The Wisconsin Election Commission

__ We, the undersigned qualified electors of the ___Assembly District 63

(jurisdiction or district of officeholder)

(official with whom nomination	on papers or declaration of candidacy for the office is filed)		-	istrict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Secti	on 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes.
	(name of officeholder to be recalled and office)	STATEMENT OF REASON FOR RECALL		
The reason for recall must be stated on petitions	for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officeholder	er. No statement of reason is required to initiate the recal	l of state, congressional,
epislative, judicial, or county officials.)		trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
		r his own constiuents by calling them "whack-jobs, morons, and idiots."		
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3.	RUHA RO BROCKMAN	35307 Washington Ale	F-Village Cochester	5-26-24
4. M. Dung	Carus Brockers	35307 Washington Ave	Town Tavillage RON Works	5/21/21/21
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	¥	Certification of Circulator	a city	
Linda C. Peterson	certify: I	reside at 109 N. Browns Lake Dr.	Burlington WI 5310	55
			(circulator's residence - ulclude number, street, and municipality)	
the signatures on this paper. I know that the signe	ers are electors of the jurisdiction or district represented	were a resident of this state, would not be disqualified from voting unde I by the officeholder named in this petition. I know that each person sig	gned the paper with full knowledge of its content on the dat	e indicated opposite his or her
name. I know their respective residences given.	I support this recall petition. I am aware that falsifying	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 1101
May 27, 2024		ure of circulator)		
L-170 (Rev.2019-09) The information on this form is requi	ired by Wis Stats §§ 8.40 and 9.10. This form is prescribed by th	e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2	266-8005 [web: http://elections.wi.gov email: elections@wi.gov	

		RECALLIE	Leatons of the Assembly District 63	
TO: The Wisconsin Election Commission		. We, the undersigned qualified e	(jurisdiction or	district of officeholder)
(official with whom nomin	ation papers or declaration of candidacy for the office is filed)			
	Robin Vos	from office pursuant to Article XIII, Se	ction 12 of the Wisconsin Constitution and §.9.1	o or the wisconsin summer
etition for the recall of	(name of officeholder to be recalled and office)	TO THE PERSON TO PROPERTY.		
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Robin Vos should be recalled for his tacit suppo	ort of the Chinese Communist Party (CCP), acceptance of	of trips from the CCP, failure to protect Wisconsin farmland from the CCF		
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Linda C. Pete	rsin, certif	y: I reside at 109 N Brown's Lake Dr.	1 Low street and municipality	
(1 TYPE CALL C C O2 I porgonally circulated this recall De	etition and personally obtained each
further certify I am either a qualified elector	of Wisconsin, or a U.S. citizen, age 18 or older who, 11	If were a resident of this state, would not be disqualified from voting to the officeholder named in this petition. I know that each person	n signed the paper with full knowledge of its content on the	e date indicated opposite his or her
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11/14 25 2024	Linda C. P.s	elersor		
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L-170 (Rev 2014-09) The information on this form is	required by Wis Stats §§ 8.40 and 9.10. This form is prescribed by	gnature of circulator) by the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984		
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•	(name of officeholder to be recalled and office).	STATEMENT OF REASON FOR RECALL	No determine of reason is required to initiate the recal	l of state, congressional.
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lack of committment to election integrity, blocking	g lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots.	" OF DESIDENCE M	HET AL WAVE BE LISTED
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13 - 11 11 - 11/11/19	Kevin Schmidt	03 TO THAT INET DE	Town	
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		Certification of Circulator	7110 H J 40 77840	
1, Daniel Roumba	certify:	I reside at 877 Palvate Road	(circulator's residence - include number, street, and municipality)	
(name of circulator)			under Wie Stat \$ 6.03. I personally circulated this recall petiti	on and personally obtained each
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 disquarried from voting of	on signed the paper with full knowledge of its content on the da	te indicated opposite his or her
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RECALL PETITION . We, the undersigned qualified electors of the Assembly District 63

(jurisdiction or district of officeholder)

The Wisconsin Election Commission

(official with whom nomination papers or declaration of candidacy for the office is filed)

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		his own constiuents by calling them "whack-jobs, morons, and idiots,"			
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SIGNATURES OF ELECTORS	THE THE PARTY OF T	Rural address must also include box or fire no.	□ Town	indicate rown, city, or vinage	/ /
1. Grotin Rennes	Justin Renner	209 EMarket Street 109	□ Village	Burlington	5/19/24
2. Tens who	Temy WhITD	956-Redar dr.	☐ Town☐ Village☐ City	Burlagton	5/15/ZU
3. Vall Se 20.	Vathy Galgano	1200 daston C+ #K	☐ Town☐ Village☐ City	PUK cinstolic	5/8/202
4.	A la Della	2573 Stoneson Ka	☐ Town☐ Village☐ City	Burlinder	3/18/24
And The will	Fucuen near	# 110	□ Town	3 00	1 101
5. (h4/12v=)	Christopher Buss	753 milwarkee Are Burlington WI	☐ Village ☐ City	Durlington	5-18-24
"Owne & Buss	Anna K BUSS	733 milwarkee Ave Burligton Wit	□ Village □ City	Bullington	5-18-24
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201 20 20 20 20	**************************************	Certification of Circulator	110	Hartman AR 7284	117
1. Paniel Roumba	certify:	reside at 877 Private Road 2	(circulator	's residence - include number, street, and municipality)	
(name of circulator)	TEC. III. 10 and 10 and 14 and 15 a	were a resident of this state, would not be disqualified from voting under	Wis Stat. 8	6.03. I personally circulated this recall petition	and personally obtained each of
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5-18- 2024		ure of circulator)			
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		Certification of Circulator	17220 Hartman 497	5000
I Daniel Roumbo	certify: I	reside at 8 / / Parkate OCOAL	(circulator's residence - include number, street, and municipality)	20 70
(name of circulator)		were a resident of this state, would not be disqualified from voting under	Wis Stat 8 6.03. I personally circulated this recall petition	and personally obtained each
I further certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age 18 or older who, it is	by the officeholder named in this petition. I know that each person sign	ned the paper with full knowledge of its content on the date	indicated opposite his or her
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5-19-2024	So Company	are of circulator)		
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RECALL PETITION _ We, the undersigned qualified electors of the ___Assembly District 63

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from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

The Wisconsin Election Commission

(official with whom nomination papers or declaration of candidacy for the office is filed)

Robin Vos

petition for the recall of	Robin Vos	irom office pursuant to Afficie Affi, section	ii iz vi iiie viiseellelli a alla	
	(name of officeholder to be recalled and office)	TATEMENT OF REASON FOR RECALL		
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	PRINTED NAME OF ELECTORS		MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	SIGNING
SIGNATURES OF ELECTORS	PRINTED NAME OF EDDETONS	Rural address must also include box or fire no	D Town	
1. Kelly	kyte Kellogg	437 Valley View Rd	15 city Critico City	5/20/2024
2. C On 1 1	Tracy Opel	4137 Valley View Rd	Brown Chenga City	5 12012021
3.	O De la	1208 JOST UM	o Village Offine Coll	5/20/2024
1 Paris	1 DO TOTAL	NO BAILER ST 5	Town Village	5/20/201
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5. James Creussian	Nancy Creuziger	180 BridgeSt 312	city Curling on	5/20/20094
6. Bin Whilling	Brian Whitesin	216 W. State St.	orting for	5-20-24
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CROST	three	Certification of Circulator	w wasthwork () [200] [
I. CHUS	, certify:	I reside at 4536 46TH / 1.	(include number street and municipality)	. 70
(name of circulator) I further certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age 18 or older who,	were a resident of this state, would not be disqualified from voting under day the officeholder named in this petition. I know that each person sign	The Case S 6 03. I personally circulated this recall netition	and personally obtained each of indicated opposite his or her
		gethis certification is punishable under § 12.13(3)(a), Wis. Stats.	• •	
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EL-170 (Rev 2019-09) The information on this form is requ	ired by Wis. Stats §§ 8 40 and 9.10. This form is prescribed by the	ture of circulatory he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2	So soos proses	

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4. Comboloul	Chrother Red	2101 Prunk P/ #102	Dity Mr. Pleasant	5/12/24	
5. banne him	Johning Gland	5989 margery OF10S	Town Noont Pessant	5/17/24	
6. Solai o Zaragozan	Service Zarageza.	5915 Margery Dr. #103	Holis Mt. Megsavit, Wi.	5/17/24.	
7. Kelvin Perex	Kelum Perer	1022 three are	Town Pleasart	5/17/24	
8 mice multedial	milie hankedan)	HOA HOR'S CUM	Town Mt. pleasant	5117/24	
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10. Lucy Hour	tween hory	3331 Monarch Dr	Divillage Bactra	3/11/24	
Certification of Circulator Control WI 54950 certify: I reside at 1950 LACE St. Well with WI 54950					
	Wisconsin, or a U.S. citizen, age 18 or older who, if I very are electors of the jurisdiction or district represented	were a resident of this state, would not be disqualified from voting under	(circulator's residence - include number, street, and number patity) Wis, Stat. § 6,03. I personally circulated this recall petition and the paper with full knowledge of its content on the date it.	and personally obtained each of indicated opposite his or her	
name. I know their respective residences given.	I support this recall petition. I am aware that falsifying	g this cartification is punishable under § 12 1.1(3)(2) Wis. Stats.		Page No. 1107	
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TO: The Wisconsin Election Commission		. We, the undersigned qualified e	lectors of the Assembly District 63 (jurisdiction or district	rict of officeholder)
(official with whom nominati	ion papers or declaration of candidacy for the office is filed)			
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EL 170 (Rev 2019-09) The information on this form is rec	juired by Wis Stats §§ 8 40 and 9.10. This form is prescribed by	the Wisconsin Elections Commission P.O. Box 2084, Madison, WI 53707-7984 6	08-206-8005 web: http://electrons.wi.gov email: electrons@wi.gov	
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We, the undersigned qualified electors of the Assembly District 63

The Wisconsin Election Commission

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petition for the recall of	Robin Vos	from office pursuant to Article XIII, Sectio	on 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.		
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5/19/14	1 /1/6/			Page No. 1110		

EL-170 (Rev 2019-09) The information on this form is required by Wis Stats §§ 8 40 and 9 10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://clections.wiv.gov | email: elections@wiv.gov

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The Wisconsin Election Commission

petition for the recall of _____

(official with whom nomination papers or declaration of candidacy for the office is filed)

Robin Vos

(name of officeholder to be recalled and office)

RECALL PETITION We, the undersigned qualified electors of the Assembly District 63

STATEMENT OF REASON FOR RECALL

(jurisdiction or district of officeholder)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes,

of committment to election integrity, blocking	lower prescription drug costs, and hagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots." IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MUS	ST ALWAYS BE LISTED.
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TO: The Wisconsin Election Commission	ers or declaration of candidacy for the office is filed)	we, the undersigned quantica elect	(jurisdiction or distr	ict of officeholder)	
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/(date)	(signature	of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	66-8005 lweb; http://elections.wi.gov email: elections@wi.gov		

RECALL PETITION . We, the undersigned qualified electors of the _____ Assembly District 63

(jurisdiction or district of officeholder)

The Wisconsin Election Commission

10. The Wisconsin Electron Commission	on papers or declaration of candidacy for the office is filed)		· ·	district of officerolder)
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RECALL PETITION We, the undersigned qualified electors of the Assembly District 63

(jurisdiction or district of officeholder)

The Wisconsin Election Commission

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the cignotures on this paper. I know that the sign	ners are electors of the intisdiction or district represente	d by the officenoider named in this petition. I know that each perso	on signed the paper with full knowledge of its content on the	date indicated opposite his or her
name. I know their respective residences given	I support this recall petition. I am aware that falsifying	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		
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(date)	without by Win State SS 9 40 and 9 10. This form is prescribed by the	he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984	608-266-8005 web: http://elections.wi.gov. email:elections@wi.gov	

		RECALLIETTION	- Cal - Accomply District 63	
TO: The Wisconsin Election Commission		We, the undersigned qualified elect	Ors of the Assembly District 63 (jurisdiction or district 63)	rict of officeholder)
(official with whom nominat	ion papers or declaration of candidacy for the office is filed)	C CC murrout to Article VIII Section	n 12 of the Wisconsin Constitution and §.9.10 of	
petition for the recall of	Robin Vos (name of officeholder to be recalled and office)	from office pursuant to Afficie Affi, Section	ii 12 of the Wilderichi Condition and 3	
	`	STATEMENT OF REASON FOR RECALL		n i i i i i i i i i i i i i i i i i i i
(The reason for recall must be stated on petitions	for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officeholder.	No statement of reason is required to initiate the recall of	of state, congressional,
t t t t t t t t t t t t t t t t t t t				
Robin Vos should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of	trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for	r his own constiuents by calling them "whack-jobs, morons, and idiots."		The second second
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(date)	(signa	iture of circulator)	66-8005 lweb: http://elections.wi.gov.lemail:elections@wi.gov	
EL-170 (Rev 2019-09) The information on this form is req	uired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by t	the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-20	oo ooo jiroo militaraanaa i	

		RECALL I ETITION		
TO: The Wisconsin Election Commission		We, the undersigned qualified elec	tors of the Assembly District 63	
(official with whom nominati	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distric	ct of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII. Section	in 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
	(name of officeholder to be recalled and office)	,,,	with the transmit committee and 315110 of	ine willedibili blatates.
	\$	STATEMENT OF REASON FOR RECALL		
(The reason for recall must be stated on petitions	for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officeholder	No statement of reason is required to initiate the recall of	state, congressional.
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the signatures on this paper. I know that the signe	rs are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person signed	ed the naper with full knowledge of its content on the date inc	d personally obtained each of licated opposite his or her
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EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://clcctions.wi.gov | email: elections@wi.gov

10: The Wisconsin Election Commission		we, the undersigned qualified elec	ctors of the Assembly District 63	
(official with whom nomin	nation papers or declaration of candidacy for the office is filed)		(jurisdiction or dis	strict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	of the Wisconsin Statutes.
	(name of officeholder to be recalled and office)			
		STATEMENT OF REASON FOR RECALL		
	ons for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officeholde	x. No statement of reason is required to initiate the recall	of state, congressional,
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I further certify I am either a qualified elector of	of Wisconsin, or a U.S. citizen, age 18 or older who, if I w	vere a resident of this state, would not be disqualified from voting under	(circulator's residence - include number, street, and municipality) Wis. Stat. 8 6.03. I personally circulated this recall petition.	and nersonally obtained each of
the signatures on this paper. I know that the signatures	gners are electors of the jurisdiction or district represented,	by the officeholder named in this petition. I know that each person sign this certification is punishable under § 12.13(3)(a), Wis. Stats.	ned the paper with full knowledge of its content on the date	indicated opposite his or her
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		THE PROPERTY OF THE PROPERTY O	Assembly District 63	
TO: The Wisconsin Election Commission		. We, the undersigned qualified elect	Ors of the Assembly District os (jurisdiction or distri	ict of officeholder)
(official with whom nomination	n papers or declaration of candidacy for the office is filed)			
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EL-170 (Rev 2019-09) The information on this form is requi	ired by Wis Stats §§ 8.40 and 9.10. This form is prescribed by th	e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2	66-8005 web: http://elections.wi.gov email: elections@wi.gov	
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TO: The Wisconsin Election Commission		We, the undersigned qualified elect	ors of the Assembly District 63		
(official with whom nomination papers or declaration of candidacy	for the office is filed)				
petition for the recall of Robin Vos (name of officeholder to be re	called and office)	from office pursuant to Article XIII, Section	n 12 of the Wisconsin Constitution and §.9.10 of	f the Wisconsin Statutes.	
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(The reason for recall must be stated on petitions for city, village, town, and school legislative, judicial, or county officials.)			No statement of reason is required to initiate the recall of	of state, congressional,	
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(name of circulator) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age	10 or older who if I ware a socider	at of this state, would not be disqualified from vertice under V	(circulator's residence - include number, street, and municipality)	and personally obtained each of	
the signatures on this paper. I know that the signers are electors of the jurisdiction	or district represented by the office	cholder named in this petition. I know that each person signe	ed the paper with full knowledge of its content on the date i	indicated opposite his or her	
name. I know their respective residences given. I support this recall petition. I at	n aware that falsifying this certifica	ation is nunishable under § 12.13(3)(a), Wis. Stats.			

Page No. 1119

(date) (signature of circulator)

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		W. d I will a developed aloast	ors of the Assembly District 63	
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(official with whom nomination	on papers or declaration of candidacy for the office is filed)			
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
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(name of circulator)			Wie Stat 8 6.03. I personally circulated this recall petition	and personally obtained each of
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5.11.29				
(date)	(signal	ture of circulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2	66-8005 web: http://elections.wi.gov email: elections@wi.gov	
EL-170 (Rev.2019-09) The information on this form is requ	ired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by the	THE WISCONSHI ELECTIONS COMMISSION 1 POR DON 7704, Manison, 117 99701 7704	SAME WAS A STORY	

RECALL PETITION We, the undersigned qualified electors of the Assembly District 63

STATEMENT OF REASON FOR RECALL

(jurisdiction or district of officeholder)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

The Wisconsin Election Commission

petition for the recall of

(official with whom nomination papers or declaration of candidacy for the office is filed)

(name of officeholder to be recalled and office).

	3	TATEMENT OF REASON FOR RECADE	No statement of reason is required to initiate the recall of	state, congressional,
		reason must be related to the official responsibilities of the officeholder.	110 Statement of reason to require to this to the	
legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support of	of the Chinese Communist Party (CCP), acceptance of tr	ips from the CCP, failure to protect Wisconsin farmland from the CCP,		
		his own constiuents by calling them "whack-jobs, morons, and idiots."		
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		SIREEI & NUMBER OF RURAL ROOTE		DATE OF SIGNING
SIGNATURES OF ELECTORS	PRINTED NAME OF ÉLECTORS	Rural address must also include box or fire no.	Indicate Town, City, or Village	- 0
1. Mahin John	John Taylor	7935 Whitstail DR.	O Village Mount Lleasons,	5-18:21
2. Afelle Lynne	Steller Rodry	3341 N. Palner St	O Village Mont Pleaseaf	5.18.24
3. L. 8	11215 SAIVTIAGE) 3 try N Pumy	Uvillage Mont Pleaslat	4-18-51
4.60	Elizabeth Jaway	2718 Village Green W.	Uvillage M+ Pleasount	5.18.24
5. Ash A Moder	Adam Maciejewski	437 county Road V	Prillage MT Pleasant	5.18.24
6. AMORIZ WACIECEAR	Amer Michelen	437 CWAY ROOD V	Drown Strivillage Drown Plesson	5.18.24
7. Was Mill	JUSTINACTO	833 Browns lake \$102	o vilage Pany ington	5/18/211
8. Vares Carte	Yoren Castel	31506 Brackrow	Unilage City	517.21
9. Lm. 7- ~	Canthia Manie	232 Bridge St. Apt 215	Uvillage Burlington	53/05 5-17-2
10. Sanda May	Danielle Moly	3/506 Bear Amor Dr 202	Ulliage Burlington	537-5500
Moira RXI	ands certify: I	reside at Certification of Circulator 5772	N 12th St Pheonix	(A 2502)
at a signature on this name. I know that the gions	are are electors of the jurisdiction or district represented	were a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person sign	(circulator's residence - include number, street, and municipality) Wis, Stat. § 6.03. I personally circulated this recall petition a ned the paper with full knowledge of its content on the date i	and personally obtained each of ndicated opposite his or her
name. I know their respective residences given.	I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 1121
	(signate ired by Wis. Stats. §§ 8 40 and 9.10. This form is prescribed by the	urc of circulator) e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	56-8005 web: http://elections.wi.gov email: elections@wi.gov	1



Page No. 1122

RECALL PETITION

TO: The Wisconsin Election Commission		We, the undersigned qualified elect	ors of the Assembly District 63		
	on papers or declaration of candidacy for the office is filed)		(jurisdiction or dist	rict of officeholder)	
petition for the recall of	Robin Vos	from office pursuant to Article XIII. Section	n 12 of the Wisconsin Constitution and §.9.10 of	f the Wisconsin Statutes.	
petition for the recail of	(name of officeholder to be recalled and office)	,			
STATEMENT OF REASON FOR RECALL					
(The reason for recall must be stated on petitions	(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional,				
logiclative judicial or county officials		14			
		rips from the CCP, failure to protect Wisconsin farmland from the CCP,			
		his own constiuents by calling them "whack-jobs, morons, and idiots."			
THE MUNICIPALITY USED FOR MAI	ILING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	ME OF THE MUNICIPALITY OF RESIDENCE MU	ST ALWAYS BE LISTED.	
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
SIGNATURES OF EDECTORS		Rural address must also include box or fire no	Town Town	DIGITAL /	
1. h. l	Joanna Pinkrah	2505 2 0 0	U Village	5/18/2024	
war pus	Joanna Findan	31505 Bear Arbor Dr.	city 10 Meening 000	1 1 1000	
2 11/7/1	Tracket D. B. V. DAD	31505 READ ARD By \$152	O Town O Village Rurlington	5/18/2024	
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37/2007	3 3/11/ 6 (-0)	2209 Brownstake DR	Ocity Burlington	5/18/2024	
Christ I who have	N / / I MA	00010 11.01	Town Village 2. I hat	5/18/24	
Mandro La Man	Hombre Le May	228/ Browns Lake Rd.	city Jar Majar W	5/18/24	
			Town	1 2 2 2 2	
5	Mayor Colvien	3110 Fischer Dr	ocity Durldaste wil	5-18-24	
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I Morrallou	nd certify: I	reside at 19872 N 18 -		12-2	
		are a resident of this state, would not be disqualified from voting under	(circulator's residence - include number, street, and municipality) Wis Stat 8.6.03 I personally circulated this recall netition	and nersonally obtained each of	
I further certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age 18 or older who, if I was also also to a fish invision or district represented	vere a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person sign	ed the paper with full knowledge of its content on the date	indicated opposite his or her	
the signatures on this paper, I know that the signe	ers are electors of the latisatemon of district represented	this and the control of the control			

EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov |

name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats.

RECALL PETITION We, the undersigned qualified electors of the ____Assembly District 63

(jurisdiction or district of officeholder)

The Wisconsin Election Commission

10.	1 1 ' Care dident for the office in filed)		Qurisdiction of distric	t of officerolder)
	n papers or declaration of candidacy for the office is filed) Robin Vos	from office pursuant to Article XIII, Section	n 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
petition for the recall of	(name of officeholder to be recalled and office)			
		TATEMENT OF REASON FOR RECALL	No retrievent of reason is required to initiate the recall of	state, congressional.
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lack of community to election integrity, clocking to	Transfer and the second	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	ME OF THE MUNICIPALITY OF RESIDENCE MUS	Γ ALWAYS BE LISTED.
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no	Indicate Town, City, or Village	SIGNING
" SPERTLY EMPLE	Jeffred Emmerling	833 BROWAS Lake DR APT COS	Village Burlington WI	5.19.12024
2 CHRISTA HALEY	Clear Ales	833 Browns Cake #205	O Town O Village TO RUNGTON WI	5.19.3
3. Uz blatte	Dri Schiltz	201 Browns Lake Dr 101	Uvillage Berlingson	5.19.2024
1 AND POLER	Wer Poter	801 Browns LLE Br201	O Town O Village BUNING ON	5,19,2024
5. Maria France	Sixumil Escude	801 Browns Lake 203	O Town O Village O City O Town	511 1720 29
Proof Juni Line	Brookinan Kinn	1433 BABE AN	Village Bullington, WI	5-19.24
7. Could land	Cruig Kiepsel	1348 Mcwan Dr	O Town	5-19-24
8. SW	SORDAN DAO	590 Edgewood Dr	O Village Buyh M W	5B19124
9.	- Megan Allen	148 5 main	Utillage Burungton Wi	5/19/24
10. Andrew Meguny	Andrew Megnard	25/14 10744 Frevor Wild	UVIIIage UVIVIV	5/19/24
· Morta Rou		reside atCertification of Circulator 5872 N	(circulator's residence - include number, street, and municipality)	PEODE 21
the signatures on this pages. I know that the cignot	re are electors of the introduction of district tenfesented	were a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person sign	Wis Stat 8 6 03 I personally circulated this recall petition a	and personally obtained each of indicated opposite his or her
name. I know their respective residences given. I	I support this recall petition. I am aware that falsifying	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 1123
(date)	(signate	ure of circulator)	WE AND STEED STATE OF THE COLUMN	

EL-170 (Rev 2019-09) The information on this form is required by Wis Stats. §§ 8 40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov

TO: The Wisconsin Election Commission		We, the undersigned qualified elect	tors of the Assembly District 63		
(official with whom nomina	ation papers or declaration of candidacy for the office is filed)		(jurisdiction or dist	rict of officeholder)	
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Sectio	on 12 of the Wisconsin Constitution and §.9.10 or	f the Wisconsin Statutes.	
	(name of officeholder to be recalled and office).	STATEMENT OF REASON FOR RECALL			
(The reason for recall must be stated on petition	_	e reason must be related to the official responsibilities of the officeholder.	No statement of reason is required to initiate the recall of	of state, congressional,	
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		trips from the CCP, failure to protect Wisconsin farmland from the CCP,			
lack of committment to election integrity, blocking	g lower prescription drug costs, and flagrant disrespect for	r his own constiuents by calling them "whack-jobs, morons, and idiots."			
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. 1/1	- Lily Felber	310100 S Joseph Rd Con	Divilage NEW Ber IV	5-17-21	
2. Parlin Marken	Darker Martinez	5811 Chucker In # 253	Orown HT Pleasant	5-17-22	
3 Dawn by Well	2 Dawn M. Wells	5811 Chukar Ln # 102	ocity MT Pleasant	5-17-24	
4 pai HAg	melvin Hinton	6101 16 tst	Uriliage Mt Mcq Sount	5.17.24	
5. Prity Jones	Kristin Lopez	12812 7/ST 57 #1015	U Village CTUDS 24A	5-17-24	
6.	SAFRIFE CHAPIS	5940 16THST #G3	Uvilage MTPKASAUT	517/24	
1 Ryan Falbert	- Ryan Tabbert	5950 16th ST #101	O Village MT PLEASA 1	5/17/24	
8 hill dru	RAChel Arbers	1455 S. Emmentsen Rd	Uvillage M+Pleasant	53/06/29	
9. Ana Carreno	Ana Carrena	2901 Indiana St	O Village Racine Lot	534039	
10. Many nela	In Mary Welch	5910 15th \$103	Village Cocine Plassif	5500	
05195	1.1.	Certification of Circulator	A. 1/10 Beach Fr	32966	
I, OCS (A) (name of circulator) (circulator's residence - 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 recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats.					
5.17.24				Page No. 1124	
(date) EL-170 (Rev 2019-09) The information on this form is required.		ne of circulator) e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266	5-8005 web: http://elections.wi.gov email: elections@wi.gov	1 10 380 ₩	

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SIGNATURES OF ELECTORS	TRIVIED NAME OF BEEFFORD	Rural address must also include box or fire no	Town	
1. 600	Joe Martinell	5900 loth st Apt 204	City Mt All Hugt	5/17/24
2.	la 1. Pelana	1445 Emmtsen Aproz	O Town O Village O City MOW P SASON	105/17/24
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I further certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age 18 or older who, if I v	were a resident of this state, would not be disqualified from voting under	med the paper with full knowledge of its content on the date	indicated opposite his or her
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1. Am	DOBER MEUR	907 STATE STREET	O Village UNION GROVE	5-18-24
2	Amanda Creminses	1005 State street	O'Town O Village On in O Wall	5-18-04
3. O A LO - 22	Dorotha Hitchinson	15906 Burlington St.	Unide Charles	8-18-24
4. 1/2 //////	Prulee hostio	1003 58th (K)	O City WIGH GROVE	5/18/24
5 Mach France	MALIK FRAZIER	MOUNT PLEASANT	Drown Drilliage D City D Town	5-18-24
6. Miggioch &	Messiah swift	5820 Cumbridge lave	Usuage Mount Pleasent	5-18-24
7. Marian	Jeff Dervins	SQU Regency H: US	Utiliage Wound Pleasant	2-18-24
8. Olle Elis	Asla Elis	9217 devendale	Utillage on please.	5-18-24
9.	Jacqueline Vana	3205 Indiana St	Utiliage Racine	5-18-24
10. 1 Phu	Denvonna Funna	3207 Indiana St	Village Racibe	5/18/24
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			(circulator's residence - include number, street, and municipality)	and personally obtained each of
I further certify I am either a qualified elector of	Wisconsin, och U.S. citizen, age 18 or older who, if I v	were a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person sign	med the paper with full knowledge of its content on the date	indicated opposite his or her
I lead the sign	are are electors of the introduction of district represented	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		
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TO: The Wisconsin Election Commission			ectors of the Assembly District 63	
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Robin Vos should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of tri	ps from the CCP, failure to protect Wisconsin farmland from the CCP,		
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		STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no	Indicate Town, City, or Village	SIGNING
11/ 11/	Latricia Manning	2221011	Town	6/16/21
dallion Mas	Latt icia padnit ing	3321 Daisulano HUIT	City Racing	10/18/24
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I further certify I am either a qualified elector of \	Wisconsin, or a U.S. citizen, age 18 or older who, if I we	re a resident of this state, would not be disqualified from voting unde	r Wis. Stat. § 6.03. I personally circulated this recall petiti	ion and personally obtained each of
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(date)		of circulator)	ACC DOOR	
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		SIREEI & HOMBER ON RELEASE	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	SIGNING
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no		795 19
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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 encurated this recall personal encuration encurated this recall personal encura	te indicated opposite his or her
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		RECALLIEITION	Accombly District 63	
TO: The Wisconsin Election Commission		We, the undersigned qualified e	lectors of the Assembly District os (jurisdiction or distr	ict of officeholder)
(official with whom nomina	tion papers or declaration of candidacy for the office is filed)		ction 12 of the Wisconsin Constitution and §.9.10 of	
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Sec	CHOIL 12 of the Wisconsin Constitution and gives	
	(name of officeholder to be recalled and office).	STATEMENT OF REASON FOR RECALL		
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no	Indicate Town, City, or Village	SIGNING
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I further certify I am either a qualified elector	of Wisconsin of a U.S. citizen, age 18 or older who, i	if I were a resident of this state, would not be disqualified from voting united by the officeholder named in this petition. I know that each person this certification is punishable under § 12.13(3)(a), Wis. Stats.	n signed the paper with full knowledge of its content on the date	e indicated opposite his or ner
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TO: The Wisconsin Election Commission		RECALL PETITION		
	tion papers or declaration of candidacy for the office is filed)		ectors of the Assembly District 63	
petition for the recall of	Robin Vos		(insignification)	district of officeholder)
	(name of officeholder to be recalled and office)	from office pursuant to Article XIII, Sect	ion 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statut
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L-170 (Kev 2019-09) The information on this form is required	by Wis Stats. §§ 8.40 and 9.10. This form is prescribed by the V	of circulator) Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-8	SODS hugh: http://olegoinge.com	1100
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		RECREETEDITION	A Diotriot 69	
TO: The Wisconsin Election Commission		. We, the undersigned qualified e	electors of the Assembly District 63	trict of officeholder)
(official with whom nomination	on papers or declaration of candidacy for the office is filed)			
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Se	ection 12 of the Wisconsin Constitution and §.9.10 o	Title wisconsin statutes.
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				- Call - Accombly District 63		
TO:	The Wisconsin Election Commission		. We, the undersigned qualified elected	Ors of the Assembly District of (jurisdiction or distric	ct of officeholder)	
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(EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wii.gov | email: elections@wii.gov

TO: The Wisconsin Election Commission		We, the undersigned qualified elec	tors of the Assembly District 63		
(official with whom nominati	on papers or declaration of candidacy for the office is filed)		(jurisdiction or dist	rict of officeholder)	
petition for the recall of	Robin Vos from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes			f the Wisconsin Statutes.	
	(name of officeholder to be recalled and office)	STATEMENT OF REASON FOR RECALL			
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
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(date) L EL-170 (Rev 2019-09) The information on this form is requi		ue de circulator) e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-260	6-8005 web: http://elections.wi.gov email: elections@wi.gov		

		RECALL PETITION	C. A. Accomply District 69		
TO: The Wisconsin Election Commission		. We, the undersigned qualified elected	ors of the Assembly District 03 (jurisdiction or distric	et of officeholder)	
(official with whom nomination	on papers or declaration of candidacy for the office is filed)				
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	n 12 of the Wisconsin Constitution and §.9.10 of		
•	(name of officeholder to be recalled and office)	TATEMENT OF REASON FOR RECALL			
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(a Very of airculator)			(circulator's residence - include number, street, and municipality) Wis Stat & 6.03 I personally circulated this recall petition	and personally obtained each of	
I further certify I am either a qualified elector of	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 recall petition and personally obtained each of 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 recall petition and personally obtained each of 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 recall petition and personally obtained each of 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 recall petition and personally obtained each of 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 recall petition and personally obtained each of 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 recall petition and personally obtained each of 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 period of the personal per				
the signatures on this paper. I know that the sign	I support this recall petition. Law aware that falsifying	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 1134	
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(date)	(kignat	ye of circulator)	66-8005 lweb: http://elections.wi-gov-l-email: elections@wi-gov		
EL-170 (Rev 2019-09) The information on this form is requ	uired by Wis Stats §§ 8.40 and 9.10. This form is prescribed by the	yfe of circulator) te Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-20	00-0005 100.		



TO:_	The Wisconsin Election Commission		We the undersigned qualified along	otors of the Assembly District 69	
-	(official with whom nominati	ion papers or declaration of candidacy for the office is filed)	We, the undersigned qualified elec		intelled a Control of the Control of
petition	n for the recall of	Robin Vos	from office pursuant to Article XIII Section	on 12 of the Wisconsin Constitution and §.9.10	istrict of officeholder)
		(name of officeholder to be recalled and office)		on 12 of the wisconsin Constitution and §.9.10	of the Wisconsin Statutes.
(The rec	con for rocall must be stated titi	6 2 31	STATEMENT OF REASON FOR RECALL		
legislati	ve, judicial, or county officials.)	for city, village, town, and school district officials. Th	ne reason must be related to the official responsibilities of the officeholder	. No statement of reason is required to initiate the recal	l of state, congressional,
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			or his own constiuents by calling them "whack-jobs, morons, and idiots."		
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7,	APAPAULAYM	Mahree Bunch	1443 S. Emmertsen Rd.	O'Village Mt Pleasant	5/17/24
8.	July hi	Lawlerne Smith	1435 2. Emunter &C.	Ulliage Unt & / 100 al	5/7/24
9.	amplingt	Grown Parlat	7230 Kinzie Ave Art-201	O'Village Mt. Plasant	5/11/19
10. L	por	Alba Estrada	1425 S. Emmertsen Rd COZ	Village WT Plea sant	5/17/24
ī	Dantel Avila		Certification of Circulator	and Pilledia A	016257
*,	(name of circulator)	, certify: I		confide Fich (and ov)	1017/
I further of the signat	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 recall petition and personally obtained each of pame. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her				
name. I k	ame. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats.				
I 180 70	(date)	- Committee	re of circulator)		Page No. 1135
.L-170 (Rev	2019-09) The information on this form is require	ed by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the	Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-	-8005 web: http://clections.wi.gov email. elections@wi.gov	

TO:	The Wisconsin Election Commission		THE CHEET ETITION		
===	(official with whom nominati	on papers or declaration of candidacy for the office is filed)		ectors of the Assembly District 63	
petitio	n for the recall of	Robin Vos	Marco Co.	(jurisdiction or dis	strict of officeholder)
Petitio		(name of officeholder to be recalled and office)	from office pursuant to Article XIII, Sect	ion 12 of the Wisconsin Constitution and §.9,10 of	of the Wissonsin Statutes
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he signat	ures on this paper. I know that the signers	are electors of the jurisdiction or district representation	re a resident of this state, would not be disqualified from voting under V y the officeholder named in this petition. I know that each person signents certification is punishable under \$ 12.13(3(a)) Wis State	Vis. Stat. § 6.03. I personally circulated this recall petition as	nd perconally obtained such =4
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(/	, intermediation on this form is required	toy this diales 99 8.40 and 9.10. This form is prescribed by the W	of circulator) /isconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-	8005 web: http://elections.wi.gov email: elections@wi.gov	

TO: The Wisconsin Election Commission		We, the undersigned qualified elect	tors of the Assembly District 63	
(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distric	
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
	(name of officeholder to be recalled and office)	TATEMENT OF REASON FOR RECALL		. 23
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lack of commitment to election integrity, blocking l	ower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MUS	T ALWAYS BE LISTED.
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5. Deugra bleet &	Demoria woodard	1455 meadow in	Ochy Burlinston	5-20-24
6.	William Showh	430 High Groves Ct	Oty Union Grove	5.20-24
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.,	<u>Certify:</u> Ι	reside di	(circulator's residence - 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 w	ere a resident of this state, would not be disqualified from voting under	Wis. Stat. § 6.03. I personally circulated this recall petition a	nd personally obtained each o
the signatures on this paper. I know that the signe	rs are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person sign this certification spunishable under § 12.13(3)(a), Wis Stats.	ted the paper with run knowledge of its content on the date it	C opposite int of her
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EL-170 (Rev.2019-09) The information on this form is requi	red by Wis. Stats. §§. 8.40 and 9.10 ms form is prescribed by the	Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	66-8005 web: http://elections.wi.gov email: elections@wi.gov	

DECALL DECICION

TO: The Wisconsin Election Commission		RECALL PETITION		
	tion papers or declaration of candidacy for the office is filed)	We, the undersigned qualified	d electors of theAssembly District 63	
petition for the recall of	Robin Vos	6		istrict of officeholder)
Fermion 101 the 100ati of	(name of officeholder to be recalled and office)	rrom office pursuant to Article XIII, S	Section 12 of the Wisconsin Constitution and §.9.10 of	of the Wisconsin Statute
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D046 B	RICKER , certify: I	Certification of Circulator	AVE/BATAVIA, IA SZSS	,
(name of circulator)		reside at 1877 FIZULTI WOOD	(circulator's residence - include number, street, and municipality)	5
further certify I am either a qualified elector of V	Wisconsin, or a U.S. citizen, age 18 or older who, if I we	ere a resident of this state, would not be disqualified from voting un		and personally obtained each
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MAY 17 2024	political familiary and distribution	una continuation is punisnable under § 12,13(3)(a), Wis. Stats.		
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-170 (Rev 2019-09) The information on this form is requir	red by Wis Stats. §§ 8.40 and 9.10. This form is prescribed by the	Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 60	08-266-8005 web: http://elections.wi.upu.l.email: election-	

RECALL PETITION . We, the undersigned qualified electors of the Assembly District 63

TO: The Wisconsin Election Commission		. We, the undersigned qualified elector	ors of the Assembly Planto of (jurisdiction or distric	ct of officeholder)
(official with whom nominatio	on papers or declaration of candidacy for the office is filed)			
	Robin Vos	from office pursuant to Article XIII, Section	12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin States
petition for the recall of	(name of officeholder to be recalled and office)	TO THE PERMIT		
	S	TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder.	No statement of reason is required to initiate the recall of	state, congressional,
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	4 4 4	Certification of Circulator	BATAVIA, IOWA 525	33
, Doug BRIC	CERTIFY:	I reside at 1877 FRUITWOOD AVC	(circulator's residence - include number, street, and municipality)	
			are a constructed this recall netition	and personally obtained each of
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 d by the officeholder named in this petition. I know that each person signer this certification is punishable under § 12.13(3)(a), Wis. Stats.	ned the paper with full knowledge of its content on the date	indicated opposite his or her
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TO: The Wisconsin Election Commission	n	We, the undersigned qualified elec-	ctors of the Assembly District 63	
	nation papers or declaration of candidacy for the office is filed)		3	strict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Secti	ion 12 of the Wisconsin Constitution and §.9.10 of	of the Wisconsin Statutes.
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a Calculation			(circulator's residence - 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 unde	r Wis. Stat. § 6.03. I personally circulated this recall petition	n and personally obtained each o
the signatures on this paper. I know that the si	igners are electors of the jurisdiction or district represented	d by the officeholder named in this petition. I know that each person sign	ned the paper with full knowledge of its content on the date	e indicated opposite his or her
name. I know their respective residences give	en. I support this recall petition. I am aware that falsifyin	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		
MAY . 20, 2024	1/1/2	pi		Page No. 1140
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EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§. 8 40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov

420-326-1				We the unde	ersigned qualified elect	ors of the Assembl	y District 63	
TO:	The Wisconsin Election Commission	C III South office is filed		We, the did	SIBIBIIOG damiiio		(jurisdiction or distr	ict of officeholder)
		papers or declaration of candidacy for the office is filed)		from office nursuan	t to Article XIII Section	n 12 of the Wiscon	sin Constitution and §.9.10 of	the Wisconsin Statutes.
petition	for the recall of	Robin Vos		Holli office pursuan	t to Atticle Atti, country		Ü	
		(name of officeholder to be recalled and office)	TATEMENT	OF REASON FO	R RECALL			
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		. We, the undersigned qualified elected	ors of the Assembly District 63	
TO: The Wisconsin Election Commission			Qui is a lot of a lot is	
(official with whom nominatio	n papers or declaration of candidacy for the office is filed)	S CC Article VIII Section	12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
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TO: The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District 63	
TO: The Wisconsin Election Commission (official with whom pominating	on papers or declaration of candidacy for the office is filed)		Ourisdiction or distri	
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
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EL-170 (Rev 2019-09) The information on this form is requ	uired by Wis Stats 99 8 40 and 9 10. This form is prescribed by the	the Wisconsin Dicellons Commission 1.02 Dox 7501, Madison, 1.2 55.07, 7501		

		RECALL PETITION	and of the Assembly District 63	
O: The Wisconsin Election Commission		. We, the undersigned qualified elect	(jurisdiction or dis	strict of officeholder)
(official with whom nominati	on papers or declaration of candidacy for the office is filed)	A del Marie Continue	n 12 of the Wisconsin Constitution and §.9.10 of	of the Wisconsin Statutes.
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		RECALL PETITION We, the undersigned qualified electo	ors of the Assembly District 63 (jurisdiction or district	of officeholder)
TO:The Wisconsin Election Commission	papers or declaration of candidacy for the office is filed)	from office pursuant to Article XIII, Section	12 of the Wisconsin Constitution and §.9.10 of t	he Wisconsin Statutes.
petition for the recall of	Robin Vos (name of officeholder to be recalled and office).	TATEMENT OF REASON FOR RECALL TATEMENT OF REASON FOR RECALL	N_0 statement of reason is required to initiate the recall of	state, congressional,
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The Wisconsin Election Commission

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application.	Dean Holewinski	1413 Hillenestein	Village Racine, WIS3406	5-19-24
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Nicole Brim	nede Bum	700 Dekoven Ave	O Town O Village Racine Wi	5/19/24
(name of cyculator) I further certify I am either a qualified elector of the signatures on this paper. I know that the signatures	Wisconsin, or a U.S. citizen, age 18 or older who, if I we are alectors of the jurisdiction or district represented by I support this recall petition. I am aware that falsifying t	reside at This state, would not be disqualified from voting under W by the officeholder named in this petition. I know that each person signed this certification is punishable under § 12.13(3)(a), Wis. Stats.	(circellator's residence - include number, street, and municipality)	
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TO:	The Wisconsin Election Commission		We, the undersigned qualified elec-	tors of the Assembly District 63	
	(official with whom nomination	on papers or declaration of candidacy for the office is filed)	, ,	(jurisdiction or distri	ct of officeholder)
petitio	n for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
	· 	(name of officeholder to be recalled and office)			
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Page No. 1148

EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov

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(official with whom nomination	on papers or declaration of candidacy for the office is filed)	from office pursuant to Article XIII, Section	n 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.	
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(official with whom nomination papers or declaration of candidacy for the office is filed) Petition for the recall of Robin Vos (name of officeholder to be recalled and office) STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recutegistative, judicial, or county officials.) Robin Vos should be recalled for his tacit support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP. The MUNICIPALITY OF RESIDENCE is not sufficient to protect Wisconsin farmland from the CCP. The MUNICIPALITY OF RESIDENCE is not sufficient to protect Wisconsin farmland from the CCP. The MUNICIPALITY OF RESIDENCE is not sufficient to protect Wisconsin farmland from the CCP. The MUN	
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		We, the undersigned qualified elect	tors of the Assembly District 63	
TO: The Wisconsin Election Commission			() di libricito i si	district of officeholder)
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I further certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age 18 or older who, it is	were a resident of this state, would not be disqualified from voting under the officeholder named in this petition. I know that each person signs this certification is punishable under § 12.13(3)(a), Wis. Stats.	gned the paper with full knowledge of its content on the date	indicated opposite his or her
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1 O; The Wisconsin Election Commission		We the undersigned qualified all		
(official with whom nominat	tion papers or declaration of candidacy for the office is filed)	. We, the undersigned qualified ele		
petition for the recall of	Robin Vos	from office pursuant to Article VIII S	(jurisdiction or dis	strict of officeholder)
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O: The Wisconsin Election Commission		We, the undersigned qualified elec	ctors of the Assembly District 63	laterat of official added
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petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes.
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TO:	The Wisconsin Election Commission		We, the undersigned qualified elec	tors of the Assembly District 63	
-	(official with whom nomination	n papers or declaration of candidacy for the office is filed)	-		trict of officeholder)
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2.	Jesue hors,	Jessica Thomas	209 Emarket 5x 108	Village Burlington	5/18/29
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the sign	atures on this paper. I know that the signer	s are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person sign	ed the paper with full knowledge of its content on the date	indicated opposite his or her
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EL-170 (R	(date) 2019-09) The information on this form is require		re of circulator) e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	66-8005 web; http://elections.wi.gov email; elections@wi.gov	

TO:	The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District oo	
	(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or dist	
netitio	n for the recall of	Robin Vos	from office pursuant to Article XIII, Secti	on 12 of the Wisconsin Constitution and §.9.10 o	f the Wisconsin Statutes.
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	SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no	Indicate Town, City, or Village	Siditing
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name.	know their respective residences given.	I support this recall petition. Lamaware that falsifying	this certification is punishable under § 12.13(3)(a), wis. Stats.		Page No. 1156
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EL-170 (R	ev 2019-09) The information on this form is requ	tired by Wis. Stats. §§. 8 40 and 9 10 This form is prescribed by the	e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2	200-6003 [web: [http://etechnils.wi.gov ethan; elections@wi.gov	

		RECALL PETITION		
TO: The Wisconsin Election Commission		We, the undersigned qualified elec	ctors of the Assembly District 63	
(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or dis	strict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII. Section	on 12 of the Wisconsin Constitution and §.9.10 o	of the Wisconsin Statute
	(name of officeholder to be recalled and office).		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· me masonom statute
		STATEMENT OF REASON FOR RECALL		
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
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TO: The Wisconsin Election Commission		We, the undersigned qualified elect	cors of the Assembly District 63		
(official with whom nominat	ion papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	ict of officeholder)	
petition for the recall of	Robin Vos (name of officeholder to be recalled and office)	from office pursuant to Article XIII, Section	n 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.	
		STATEMENT OF REASON FOR RECALL			
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I, Gary Adam Feldman , certify: I reside at 1026 Knorn Street, Philadelphia, PA 19111-4810					
the signatures on this paper. I know that the signe	ers are electors of the jurisdiction or district represented	ere a resident of this state, would not be disqualified from voting under V by the officeholder named in this petition. I know that each person signe this certification is punishable under § 12.13(3)(a), Wis. Stats.	(circulatof's residence'- include number, street, and municipality) Vis. Stat. § 6.03. I personally circulated this recall petition a d the paper with full knowledge of its content on the date in	nd personally obtained each o idicated opposite his or her	
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EL-170 (Rev.2019-09) The information on this form is requi	ired by Wis Stats §§. 8.40 and 9. 6 This form is prescribed by the	Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266	-8005 web: http://clections.wi.gov email: elections@wi.gov		

DECALI DETITION

		RECALL PETITION		
The Wissensin Floation Commission		We, the undersigned qualified elec	ctors of the Assembly District 63 (jurisdiction or district	rict of officeholder)
TO: The Wisconsin Election Commission	n papers or declaration of candidacy for the office is filed)		04.154.154.1	
	Robin Vos	from office pursuant to Article XIII, Secti	on 12 of the Wisconsin Constitution and §.9.10 or	the wisconsin statutes.
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TO: The Wisconsin Election Commission		RECALL PETITION		
(official with whom nomin	nation papers or declaration of candidacy for the office is filed)	We, the undersigned qualified e	lectors of the Assembly District 63	
petition for the recall of	Robin Vos		45	listrict of officeholder)
	(name of officeholder to be recalled and office)	from office pursuant to Article XIII, Sec	gurisdiction or d ction 12 of the Wisconsin Constitution and §.9.10	istrict of officeholder)
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TO The Wissenster Start Co. 1		RECALL PETITION		
TO: The Wisconsin Election Commission		We, the undersigned qualified elec-	ctors of the Assembly District 63	
	tion papers or declaration of candidacy for the office is filed)			trict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 o	of the Wisconsin Statutes
	(name of officeholder to be recalled and office).		3,,,,,	the Wisconsin Statutes,
(The reason for recall must be stated on petitions	s for city, village, town, and school district officials. The	STATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder		
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I further certify I am either a qualified elector of V	Visconsin, or a U.S. citizen, age 18 or older who, if I we	re a resident of this state, would not be disqualified from voting under W	(circulator's residence - include number, street, and municipality) Tis. Stat. 6.03. I personally circulated this recall petition are	ad paramally obtained and o
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EL-170 (Rev 2019-09) The information on this form is require	ed by Wis Stats. §§ 8.40 and 9.10. This form is prescribed by the V	Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-6	ROOS (web: http://electrops.vv. root openits electrops.vv.	

TO:	The Wisconsin Election Commission		RECALL FEITHON		
	(official with whom nominat	ion papers or declaration of candidacy for the office is filed)	We, the undersigned qualified ele	ctors of the Assembly District 63	
petition	n for the recall of	Robin Vos	france of Control of the Control of	(jurisdiction or	district of officeholder)
	*	(name of officeholder to be recalled and office)	rrom office pursuant to Article XIII, Section 1.	ion 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statute:
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-170 (Rev.	2019-09) The information on this form is required	by Wis Stats §§ 8.40 and 9.10. This form is prescribed by the V	of oficulator) Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-	8005 web: http://elections.wi.gov. amail: elections@ui.	

TO: The Wisconsin Election Commission		We the understand and a life to the		
(official with whom nominati	ion papers or declaration of candidacy for the office is filed)			
petition for the recall of	Robin Vos	C	(jurisdiction or dist	rict of officeholder)
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L-170 (Rev 2019-09) The information on this form is require	sd by Wis Stats 66, 8.40 and 9.10. This form is presented by the	of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-		
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TO.	The Miles and Election O		RECALL FE II				
TO:	The Wisconsin Election Commission	. We, the undersigned qualified electors of the Assembly District 63					
		ation papers or declaration of candidacy for the office is filed)				(jurisdiction or distri	ict of officeholder)
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		(name of officeholder to be recalled and office).				3	The state of the s
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I further	certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age 18 or older who, if I we	ere a resident of this state, would not be d	isqualified from voting under V	Vic Stat & 6.02 I paragraph	number, street, and municipality)	d parcapally abtained such of
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TO: The Wisconsin Election Commission		We, the undersigned qualified elec	ctors of the Assembly District 63	
(official with whom nomin	ation papers or declaration of candidacy for the office is filed)		(jurisdiction or dist	trict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 o	f the Wisconsin Statutes.
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(name of Circulator)			(circulator's residence - 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 w	ere a resident of this state, would not be disqualified from voting under V	Wis Stat & 6.03. I personally circulated this recall petition of	and personally obtained each of
ie signatures on this paper. I know that the sign	iers are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person signe	ed the paper with full knowledge of its content on the date in	ndicated opposite his or her
1 / 10 /2 4	i support this recan petition. I am aware that faisifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		D 11 110 -
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-170 (Rev 2019-09) The information on this form is requ		Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266	5-8005 hugh: http://glasticage.vii.unv.l.grapil.glasticage@wii.a	

TO:	The Wisconsin Election Commission		We, the undersigned qualified elec	ctors of the	Assembly District 6	63	
	(official with whom nominati	on papers or declaration of candidacy for the office is filed)	,			(jurisdiction or distric	t of officeholder)
petition	for the recall of	Robin Vos	from office pursuant to Article XIII, Secti	on 12 of the	e Wisconsin Cons	titution and 8.9.10 of a	the Wisconsin Statutes
-	9	(name of officeholder to be recalled and office)			• · · · · · · · · · · · · · · · · · · ·	manon and g.y.ro or	ine wisconsin statutes.
			ATEMENT OF REASON FOR RECALL				
(The rea	son for recall must be stated on petitions	for city, village, town, and school district officials. The rea	son must be related to the official responsibilities of the officeholde	r. No statem	ent of reason is requi	red to initiate the recall of	state, congressional,
	ve, judicial, or county officials.)	Alle Obles of Occasional Port (OOD)					
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lack of c	ommittment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for his	own constiuents by calling them "whack-jobs, morons, and idiots."				
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l,	Vlad Litvi	certify: I resi	deat 655 Good pasture is	and	r.d. 199	Eugene O	R 97401
further	(name of circulator)	Misconsin or a LLS gitizen ago 19 or older who ist		(circulator's	residence - include number	street and municipality)	
he signa	tures on this paper. I know that the signer	rs are electors of the jurisdiction or district represented by t	a resident of this state, would not be disqualified from voting under he officeholder named in this petition. I know that each person sign	Wis Stat § 6	U3. I personally circu	lated this recall petition and	d personally obtained each of
name. I	know their respective residences given. I	support this recall petition. I am aware that falselying this	certification is punishable under 8 12.13(3)(a) Wis State	en me haher	with this knowledge o	i his content on the date ind	icated opposite his or her
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EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.16 This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov

RECALL PETITION

We, the undersigned qualified electors of the Assembly District 63

O: The Wisconsin Election Commission		We, the undersigned qualified elected	Ors of the Assembly District 65 (jurisdiction or distri	ct of officeholder)
O: The Wisconsin Election Commission (official with whom nomination	papers or declaration of candidacy for the office is filed)		n 12 of the Wisconsin Constitution and §.9.10 of	
etition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	n 12 of the wisconsin Constitution and §.5.10 of	
	(name of officeholder to be recalled and office)	TATEMENT OF REASON FOR RECALL		
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The reason for recall must be stated on petitions for	or city, village, town, and school district officials, the	Teason must be related to the service of the servic		0
rgislative, judicial, or county officials.) In this year to the second of the second	f the Chinese Communist Party (CCP), acceptance of tr	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		136
	and floorant digreement for	his own constituents by calling them "whack-jobs, morens, and talets."		
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I further certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age. 18 or older who, it is	were a resident of this state, would not be disqualified from voting undeed by the officeholder named in this petition. I know that each person signs certification is punishable under § 12.13(3)(a), Wis. Stats.	gned the paper with full knowledge of its content on the date	e ilidicated opposite into ot ites
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05/22/2029				
(date)	(signa	ature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-	266-8005 web: http://elections.wi.gov email: elections@wi.gov	
L-170 (Rev 2019-09) The information on this form is requ	ired by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by	THE WISCONSIN ELECTRONS COMMISSION 1200 BOX	Y.	

TO:	The Wisconsin Election Commission		We, the undersigned qualified ele	ectors of the Assembly District 63	
-	(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distri	ct of officeholder)
petitio	on for the recall of	Robin Vos	from office pursuant to Article XIII, Sect	ion 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
-		(name of officeholder to be recalled and office)	CONTROL DE ACONTOR RECALL		
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			r his own constiuents by calling them "whack-jobs, morons, and idiots."		
T	HE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N	NAME OF THE MUNICIPALITY OF RESIDENCE MUS	T ALWAYS BE LISTED.
	SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
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2	Prodoul	Rubin Birdsul	7261 White Pine Ct.	Original Grandson II C	5/19/24
3.	n	Ryan Wittonburg	2738 Bartols Drive	City Mt Plasnt	5/19124
4.	hul	Celia Kuhl	5710 Eagle Point Dr.	Caledonia Caledonia	5/19/24
5.	12 - b Woy	Dennis Wolc	35/9 Morris St	O City Franksu. Ile	5-19.26
64	Roman E. Viencas	THOMAS E. PENCAK	9127 MOKGAN CT.	O Town O Village O City O Town	5/19/24
7,	D. Buston	Darlene Bunton	1064 Hastings Ct,	Ocity MT. PLEASant	5/19/24
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1,	(name of airculator)			(circulator's residence - include number, street, and municipality)	<i>3</i>
I furthe	r 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 yoting under	er Wis. Stat. § 6.03. I personally circulated this recall petition a	ind personally obtained each o
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EL-170 (F	tev 2019-09) The information on this form is requi	red by Wis Stats §§ 8.40 and 9.10. This form is prescribed by the	e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-	266-8005 web: http://elections.wi.gov email: elections@wi.gov	ά. "

The Wisconsin Election Commission

We, the undersigned qualified electors of the Assembly District 63

(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distri	ct of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Sect	ion 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
	(name of officeholder to be recalled and office)		g g.	
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lack of committment to election integrity, blocking I	ower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
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The same	LAVIA SCHLITZ	1410 117H AVZ	City / NION GROVE	5/18/24
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2 Chasophe Vyyor	CHRISTOPHER LYVYAN	21805 Bennett Rd	city Union Grove	5/18/24
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(name of circulator)		0-5 000 Nag 10) C 10 C 19/10	(circulator's residence - include number, street, and municipality)	
I further certify I am either a qualified elector of V	Visconsin, or a U.S. citizen, age 18 or older who, if I we	ere a resident of this state, would not be disqualified from voting under	Wis Stat § 6.03. I personally circulated this recall petition ar	nd personally obtained each of
the signatures on this paper, I know that the signer	s are electors of the jurisdiction or district represented !	by the officeholder named in this petition. I know that each person sig	ned the paper with full knowledge of its content on the date in	dicated opposite his or her
name. I know their respective residences given. I	support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
05/18/2024	17/1			Page No. 1169
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EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://clections.wi.gov | email: elections@wi.gov |

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec		
(official with whom nominat	ion papers or declaration of candidacy for the office is filed)	4.9	v	rict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 or	f the Wisconsin Statutes.
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Robin Vos should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of t	trips from the CCP, failure to protect Wisconsin farmland from the CCP,	* 1	
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6. 20 50	Daviel DeBaets	1448 Shoreland Dr.	ortown Racine	5-19-24
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9. at 1	ARTUNO LOPEZ	2509 GROVE AVE.	D Town D Village RACI NG	5-12 24
10. Kather Pol	Kathleen Panka	1005 Lathor Ave	Town Utillage RACINE	5-19-24
		Certification of Circulator	* * * * * * * * * * * * * * * * * * *	10 071
I. VIND Litvi	certify: I	I reside at 655 Good paysture 1		ipene OR 974
(name of circulator)	William and 18 of the state of	were a resident of this state, would not be disqualified from voting under	(circulator's residence - include number, street, and municipality) Wis Stat 8 6 03. I personally circulated this recall petition	and personally obtained each
the signatures on this paper. I know that the sign	ers are electors of the jurisdiction or district represented	d by the officeholder named in this petition. I know that each person sign	ned the paper with full knowledge of its content on the date	indicated opposite his or her
name. I know their respective residences given.	I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.	*	
05/19/2024				Page No. 1170
(date)		ure of circulator) ne Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	66-8005 lively http://elections.wi-uov email: elections@wi-oov	
EL-170 (Rev 2019-09) The information on this form is requ	ired by wis Stats 99 8 40 and 9 10. This form is prescribed by th	IE WISCONSIN ETECTIONS COMMISSION F.O. BOX 7984, IMADISON, WT 33707-7984 008-20	OU DOOS (THE THE THE STATE OF THE PARTY OF THE BOY	

		RECALL PETITION	Assembly District 63	
		We, the undersigned qualified ele	ectors of the Assembly Blatter of	trict of officeholder)
TO: The Wisconsin Election Commission	the disconfiguration for the office is filed)			f the Wisconsin Statutes
(official with whom nomination	papers or declaration of candidacy for the office is filed)	from office pursuant to Article XIII, Sec	tion 12 of the Wisconsin Constitution and §.9.10 o	III THE WISCONSIN GLARGES
petition for the recall of	Robin Vos	nom office paragram		
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(The reason for recall must be stated on petitions f	or city, village, town, and school district officials. The	TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officehold		
legislative, judicial, or county officials.)	and the second s	los from the CCP, failure to protect Wisconsin farmland from the CCP,		
Robin Vos should be recalled for his tacit support o	f the Chinese Communist Party (CCP), acceptance of the	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
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11 Jan my destre Sancita	Ennifer M. Sagedal	Meant Pleasant MN 53406	☐ Gity	
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(name of circulator)	THE citizen age 18 or older who if	I reside at I were a resident of this state, would not be disqualified from voting u ed by the officeholder named in this petition. I know that each persor ing this certification is punishable under § 12.13(3)(a), Wis. Stats.	inder Wis Stat. § 0.03. I personally enculated this recall personal p	ate indicated opposite his or her
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EL-170 (Rev 2019-09) The information on this form is req	uired by Wis. Stats §§. 8 40 and 9.10. This form is prescribed by	The Attaconstit Program of the Attachment of the		

The Wisconsin Election Commission

(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Assembly District 63

(jurisdiction or district of officeholder)

petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	f the Wisconsin Statutes
	(name of officeholder to be recalled and office)	STATEMENT OF REASON FOR RECALL		
(The reason for recall must be stated on petitions		e reason must be related to the official responsibilities of the officeholde	x. No statement of reason is required to initiate the recall o	of state, congressional,
legislative, judicial, or county officials.)		•	, , , , , , , , , , , , , , , , , , ,	, o.z.o, oo.,g, ooo,
Robin Vos should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of t	trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for	r his own constiuents by calling them "whack-jobs, morons, and idiots,"		
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	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
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2 20.CK	ZACK OLSON	5214 16th St	ority M+ Pleasen+	5/18/24
3. Homewhite	Glenn white	5214 16th st	Village Of Pleasur	5/18/24
4 kyr In	Clune Tourner	5305 10th street	O Town O Village O City O CONTROL OF CONTROL	5.18.25
5. Kynd	Kyan Soransa	1601 Roseveljet	Town Village Mr Pleasa, F	S. 68 20
6. met Canple	Metrick Campbell	924 Lake ave	Town City City	
7 Joulifronis	Taylor Franklin	2320 Howe St	Othy M. Plasant	5/18/24
8 Sport Ithree	Shanta Watson	1254 Russet St	Town Colemba	5/18/24
9.			□ Town □ Village □ City	
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		vere a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person sign		
5-118/201		this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 1172
(date)	(signatu	re of circulator)		

EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi gov | email: elections@wi gov

TO: The Wisconsin Election Commission		We, the undersigned qualified elec-	tors of the Assembly District 63	
(official with whom nominate	ion papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	ict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII. Section	on 12 of the Wisconsin Constitution and §.9.10 of	•
	(name of officeholder to be recalled and office)		or the Wisconsin Constitution and 3.7.10 of	the Wisconsin Statutes.
		STATEMENT OF REASON FOR RECALL		
(I he reason for recall must be stated on petitions legislative, judicial, or county officials.)	for city, village, town, and school district officials. The	reason must be related to the official responsibilities of the officeholder	No statement of reason is required to initiate the recall o	f state, congressional,
Robin Vos should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of to	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
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5 Kelly miller	Kelly miller	5920164 51. 102	O Village MT Pleasunt	5-18-24
6 Ahun	Ashley miller	5920/16th St. Gy -	Utiliage Mt. Plasant	5-19-24
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* Cache Herro	Jackie Herro	5920 16th St 102	Utilage N & PLASSIT	5-19-24
"Phedruid mensed	RICHARD MIARSICES	592016+49+ A102	Utilage City My Plasser	5-19-24
10. Shruti tiwadi	Chanti tiwadi	5720 16th st # 101	Otty Ut Pleasant	5-11-24
STAN SISSON Certification of Circulator Certification Cert				
(name of circulator) further certify I am either a qualified elector of V	Wisconsin, or a U.S. citizen, age 18 or older who, if I we	ere a resident of this state, would not be disqualified from voting under W	(circulator's residence - include number, street, and municipality)	od postopostly obtained each of
ic signatures on this paper, I know that the signer	rs are electors of the jurisdiction or district represented I	by the officeholder named in this petition. I know that each person signe	d the paper with full knowledge of its content on the date inc	dicated opposite his or her

Page No. 1173

EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email. elections@wi.gov

			RECREETETITION		
TO:	The Wisconsin Election Commission		We, the undersigned qualified elec-	ctors of the Assembly District 63	
	(official with whom nominati	on papers or declaration of candidacy for the office is filed)			rict of officeholder)
petition f	for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 o	
		(name of officeholder to be recalled and office).		V	
(The reason	n for recall must be stated on petitions	for city village town, and school district officials. The	STATEMENT OF REASON FOR RECALL		
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Robin Vos	should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of t	trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
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s	IGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
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turther cer he sionatur	tiry I am either a qualified elector of W	/isconsin, or a U.S. citizen, age 18 or older who, if I we	ere a resident of this state, would not be disqualified from voting under V	Via Ctat C C O2 T	nd personally obtained each of
o.B.iaca.	es on one paper I know that the signer	are electors of the furisaletion of district tentesented i	by the officeholder named in this petition. I know that each person signe this certification is punishable under § 12.13(3)(a), Wis. Stats.	ed the paper with full knowledge of its content on the date in	dicated opposite his or her
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		RECALLIEITION	Cut - Accombly District 63	
TO: The Wisconsin Election Commission		. We, the undersigned qualified elector	ors of the Assembly District 65 (jurisdiction or distri	ict of officeholder)
(official with whom nomina	ation papers or declaration of candidacy for the office is filed)	a co	n 12 of the Wisconsin Constitution and §.9.10 of	
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	I 12 of the Wisconsin Constitution and \$15.10 of	
•	(name of officeholder to be recalled and office). ${f S}'$	TATEMENT OF REASON FOR RECALL	No statement of reason is required to initiate the recall of	f state, congressional,
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6.	Samantha Chinox	547 Newman Pd #4	Unilage UA PHASANT	5/20/24
7. May 10. 0	Milled Croix	542 NEWMANRO#4	Ulliage Of Hecsaul	B/20/74
8 5/4/	Brandon Thurmann	SCI2 Newman Rd #1	o Village Mt Pleasant	5/20/24
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EL-170 (Rev 2019-09) The information on this form is re	equired by Wis Stats §§ 8.40 and 9.10. This form is prescribed by th	ure of circulator) ne Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	50-8003 Mad: Intil references of the Collain Elections of Box	

TO: The Wisconsin Election Commission				
(official with whom noming	ation papers or declaration of candidacy for the office is filed)		ectors of the Assembly District 63	
petition for the recall of	Robin Vos		(jurisdiction or o	listrict of officeholder)
•	(name of officeholder to be recalled and office)	trom office pursuant to Article XIII, Secti	ion 12 of the Wisconsin Constitution and §.9,10	of the Wisconsin Statute
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-170 (Rev.2019-09) The information on this form is require	red by Wis Stats §§ 8.40 and 10. This form is prescribed by the	of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI, 53707-7084 L608, 266.		0

WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov

TO: The Wisconsin Election Commissio	n	We the material at the training		
(official with whom nomi	ination papers or declaration of candidacy for the office is filed)			
petition for the recall of	Robin Vos	from office nurrought to Article VIII C. d.		trict of officeholder)
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE MUST	DATE OF
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urther certify I am either a qualified elector o	of Wisconsin, or a U.S. citizen; age 18 or older who if I w	and the contract of the contra	(circulator's residence - include number, street, and municipality)	
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The Wisconsin Election Commission

(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the Assembly District 63

(jurisdiction or district of officeholder)

petition for the recall of	Robin Vos (name of officeholder to be recalled and office).	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes
		STATEMENT OF REASON FOR RECALL		
	for city, village, town, and school district officials. The	reason must be related to the official responsibilities of the officeholder	No statement of reason is required to initiate the recall of	f state, congressional,
legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
7		his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR MAI	ILING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MUS	T ALWAYS BE LISTED.
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
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2/WALLIACE PROM	Wallew Proff	457 KENDALL	o City BLI RAY WATON	5-19-04
Chill Saus	Michael Standiez	432 James ST	O'Village ROK UK TON	5-19-84
* Disti well	Hidi Nelson	140 N. Elmvood Are	orown village Bulington	5/19/2024
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(name of circulator)	Certify: 1	reside at 20066 William City	(circulator's residence - include number, street, and municipality)	017
I further certify I am either a qualified elector of V		ere a resident of this state, would not be disqualified from voting under	Wis. Stat. § 6.03. I personally circulated this recall petition a	
		by the officeholder named in this petition. I know that each person sign	ed the paper with full knowledge of its content on the date in	idicated opposite his or her
	i support this recall petition. I am aware that falsifying	this certification is punishable under § 12 13(3)(a), Wis. Stats.		Dago No. 4470
5-19-2024	Giorge	o of circulator)		Page No. 1178

EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats §§ 8 40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov

TO: The Wisconsin Election Commission		. We, the undersigned qualified elect	tors of the Assembly District 63 (jurisdiction or distri	et of officeholder)
(official with whom nominatio	n papers or declaration of candidacy for the office is filed)	State of the property of the second of the s		
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	
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I further certify I am either a qualified elector of	Wisconsin, or a U.S. citizen, age 18 or older who, in	were a resident of this state, would not be disqualified from voting unde	oned the paper with full knowledge of its content on the date	indicated opposite his or her
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(date)	in the Wie State 68 8 40 and 9 10. This form is prescribed by	nure of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-	266-8005 web: http://elections.wi.gov email: elections@wi.gov	

TO: The Wisconsin Election Commission		We, the undersigned qualified elect	ors of the Assembly District 63	
	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distric	
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Sectio	n 12 of the Wisconsin Constitution and §.9.10 of t	he Wisconsin Statutes.
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(name of circulator) I further certify I am either a qualified elector of	Winner and III without and 19 as alder who if I w	yere a resident of this state, would not be disqualified from voting under by the office of the parameter in this petition. I know that each person sign	(circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition as led the paper with full knowledge of its content on the date in	nd personally obtained each of
name. I know their respective residences given.	I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
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- Annual Control of the Control of t	the same day and the same and t	Wiscons Floritons Commission P.O. Boy 7984 Medison, WI 53707-7984 608-26	6-8005 (web: http://elections.wi.gov.jemail: elections(a)wi.gov	

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec-	ctors of the Assembly District 63	
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		RECALLIE	Assembly District 63	
O: The Wisconsin Election Commission		. We, the undersigned qualified elected	Quantitative in the	trict of officeholder)
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
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(name of circulator)		I reside at	(circulator's residence include number, street, and municipality) r Wis. Stat. § 6.03. I personally circulated this recall petitive	on and personally obtained each
further certify I am either a qualified elector of the signatures on this paper. I know that the sign	f Wisconsin, or a U.S. citizen, age 18 of older who, if I ners are electors of the jurisdiction or district epresente	were a resident of this state, would not be disqualified from voting under d by the officeholder named in this petition. I know that each person sign this certification is punishable under § 12.13(3)(a), Wis. Stats.	ned the paper with full knowledge of its content on the da	tie indicated opposite his of her
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TO: The Wisconsin Election Commission		- CHELITITION		
(official with whom nominal	tion papers or declaration of candidacy for the office is filed)	We, the undersigned qualified ele	ectors of the Assembly District 63	
petition for the recall of	Robin Vos		(invindint)	istrict of officeholder)
	(name of officeholder to be recalled and office).	from office pursuant to Article XIII, Sect	tion 12 of the Wisconsin Constitution and §.9.10	of the Wissensin Ct. 4
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6/2/9/	Annette Jurkiewicz	30 1) 00street 10 /+>	OCHY O WAR VOW T	SALLAU
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further certify I am either a qualified elector of Wi	isconsin, or a U.S. citizen, age 18 or older who, if I we	re a resident of this state, would not be disqualified from voting under W y the officeholder named in this petition. I know that each person signed	(circulator's residence - include number, street, and municipality)	100220
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(Rev 2019-09) The information on this form is required	by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the W	of circulator /isconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-8	PAGE 1. A DISCOURT OF THE PAGE 1	3 1103
		1 23/07-7984 608-266-8	sous [web: http://elections.wi.gov email: elections@wi.gov	

The Wisconsin Election Commission

(official with whom nomina	tion papers or declaration of candidacy for the office is filed)	We, the undersigned qualified elec-	ctors of the Assembly District 63	
petition for the recall of	Robin Vos		(jurisdiction or d	istrict of officeholder)
-	(name of officeholder to be recalled and office)	rom office pursuant to Article XIII, Secti	on 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes.
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" Kurym Haye	Kelsey Hayes	8550 Horizon Dr	Orown Ovillage Burlington	5/21/2
James Offer of	Louis O Neal I	1488 Meadow (1)	Village Burlington	7200
Webseller 1	Jackie Loether	1488 Moadow In	Village Berlington	(120)20
shampluc	Thomas Miley	3602 505 Honey Lake Rd	Town Village Durlington	5/00/29
6 Sandra Paters	Sandra Peters	3500 S. Hores Lake Pd	DITOWN D I	5-27211
7. Howal plants	Howard Kildahl	8816 Country l'ewlane	Original Published Publish	5,22,24
Shown Toldage	Sharon Kildahi	8816 Country View Lane	Befown Uvillage R	5000
9. /	1 Anderson	6305 'A 1311	STOWN DUY LING TON	22201
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- Allog Mayor	Jusan Beyer	8115 Country View Ln	City Burlington	5/22/24
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L-170 (Rev 2019-09) The information on this form is require	ed by Wis. Stats. §§, 8,40 and 9,10. This form is prescribed by the V	of circulator Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-8	3005 web: http://clections.wi.gov email_elections@wi.gov	

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	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distri	ict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	n 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
	(name of officeholder to be recalled and office)	TRATERMENTS OF REACON FOR RECALL		
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5. My 22	Brackbrown	9242 Dahlia Ln	U Village MT PEASUNT	5-19-24
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(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 recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her				
name. I know their respective residences given.	I support this recall petition. Lam aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
5-10-2021	- WWW TIME			Page No. 1185
(date) EL-170 (Rev. 2019-09). The information on this form is requi		re of circulator) e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	6-8005 web: http://elections.wi.gov email. elections@wi.gov	12.
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	RECALL PETITION	Call - Accombly District 63	
TO: The Wisconsin Election Commission	. We, the undersigned qualified elected	(jurisdiction or district	t of officeholder)
(official with whom nomination papers or declaration of candidacy for the office is filed)	A . 1 VIII Cartion	12 of the Wisconsin Constitution and §.9.10 of	
petition for the recall of Robin Vos	from office pursuant to Article XIII, Section	1 12 of the Wisconstit Constitution and 3	
(name of officeholder to be recalled and office)	TATEMENT OF REASON FOR RECALL	No restaurant of reason is required to initiate the recall of	state, congressional,
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NO DECEDITION	704 Hwy V.	Octy Pacine Wis	5/19/24
Jan	Certification of Circulator Treside at SIG M SUPPLE 8 B	Elanson IL 60	505
i, Wat visit is a second	()	(circulator's residence - include number, street, and municipality) Wis, Stat. § 6,03, I personally circulated this recall petition and the paper with full knowledge of its content on the date	and personally obtained each of indicated opposite his or her
I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented name. I know their respective residences given. I support this recall petition. I am aware that falsifying	d by the officeholder named in this petition. I know that each person signs this certification is punishable under § 12.13(3)(a), Wis, Stats.	neu me paper with ran anomeografic	Page No. 1186
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(date) (date) (signat EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the	ture of circulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2	66-8005 web: http://elections.wi.gov email: elections@wi.gov	

The Wisconsin Election Commission

____. We, the undersigned qualified electors of the ____Assembly District 63

(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distri	ict of officeholder)	
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.	
	(name of officeholder to be recalled and office)	CE A TEMENT OF DE A CON FOR DECALL			
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Aunthur	Charlee Warner	123418 Plank Rd. 11	Orillage Kansa-SVIIIe	5/19/24	
2. ()	Deven Pell	23418 Allank kg	a Village Langas ville	5-19-24	
3. (20)	Eric Duller	23419 Plank Rd	Drivilage La (1505VIII)	5.19.24	
4. Patette	Patrick Mingus	27450 Kountree Rd	ViTown ☐ Village ☐ City V. Q. C	5-19-24	
5. 10.19	Mace Trantman	29/26 Rountree Rd	Uvillage Burlington	5-19-24	
6. Jun Bregenzer	Tim Bregerzer	224 N, Kane St	Ochy Burungton	5-19-24	
7 Sarahollivas	Sarah Sullivan	149 3, Kare S7.	O Village Bull of Scity	5/19/24	
8,			☐ Town ☐ Village ☐ City		
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1, Noah Zimm	ermar (, certify: I	reside at Certification of Circulator	6. Evan Ston L 602	202	
the signatures on this paper. I know that the signe	rs are electors of the jurisdiction or district represented	were a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person significant			
name. I know their respective residences given.	I support this recall petition. I am aware that this fying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 1187	

EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8 40 and 9 10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov |

(signature of circulator)

TO: The Wisconsin Election Commiss	sion	RECALL FEITION		
	mination papers or declaration of candidacy for the office is filed)	We, the undersigned qualified elec		
petition for the recall of	Robin Vos	from office marquent to Adiala VIII Carl	(jurisdiction or dist	
\.	(name of officeholder to be recalled and office)		on 12 of the Wisconsin Constitution and §.9.10 or	f the Wisconsin Statutes.
(The reason for recall must be stated on peti- legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit su	itions for city, village, town, and school district officials. Th	STATEMENT OF REASON FOR RECALL e reason must be related to the official responsibilities of the officeholder trips from the CCP, failure to protect Wisconsin farmland from the CCP,	T. No statement of reason is required to initiate the recall o	f state, congressional,
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1 llama	Ileanna Esser	5623 (Lth st	□ Town □ Village □ Sucity □ Village	5/24/24
2 Marsh	MATTHEW FOERGIER	532[[leth St # 7]	O Town O Village O City	5/21/2
3 D.Bame	Passionelle Barrios	2036 Have St.	UNITED VIIIAGE CACHY	5/24/24
the	Chasity Houtsinger	4315 Yates dr 211	Village MOUNT PLASBUY	5/24/24
Musses	RUSS Barthure	4315 Yates & 211	Ocity Mount Pleson	5/24/2
· Dorothy Hick	mon Dorothy HiCh	4430 gates Dr Anto	O Village Mount Pleason	t 5/24/24
Segland him	Stephanie Byn	4440 Yates Drive Apt 101	Orlinge Mart Plasaut	5/24/24
8 5 1	Shalok Katare	1445 S Emmertin Rd, 201	Village Mt. Pliasmt	5/24/24
9. Juneal	Ghradd na fatel	1495 S Emporsalkdie	10 Village MH 1 Ple 00 7	5/24/2h
10. Doshor Way	Dasha Clark	4400 Yastes Dr 2012	Utiliage My Pleasat	5/24/24
1, Kandy Stante	enstrip certify: I	Certification of Circulator reside at 2888 Holeanan DR	GRAND Mainie TX.	525-7
I further certify I am either a qualified elector the signatures on this paper. I know that the s	r of Wisconsin, or a U.S. citizen, age 18 or older who, if I wing are electors of the jurisdiction or district represented en. I support this recall petition. I am aware that falsifying	ere a resident of this state, would not be disqualified from voting under W by the officeholder named in this petition. I know that each person signed this certification is punishable under § 12.13(3)(a), Wis. Stats.	(circulator's residence - include number, street, and municipality) Vis. Stat. § 6.03. I personally circulated this recall petition ar d the paper with full knowledge of its content on the date inc	d personally obtained each of dicated opposite his or her
5/24/2024		of figures		Page No. 1188
L-170 (Rev 2019-09) The information on this form is	required by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the	Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-	-8005 web: http://elections.wi.gov email: elections@wi.gov	

TO: The Wisconsin Election Commission		We, the undersigned qualified ele-	ctors of the Assembly District 63		
(official with whom nominal	tion papers or declaration of candidacy for the office is filed)		(jurisdiction or dist	rict of officeholder)	
petition for the recall of	Robin Vos	from office pursuant to Article XIII. Secti	ion 12 of the Wisconsin Constitution and §.9.10 o		
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6.	CHARLES F NORRS	335 VERANDA LN # 110	Town Village A 2 3000 TOWN		
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(name of circulator)	certify: I	reside at SUIVE CIVE PALE		49073	
I further certify I am either a qualified elector of V	Wisconsin, or a U.S. citizen, age 18 or older who, if I we	ere a resident of this state, would not be disqualified from voting under \	(circulator's residence - include number, street, and municipality)	ad managed to the instant of the	
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Page No. 1189

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	. We, the undersigned qualified elect	ors of the Assembly District 63	
TO: The Wisconsin Election Commission	71.15	Qui isdiction of discre	
(official with whom nomination papers or declaration of candidacy for the office is fi	(eq.)	n 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
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SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
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I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older where signatures on this paper. I know that the signers are electors of the jurisdiction or district representations.	recented by the officeholder named in this petition. I know that each person sig	ned the paper with full knowledge of its content on the date	indicated opposite his or her
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		We, the undersigned qualified elect	ors of the Assembly District 63	
TO: The Wisconsin Election Commission	to the continue of the office in filed)	we, the undersigned quanties elect	(jurisdiction or distr	rict of officeholder)
(official with whom nominate	ion papers or declaration of candidacy for the office is filed)	from office pursuant to Article XIII Section	n 12 of the Wisconsin Constitution and §.9.10 of	f the Wisconsin Statutes.
petition for the recall of	Robin Vos (name of officeholder to be recalled and office).	noin onice pursuant to reticle rem, seems		
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5.	Chris Sachson		City Allege WI	2000
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(datc) EL-170 (Rev 2019-09) The information on this form is req	uired by Wis Stats §§, 8,40 and 9,10. This form is prescribed by the	ure of circulator) le Wisconsin Efections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26	66-8005 web: http://elections.wi.gov email: elections@wi.gov	~
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TO: The Wisconsin Election Commission		We, the undersigned qualified elect	tors of the Assembly District 63	
	on papers or declaration of candidacy for the office is filed)	The tree and tree quantities are	(jurisdiction or distric	ct of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes.
petition for the recan of	(name of officeholder to be recalled and office)			
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i, Zachary Steffer	certify: I	reside at 8670 E Clover Anic Id Iroun	(circulator's residence - include number, street, and municipality)	
(name of circulator)	Wisconsin or a LLS citizen age 18 or older who if I v	vere a resident of this state, would not be disqualified from voting under	Wis. Stat. § 6.03. I personally circulated this recall petition a	and personally obtained each
the signatures on this paper. I know that the signe	ers are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person sign	ned the paper with full knowledge of its content on the date in	ndicated opposite his or her
name. I know their respective residences given.	I support this recall petition. I am aware that falsifying	this certification is punishable under § 12,13(3)(a), Wis. Stats.		
5/19/24	abonam Stiff	Wer		Page No. 1192
(date)	(signatu	re of circulator)		
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TO: The Wisconsin Election Commission	C 11 C 1 C C - i- Cled		(Julisatotion of a	istrict of officeholder)
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I further certify I am either a qualified elector of	f Wisconsin, or a U.S. citizen, age 18 or older who, if	were a resident of this state, would not be disqualified from voting used by the officeholder named in this petition. I know that each person this certification is punishable under § 12.13(3)(a), Wis. Stats.	signed the paper with full knowledge of its content on the d	late indicated opposite his or her
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(datc)	(sign	lature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 6	508-266-8005 web: http://elections.wi.gov email: elections@wi.gov	
EL-170 (Rev 2019-09) The information on this form is req	paired by Wis Stats §§ 8 40 and 9.10. This form is prescribed by	DIE MISCONDII FICONOMI COMMISSIONI PROPERTY COMMISS		

_. We, the undersigned qualified electors of the Assembly District 63

The Wisconsin Election Commission

(official with whom nomination papers or declaration of candidacy for the office is filed)

	nation papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	ict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Secti	ion 12 of the Wisconsin Constitution and §.9.10 of	the Wisconsin Statutes
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EL-170 (Rev.2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wii.gov | email: elections@wii.gov

TO: The Wisconsin Election Commission		We, the undersigned qualified elec	tars of the Assembly District 62	
	on papers or declaration of candidacy for the office is filed)	, we, are undersigned quantical elec		trict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII Section	on 12 of the Wisconsin Constitution and §.9.10 o	fall - W
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the signatures on this paper. I know that the signers	s are electors of the jurisdiction or district represented h	ore a resident of this state, would not be disqualified from voting under W by the officeholder named in this petition. I know that each person signed this certification is punishable under 6.12.13(3(x)). Win Sector	is. Stat. § 6.03. I personally circulated this recall petition ar	nd personally obtained each of
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TO: The Wisconsin Election Commission		. We, the undersigned qualified	l electors of the Assembly District 63	
(official with whom nominal	tion papers or declaration of candidacy for the office is filed)			strict of officeholder)
petition for the recall of Robin Vos		from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.		
-	(name of officeholder to be recalled and office)	1	,	
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(The reason for recall must be stated on petitions	s for city, village, town, and school district officials. The	reason must be related to the official responsibilities of the office	holder. No statement of reason is required to initiate the recall	of state, congressional,
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Robin Vos should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CC	CP,	
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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 recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis, Stats.

(signature of circulator)

Page No. 1197

EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats §§ 8 40 and 9 10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://clections.wii.gov | email: elections@wii.gov

TO:_	The Wisconsin Election Commission		. We, the undersign	ed qualified electors	of the Assembly District 63	
	(official with whom nominati	on papers or declaration of candidacy for the office is filed)		1		strict of officeholder)
petitio	n for the recall of	Robin Vos	from office pursuant to A	rticle XIII, Section 1	2 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes.
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TO: The Wisconsin Election Commission		We, the undersigned qualified elected	ors of the Assembly District 63	t of officeholder)	
(official with whom nomination papers or declaration of candidacy for the office is filed)		(jurisdiction or district of officeholder) from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.			
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	12 of the Wisconsin Constitution and 9.9.10 of	the wisconsin statutes.	
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EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://clections.wi.gov | email: elections@wi.gov

TO: The Wisconsin Election Commission		. We, the undersigned qualified elect	fors of the Assembly Blother of	strict of officeholder)		
(official with whom nominati	on papers or declaration of candidacy for the office is filed)					
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Section	on 12 of the Wisconsin Constitution and §.9.10	of the wisconsin Statutes.		
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