Amanda Smith</i>	<b>Amanda Smith</b>	<b>802 S Roserwald</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5/19/18</b>
5. <i>Steve Wotruba</i>	<b>STEVE WOTRUBA</b>	<b>5662 CRESTWOOD DR #2</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Schopico</b>	<b>5/19/18</b>
6. <i>Brenda Hedgley</i>	<b>Brenda Hedgley</b>	<b>938 S 9th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5/19-18</b>
7. <i>Jean Guilbault</i>	<b>Jean Guilbault</b>	<b>938 S 8th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5-19-18</b>
8. <i>Mary Bie</i>	<b>MARY BIE</b>	<b>924 S 8th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5-19-18</b>
9. <i>Jason Keivlis</i>	<b>Jason Keivlis</b>	<b>918 S. 8th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5-19-18</b>
10. <i>Wissia Keivlis</i>	<b>Wissia Keivlis</b>	<b>918 S. 8th Ave</b>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <b>Wausau</b>	<b>5.19.18</b>

**CERTIFICATION OF CIRCULATOR**  
 I certify: I reside at **W13276 South Street, Lablin**  
 (Circulator's residential address - include number, street and municipality)

Signature of circulator: **Richard Pulcher**

Signature of candidate: **Richard Pulcher**

Page No. **32**

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used.  
Richard Palcher

Candidate's residential address (required) *No P.O. box addresses*  
 Street, fire, or rural route number, box number (if rural route), and name of street or road  
W13276 South Street

Candidate's municipality for voting purposes (required).  
 Town of  
 Village of  
 City of  
Lablin

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)  
 State (required) WI Zip code 54147

Type of election (required)  
 general  
 special

General Election date (required) Mo/Da/Year  
11/6/2018

(Required) Name of Party or Statement of Principle (5 words or less)  
Democrat

Title of office (required)  
WI State Senate

District or Jurisdiction (required if applicable)  
 District number 29  
 Jurisdiction (county)

Name of jurisdiction or district in which candidate seeks office (required)  
Senate District 29

The undersigned, request that the candidate, whose name and residential 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 for 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Da/Year
<u>Lawrence Zegers</u>	<u>Patricia Zegers</u>	<u>31 met</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madford</u>	<u>5-24-18</u>
<u>Karen Staples</u>	<u>Karen Staples</u>	<u>South St. Madford</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madford</u>	<u>5-24-18</u>
<u>Michael Ryskiewicz</u>	<u>Mike Ryskiewicz</u>	<u>321 WCT</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madford</u>	<u>5-24-18</u>
<u>Heidi Schulz-Tomas</u>	<u>Heidi Schulz-Tomas</u>	<u>34 WCT Madford</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madford</u>	<u>5-24-18</u>
<u>James S. Hartman</u>	<u>James S. Hartman</u>	<u>208 Duennow</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Atkins</u>	<u>5-24-18</u>
<u>Judith Hartman</u>	<u>Judith Hartman</u>	<u>208 Duennow</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Atkins</u>	<u>5-24-18</u>
<u>Samantha Duer</u>	<u>Samantha Duer</u>	<u>204 Jensen</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Atkins</u>	<u>5-24-18</u>
<u>Benoit Kottko</u>	<u>Benoit Kottko</u>	<u>505 Alfred</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Atkins</u>	<u>5-24-18</u>
<u>Roger Miller</u>	<u>Roger Miller</u>	<u>1904 7th Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Roseton 14</u>	<u>5-24-18</u>
<u>Rose Anne Miller</u>	<u>Rose Anne Miller</u>	<u>1904 7th Ave</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Roseton 14</u>	<u>5-25-18</u>

**CERTIFICATION OF CIRCULATOR**  
 certify: I reside at W13276 South Street Lablin  
 (Circulator's residential address - include number, street, and municipality)

further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

Richard Palcher  
 (Signature of Circulator)

5-25-18  
 (Date)

Page No. 28

**NOMINATION PAPER FOR PARTISAN OFFICE**

Candidate's name (required); no titles may be used: **Richard Palcher**

Candidate's residential address (required) (No P.O. Box addresses):  
 Street, fire, or rural route number; box number (if rural route); and name of street or road:  
**W13276 South Street**

Candidate's municipality for voting purposes (required):  
 Town of **Lublin**  
 Village of  
 City of

Candidate's mailing address (required) for mailing purposes (required if different than residential address or voting municipality):

State (required): **WI** Zip code: **54447**

District or Jurisdiction (required if applicable):  
 District number **29**  
 Jurisdiction (county)

Type of election (required):  
 General  
 Special

General Election date (required) (Mo./Day/Year): **11/6/2018**

(required) Name of Party or Statement of Principle (5 words or less): **Democrat**

Name of jurisdiction or district in which candidate seeks office (required):  
**Senate District 29**

Title of office (required): **State Senate**

Name of jurisdiction or district in which candidate seeks office (required):  
**Senate District 29**

**The undersigned, request that the candidate, whose name and residential 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo./Day/Year
<i>Robert D. Smith</i>	ROBERT D. SMITH	18845 CTH C R. 232, LAKE WISCONSIN	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/4/18
<i>Michael T. Weidman</i>	Michael T. Weidman	5072 W. SLOVER RD WISCONSIN	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>Brad Polzin</i>	Brad Polzin	2850	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>Michael J. Artese</i>	Michael J. Artese	5325 W. POND LAKE RD	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>Sarah Kester</i>	Sarah Kester	805 Park Ave	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>Donna Thompson - Bechard</i>	Donna Thompson - Bechard	8985N Bonnar Ln, Hayward	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>Michael O'Mara</i>	Michael O'Mara	6474 W Canestop Road,	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>Jean Sural ski</i>	Jean Sural ski	W6389 Lake Winter Rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>Bill Barnaby</i>	BILL BARNABY	5928N HWY RD W	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/5/18
<i>William Steadish</i>	WILLIAM STEADISH	250 E MAIN ST 250 E MAIN ST	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	5/4/18

1. *Richard Palcher* (Name of circulator)  
 certify: I reside at **W13276 South Street Lublin, WI** (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. 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).

*Richard Palcher* (Signature of circulator)

5-14-18 (Date)

Page No. **41**

**NOMINATION PAPER FOR PARTISAN OFFICE**

10

Candidate's name (required); no titles may be used.  
**Richard Palcher**

Candidate's residential address (required) *No P.O. box addresses*  
 Street, fire, or rural route number; box number (if rural route); and name of street or road  
**W13276 South Street**

Candidate's municipality for voting purposes (required).  
 Town of  
 Village of  
 City of  
**Lablin**

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required) **WI** Zip code **54447**

General Election date (required) Mo/Day/Year **11/6/2018**

(Required) Name of Party or Statement of Principle (5 words or less)  
**Democrat**

Title of office (required)  
**WI State Senate**

District or Jurisdiction (required if applicable)  
 District number **29**  
 Jurisdiction (county) \_\_\_\_\_

Name of Jurisdiction or district in which candidate seeks office (required)  
**Senate District 29**

The undersigned, request that the candidate, whose name and residential 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 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes	Date of Signing Mo/Day/Year
1. <i>[Signature]</i>	LYRRIE BERBER	W14537 Apple Rd, 23	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Ford</b>	5-10-18
2. <i>[Signature]</i>	JUSTINE BRATSVEN	W14074 OTTENS	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Ford</b>	5-10-18
3. <i>[Signature]</i>	Jacob Bratsven	W14074 COURT RD	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Ford</b>	5-10-18
4. <i>[Signature]</i>	Meghan Warwick	601 LAKE AVE E	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Rusk</b>	5-10-18
5. <i>[Signature]</i>	John Norquist	500 LAKE ST.	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Riblake</b>	5-14-18
6. <i>[Signature]</i>	John Miller	504 Lake St	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Riblake</b>	5-14-18
7. <i>[Signature]</i>	Mel Leggett	1101 Railroad St apt 1	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Riblake</b>	5-14-18
8. <i>[Signature]</i>	Diana Zamarrino	1101 Railroad St apt 1	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Riblake</b>	5-14-18
9. <i>[Signature]</i>	David Brandner	1101 Railroad St Apt 2	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Riblake</b>	5-14-18
10. <i>[Signature]</i>	David Glantz	1101 Railroad St. Apt 5	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <b>Riblake</b>	5-14-18

**CERTIFICATION OF CIRCULATOR**

I certify: I reside at **W13276 South Street Lablin**

(Circulator's residential address - include number, street, and municipality)

Richard Palcher  
 (Name of circulator)

Further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally recited 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 at each person signed 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).

**Richard Palcher**  
 (Signature of circulator)

**5-14-18**  
 (Date)

Page No. **113**