

# Official Ballot

## Nonpartisan Office and Referendum

### April 4, 2023

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

General Instructions	County	Municipal (cont.)
<p>If you make a mistake on your ballot or have a question, ask an election inspector for help (absentee voters: contact your municipal clerk).</p> <p>To vote for a name on the ballot, fill in the oval next to the name like this: <input type="radio"/></p> <p>To vote for a name that is not on the ballot, write the name on the line marked "write-in" and fill in the oval next to the name like this: <input type="radio"/></p>	<b>County Supervisor</b> <b>District ____</b> <b>Vote for 1</b>	<b>Town Clerk</b> <b>Vote for 1</b>
	<input type="radio"/> Candidate	<input type="radio"/> Candidate
	<input type="radio"/> Candidate	<input type="radio"/> Candidate
	<input type="radio"/> write-in:	<input type="radio"/> write-in:
Judicial	Municipal	<b>Town Treasurer</b> <b>Vote for 1</b>
<b>Justice of the Supreme Court</b> <b>Vote for 1</b>	<b>Town Board Chairperson</b> <b>Vote for 1</b>	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> write-in:
<input type="radio"/> write-in:	<input type="radio"/> write-in:	<b>Town Assessor</b> <b>Vote for 1</b>
<b>Court of Appeals Judge</b> <b>District ____</b> <b>Vote for 1</b>	<b>Town Board Supervisor</b> <b>Vote for not more than...</b>	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> write-in:
<input type="radio"/> write-in:	<input type="radio"/> Candidate	<b>Municipal Judge</b> <b>Vote for 1</b>
<b>Circuit Court Judge</b> <b>District ____</b> <b>Vote for 1</b>	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> write-in:	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> write-in:	<input type="radio"/> write-in:
<input type="radio"/> write-in:		
Continue voting at top of next column.	Continue voting at top of next column.	Continue voting on back of ballot.

Sanitary District		Referendum		Official Ballot Nonpartisan Office and Referendum April 4, 2023 for	
<b>Sanitary District Commissioner Vote for 1</b>		To vote in favor of a question, fill in the oval next to "Yes," like this: <input type="radio"/>			
<input type="radio"/> Candidate		To vote against a question, fill in the oval next to "No," like this: <input type="radio"/>			
<input type="radio"/> Candidate		<b>Level of government conducting referendum (State, tech college, county, municipal, school district)</b>		_____	
<input type="radio"/> write-in:				Municipality and ward number(s)	
<b>School District</b>		Question (number if necessary)		<b>Ballot issued by</b>	
<b>Name of School District (optional) School Board Member Vote for not more than...</b>		Shall the...?		_____	
<input type="radio"/> Yes				_____	
<input type="radio"/> No				Initials of election inspectors	
<input type="radio"/> Candidate				<b>Absentee ballot issued by</b>	
<input type="radio"/> Candidate				_____	
<input type="radio"/> Candidate				Initials of Municipal Clerk or Deputy Clerk	
<input type="radio"/> Candidate				_____	
<input type="radio"/> write-in:				If issued by SVDs, both must initial	
<input type="radio"/> write-in:				<b>Certification of Voter Assistance</b>	
				I certify that I marked or read aloud this ballot at the request and direction of a voter who is authorized under Wis. Stat. §6.82 to receive assistance.	
				_____	
		Signature of assistor			
		<b>For Official Use Only</b>			
		<b>Inspectors:</b> Identify ballots required to be remade:			
		<input type="checkbox"/> Overvoted <input type="checkbox"/> Damaged <input type="checkbox"/> Other			
		If this is the <b>Original Ballot</b> , write the serial number here:	If this is the <b>Duplicate Ballot</b> , write the serial number here:		
		_____	_____		
<b>Continue voting at top of next column.</b>				_____	
				Initials of inspectors who remade ballot	