TO T-111 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		RECALL PETITION		
TO: The Wisconsin Election Commission		. We, the undersigned qualified ele		
	on papers or declaration of candidacy for the office is filed)			listrict of officeholder)
petition for the recall of	Robin Vos (name of officeholder to be recalled and office).	from office pursuant to Article XIII, Section 2	ion 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes
		STATEMENT OF REASON FOR RECALL		
legislative, judicial, or county officials.)	for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officeholderips from the CCP, failure to protect Wisconsin farmland from the CCP,	et. No statement of reason is required to initiate the reca	ll of state, congressional,
lack of committment to election integrity, blocking	lower 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 N	NAME OF THE MUNICIPALITY OF RESIDENCE M	UST 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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, Grace Huff	. certify: I	Certification of Circulator reside at 50377 TOLKNEW DV. Ch	ester Geld MI 480	47
(name of circulator)  I further certify I am either a qualified elector of V the signatures on this paper. I know that the signe	Wisconsin, or a U.S. citizen, age 18 or older who, if I was are electors of the jurisdiction or district represented	ere 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 this certification is punishable under § 12.13(3)(a), Wis. Stats.	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petition ned the paper with full knowledge of its content on the date	n and personally obtained each of indicated opposite his or her
4-24-24 (date)	JA vell (signahu	per of circulator)		Page No. 701
L-170 (Rev 2019-09) The information on this form is require	red by Wis Stats 88 8 40 and 9 10. This form is prescribed by the	Wisconsin Flections Commission   P.O. Box 7984 Madison, WI 53707-7984   608-26	66-8005 lweb: http://elections.wi.gov.lemail.elections@wi.ee	

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

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 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).		3,,,,,	me moemom outlines
			STATEMENT OF REASON FOR RECALL		
(The rea	son 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,
Robin V	ve, judicial, or county officials.)	of the Chinese Communist Barby (CCB), accontance of	trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of c	ommittment to election integrity, blocking I	lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
TI	IE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	ME OF THE MUNICIPALITY OF RESIDENCE MUS	T AI WAVS BE LISTED
	SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	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
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I further	certify I am either a qualified elector of V	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	(circulator's residence - include number, street, and municipality)	nd personally obtained each of
the sign	atures on this paper. I know that the signer	rs are electors of the jurisdiction or district represented	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 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.		- opposit the c. not
	4-25-24	MALA	el allott		Page No. 702
	(date)	(signatur	re of circulator)		102
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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

The Wisconsin Election Commission

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 dist	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 o	f the Wisconsin Statutes
		(name of officeholder to be recalled and office).		and and an extension community of the	the wisconsin statutes.
			STATEMENT OF REASON FOR RECALL		
(The reason	on 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,
Robin Vo	e, judicial, or county officials.) s 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,		
			r his own constiuents by calling them "whack-jobs, morons, and idiots."		
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	C - 0 0 11		Certification of Circulator	0 11 1 110 11 1	
I,	Grace Hu	, certify: I	reside at 50377 Dakview Dr. Ch	restertied Mi 48047	
further c	(name of circulator)	•		(circulator's residence - include number street and municipality)	7
the signat	ures on this paper. I know that the signe	rs 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	vis. Stat. § 6.03. I personally circulated this recall petition a	and personally obtained each of
name. I k	now their respective residences given.	I support this recall petition. I am aware that falsifying	this certification is perushable under § 12.13(3)(a), Wis. Stats.	d the paper with run knowledge of its content on the date in	indicated opposite his of her
	4-26-24	Mran )	Chilleton .		Page No. 703
	(date)		e of circulator)		, 00
L-170 (Rev	.2019-09) The information on this form is requi	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   608-266	-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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1 Jall Doon M	att Olson	432 5 herdrickave Apt 11	University Buckington, wI	4-27-24
HealaBeanol H	eather Bograll	433 Orchard St	Uvillage Burlington, W 53/05	4/27/24
3 Lifewholtenski T	Yler Rut kowski	5785 Gail lynn Trace	Village Bulington	4/27/24
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I, Grace Hufe (name of circulator)  I further certify I am either a qualified elector of Wiscon	nsin, or a U.S. citizen, age 18 or older who, if I w	Certification of Circulator reside at 503 77 Circulator Service a resident of this state, would not be disqualified from voting under V	(circulator's residence - include number, street, and municipality)  Vis. Stat. § 6.03. I personally circulated this recall petition an	8047 ad personally obtained each o
me signatures on this paper. I know that the signers are ename. I know their respective residences given. I support	electors of the jurisdiction or district represented ort this recall petition. I am aware that falsifying	by the officeholder named in this petition. I know that each person signer 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
4-27-24	Brac	of circulator)		Page No. 704

TO: The Wisconsin Election Commissio	on .	. We, the undersigned qualified elect		
	ination papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	
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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· Grace H	TUPE certify:	I reside at 50377 Oakview D	6. Mestertield MI	48041
(name of circulator)			(circulator's residence - include number, street, and municipality)	
I further certify I am either a qualified electo	or 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 represente	d by the officeholder named in this petition. I know that each person sign	led the paper with full knowledge of its content on the date i	ndicated opposite ins or ner
name. I know their respective residences give	ven. I support this recall petition. I am aware that falsifyin	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 705
4-28-24	Mide	V LUGG		705
(date)	(signa	ture of circulator)	6 9005 hyab: http://elections.uj.gov/email:elections@usi.gov	
EL-170 (Rev. 2019-09) The information on this form is	s required by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the	he Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-26	10-6003   Web. http://electrons.wi.gov   email. electrons@wi.gov	

\_. We, the undersigned qualified electors of the \_\_Assembly District 63

The Wisconsin Election Commission

(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	ict of officeholder)
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2 gh kir	John Kiehlbauch	1216 N. Sungstage Pr. #102	Drown Mt. Plenent	4-23-24
Think	Jennifer Petersen	1140 N. Sunnystone Or#19	Village Mt Pleasant	4/23/24
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5 Goyn M Lawyski	Jamen Sadowski	1225 N. Sunuslope #102	Village Mt. Pleasant	4-33-24
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4-23-24				Page No. 706
(date) L-170 (Rev 2019-09) The information on this form is require		e of cir <del>culator)</del> Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	8005 lweb: http://elections.wi.gov.lemail.elections@vii.gov.	

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,	DAVID BRADI	, certify:	I reside at 552 Sount summy p	(circulator's residence - include number, street, and municipality)	2706
I further certi	(mine or encumer)	4 2	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	s on this paper. I know that the sign	ers are electors of the jurisdiction or district represente	ed 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	w their respective residences given.	I support this recall petition. I am aware that falsifying	ng this certification is punishable under § 12.13(3)(a), Wis. Stats.	E TO THE PERSON OF THE PERSON	
2	0/11/2024	Mavi	Osrallord	A Second Property of the second secon	Page No. 707
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L-170 (Rev. 201	9-09) The information on this form is requ	ired 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   608-26	6-8005   web: http://elections.wi.gov   email: elections@wi.gov	

TO:	The Wisconsin Election Commission		. We, the undersigned qualified elec-	ctors of the Assembly District 63	
	(official with whom nominate	on papers or declaration of candidacy for the office is filed)			strict of officeholder)
petitio	n 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).			
			TEMENT OF REASON FOR RECALL		
		for city, village, town, and school district officials. The reason	on must be related to the official responsibilities of the officeholde	er. No statement of reason is required to initiate the recall	of state, congressional,
	ive, judicial, or county officials.)	of the Chinese Communist Party (CCP), acceptance of trips to	om the CCP, failure to protect Wisconsin farmland from the CCP,		
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lack of	committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for his o	wn constiuents by calling them "whack-jobs, morons, and idiots."		<u> </u>
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	A TORES 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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l,	DAVIO BRAD	, certify: I resid	e at 357 Sull Student Le M	(circulator's residence - include number, street, and municipality)	
I furthe	(minic of circulator)	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 sign	atures on this paper. I know that the signe	ers are electors of the jurisdiction or district represented by th	e 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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	3/20/2029	Mark	lead		Page No. 708
	(date)	(signature of cir	ulator)		
L-170 (R	ev 2019-09) The information on this form is requi	red by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the Wisc	nsin 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 Con	mmission		. We, the undersigned qualifi	ied electors of the Assembly District 63	
(official with who	om nomination papers or declaration of candidac	y for the office is filed)			trict of officeholder)
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			TEMENT OF REASON FOR RECALL		
		ol district officials. The reas	son must be related to the official responsibilities of the offi	iceholder. No statement of reason is required to initiate the recall	of state, congressional,
legislative, judicial, or county official.		(CCP) acceptance of trips	from the CCP, failure to protect Wisconsin farmland from the	CCB	
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1. Madison	Same De Wolf	certify: I resid	de at 12454 41 of 1x	Present Marne, WI, 531	700
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	a resident of this state, would not be disqualified from votin	(circulator's residence - include number, street, and municipality) g under Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each o
the signatures on this paper. I know that	at the signers are electors of the jurisdiction	or district represented by the	he officeholder named in this petition. I know that each per	rson signed the paper with full knowledge of its content on the date i	indicated opposite his or her
name. I know their respective residence	ces given. I support this recall petition, I a	m aware that falsifying his	certification is punishable under § 12.13(3)(a), Wis. Stats.		
05/27/2021	4	aderon fach	v deurs		Page No. 709
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L-170 (Rev.2019-09) The information on this	form is required by Wis. Stats. §§. 8.40 and 9.10. T	his form is prescribed by the Wisc	consin Elections Commission   P.O. Box 7984, Madison, WI 53707-798	4   608-266-8005   web http://elections.wi.gov   email: elections@wi.gov	

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

The Wisconsin Election Commission

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of (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.)  STATEMENT OF REASON FOR RECALL  (The reason for recall must be stated on petitions for city, village, town, and school district officials.)  STATEMENT OF REASON FOR RECALL  (The reason for recall must be stated on petitions for city, village, town, and school district officials.)  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 officient responsibilities of the officient or protect Wisconsin farmland from the CCP.  (ack of commitment to election integrity, blocking lower prescription drug costs, and flaggrant disrespect for his own constituents by calling them "what-k-jobs, morns, and idots."  THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST SURVEY AND	ct of officeholder)
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 legislative, judicials, or country 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.  Iack of committment to election integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents 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 STREET & NUMBER OR RUBAL ROUTE  Rual address must also include box or fire no  1. College of the control of t	the Wisconsin Statutes.
Registative, judicial, or county officials.   Propose	
THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE INCIDENT SIGNATURES OF ELECTORS  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village  Union Survival Company Survival	state, congressional,
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Steven Seas On Iragse Certify: I reside at W5179 memorical drive Elkhorn W.F. (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 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 incontent on the date in the date i	d personally obtained each o dicated opposite his or her
05-04-24  Separature of circulator)	Page No. 710

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec-	ctors of the Assembly District 63	
(official with whom nomina	tion papers or declaration of candidacy for the office is filed)			district of officeholder)
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	(name of officeholder to be recalled and office).		2.5.10	of the Wisconsin Statutes.
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he signatures on this paper. I know that the sign	wisconsin, or a U.S. citizen, age 18 or older who, if I was 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 signs	Wis. Stat. § 6.03. I personally circulated this recall petition	n and 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.	ed the paper with full knowledge of its content on the date	e indicated opposite his or her
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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 bush http://elections.va.gov.lemail.elections@us.gov	

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2. Alex Bergs	D & Alex Bersi	737 West lawn Ave	Town Village City Racing	4/25/28
3. Perus Drogna	D Pearly Sczepanski	4425 Garden Dr	Othy Peasant	4/25/24
4. tan Rest	Tami Rast	3346 Oregon St.	Town Styllage Mt Pleasant	4125/24
5. July	Jacob Rodiquel	3030 92 nd St	Sturtevant	4/25/28
6. Jol Kunst	V JOHN KINSLOWS	215619 50 RP,	Otiv PRANKSV121S	4/25/24
7. De lind	John Kirsh	15617 50th A	O Town O Village O City  Trankswill	4/25/24
8. 7. 3.4	Ja Zar L	40109 Stat Rd	ortown village city Franks VIII	4 /25/24
9. and offer	JAY Chochey	299 14998 th ST	Town  Stillage City  Sturding	4/25/24
10. James Not	Jamie mottek	5305-16th St.	XVIIIage MT. Pleasant	4/25/24
	A.1	Certification of Circulator	Am Vero Beach Fl 329	161
I, OS QS (name of circulator)	may a certify:	reside at 7 16 7 N n	(circulator's residence - include number, street, and municipality)	100
I further certify I am either a qualified electe the signatures on this paper. I know that the	signers are electors of the jurisdiction or district represented	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	Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each of indicated opposite his or her
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L-170 (Rev.2019-09) The information on this form is	s required by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the	ne Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-20	ob-8005 [web: http://elections.wi.gov   email: elections@wi.gov	

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	(name of officeholder to be recalled and office).		•	
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(name of circulator)	Wisconsin or all S citizen age 18 or older who if	I were a resident of this state, would not be disqualified from voting un	(circulator's residence - include number, street, and municipality)	
he signatures on this paper. I know that the sign	ers are electors of the jurisdiction or district represen	ted by the officeholder named in this petition. I know that each person :	signed 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 falsify	ing this certification is punishable under § 12.13(3)(a), Wis. Stats.	F.F In the many of the content of the dat	- material opposite ins or ner
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~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 Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   60	8-266-8005  web http://elections.wi.gov   email: elections@wi.gov	

\_. 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)

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.
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tuno	Jewes Toursend	Leslow 918+	Utilage Deasonz Br	4.23.21
2 Cobert Working	ROBERT WOZNICKI	300 FOXWOOD DR.	Utilage WATERFORD, WI	4.23.24
Paula Freund	Paula Freynd	300 Foxwood Dr	Town a village later ford, Wi	423-24
4. Penis Willze Black	y Remai Wilke	135 GARROLL St. WALLESTAM	Village WAULESHA, w/	4-23 -20
5 Bethy B	Bothung Pending	2280 Raderswood Re	Village Budonyton	4/27 24
Robert Conti	Robert Conti	1409 Meadow Wood Rd	Village Bur lington	4/23/24
To getterhoder	be Ketterhage	2389 Stonegate	ONTOWN O'Village Our Lington	4-23-24
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Theus him	Repeace J Hover	7660 Franklin 85	Wilage Beerleyfor	4-23-24
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1. Justin Gace		Certification of Circulator	to sail to const	
I, Justin Gacey	, certify: I	reside at 14695 herring rd Colorac	(circulator's residence include number street and numicinality)	
the signatures on this paper. I know that the sign	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.	Wis. Stat. § 6.03. I personally circulated this recall petition and the paper with full knowledge of its content on the date is	and personally obtained each of indicated opposite his or her
4/23/24 (date)	restin Gra	e of circulator)		Page No. 714
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	(name of officeholder to be recalled and office).		3	
		STATEMENT OF REASON FOR RECALL		
	s for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officehold	der. No statement of reason is required to initiate the reca	all of state, congressional,
legislative, judicial, or county officials.)  Robin Vos should be recalled for his tacit suppor	t of the Chinese Communist Party (CCP), acceptance of	trips from the CCP, failure to protect Wisconsin farmland from the CCP.		
		r his own constiuents by calling them "whack-jobs, morons, and idiots."		
		MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE M MUNICIPALITY OF RESIDENCE	
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no.	Indicate Town, City, or Village	DATE OF SIGNING
Down Cansi	SCOTT CONNOZ	, 7645 PLAINVIEW AUE.	VI Town Utiliage BURLINGTON	4.23-24
2. Special any	Steve Downey	7610 Plainview AUR	Village Burling for	L-23 +24
3. En Hal	ERIC GIVEN	33635 CONTOUR DRIVE	Brown City Bureinator	4/23/24
40000	En 0/0801 3586	P3LJD CONTON DE	Usilage City	4/23/ 74
Tapecial ovoc	PATRICIA KOVAC	2755 Laherrew	Burlinton	\$ /23/24
6 Mayore	Billec, Vujovic	7766 - Keview Dr.	O City O Number	4-23-204
Type The	Kyl franse Krause	7719 Evergeer Fund	Town Village Burlington	4/23/24
8 Print	Brad Nelson	34221 white oak d-	O Village Burlington	4-43-4
" Ch La Lin	Candace Radojevic	663 Calvin Lane	Town Set Village M. Plasant	4-23-24
10. Botten Meden	Brittary Medlin	(pa) Fox Run Lane	Town Mt. Plagant	1/23/24
tolly con		Certification of Circulator	1- (000-100 60	
1, 109/in Gace	, certify: I	reside at 14695 Gerring rd CO101		08
the signatures on this paper. I know that the sign	ers are electors of the jurisdiction or district represented	vere a resident of this state, would not be disqualified from voting unde by the officeholder named in this petition. I know that each person sig this certification is punishable under § 12.13(3)(a), Wis. Stats.	(circulator's residence - include number, street, and municipality) or Wis. Stat. § 6.03. I personally circulated this recall petitiogned the paper with full knowledge of its content on the dat	on and personally obtained each of the indicated opposite his or her
4/23/201	July Can petition. I am aware that raisinging	(Sec.) Wis. Stats.		Page No. 715
(date)	(signatu	re of circulator)		7.10

TO: The Wisconsin Election Commission		. We, the undersigned qualified elect	tors of the Assembly District 63	
	ion papers or declaration of candidacy for the office is filed)			strict of officeholder)
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	(name of officeholder to be recalled and office).	THE TRACE OF DEAGON FOR DEGALL		
		STATEMENT OF REASON FOR RECALL	No statement of reason is required to initiate the recel	l of stata, congressional
(The reason for recall must be stated on petitions legislative, judicial, or county officials.)	s 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 initiale the recut	oj state, congressionat,
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lack of committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
				HOT ALWAND DE LICERD
THE MUNICIPALITY USED FOR MA	ILING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE	MME OF THE MUNICIPALITY OF RESIDENCE M 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
1 Sillustolu	Jillian Stapenan	509 Newman Rd Mt. Pleasont	Prillage Mt. Pleasant	4-23-24
2. And the thomas	ROBERT KLINKHAMME	2 G19 NEWNAN RD, MTPLEASAN	DOWN  NO Village  O City  M. T. PLEA SANT	4-23-24
3.	AYAZDAN NAVUNINXAM	44 PAN DA NAM UBA FES	S-Village Mt PLEASAVT	0/25/24
4 Chun Adin	Charles Adorno	5422 WEST MOORE DR.	a village MT PleaseT	4/23/24
5. M	EVIL Greence	5421 Wet more DV	QVillage M+ P(ealh	4/23/24
6. Dan Dolarin	CORACE FULLAS CIL	733 NEWMANN PO	SEVILLAGE MI PLEASANT	4/23/24
7. Charl conteton	charl carlety	738 Newron pp	Se Village OCity MT Pleasapt	4/23/24
8. Cul	CWB Pearle	82 Dewnen	Si Village Mr Acces	4-23-24
9. Con 5 B. 14	Chris Bigmact	90 NEWMAN RD	Town  Visit Village  City  City	4-27.24
10. Kimbada Birny	Limbert Bengel	901 Wew man Rd.	Solvillage Mt 7 (COBOND)	4-23-24
et and a	5111	Certification of Circulator	to the ID	77515
I, Herror	certify: I	reside at 1603 New Hope to	(circulator's residence - include number, street, and municipality)	2015
(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 w	vere a resident of this state, would not be disqualified from voting under	Wis. Stat. § 6.03. I personally circulated this recall petitio	n and personally obtained each of
the signatures on this paper. I know that the sign	ers 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 dat	e indicated opposite his or her
4-23-24		this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 716
(date) EL-170 (Rev.2019-09) The information on this form is requ		Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-260	6-8005  web: http://elections.wi.gov   email: elections@wi.gov	

The Wisconsin Election Commission

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lack of committment to election integrity, blocki	ing 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	Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1 Add P	Cul: 1D	- 1 1/11	D.Terre	1/2/211
that ear	Sof Callbert RArson	JOHO WISCONSINST	Sturtevant	4/24/29
2. BUNDA P	11 12 16 1	141 - 04	Town 7 6	11/1/
Laway 12	asa Dar Oal leas	1504 20 40 Wescausin St	City Stres levant	1124/24
3. 10 01 1	0 01	2011	Town	
Tony Charles	1 Home Chanles	246 Luedtre nve	ocity Each NO	4/24/24
4.	( ) ( file )	1113 E 11 No	Town MA Plant	14 1/1/21
May sold	2 Joshua Dalvik	1113 Emerald Dr	City 17. 1 Reson 1	7124127
5.	E Dune	1200 0	Town Village M/J O / G man of	1 1 1-
a	For roye	plo top new our	City (E)	41/24/24
6.	9111 Dolgaard	153 Victoria Court	Town Mivilage () nion Grove	11/21/21
	ala Doigate et	100 1.00.10 600.0	City	1/29/29
7. Sell	At 200 63: (1.D)	1678 Hay 1/21	Town Village On CARO	11/21/2
111	There was	10 × 0 1 /aux (1 +0/	ocity COLIVIC	19/2016
8. //out dac	Keith Garvin	1500 Coutou Part 1	Town  Styllage AA L Dlases at	11 74 711
mean x	Perior Carret	1308 COUNTY LOND U	ocity Mt. Pleasant	9-27-29
9 Musi Wich	Mindi Silich	1615 Claveland Aug	Uvillage Ou Ou I I O	11-21-24
my succe	That sinds	and the same of th	Town	740
10.	Evan Mian	877 Sturcher TA	Si Village Int Dleason +	4-24-24
11	011	Certification of Circulator	acity 101-17 12-13-13-13-13-13-13-13-13-13-13-13-13-13-	
& Steshen le	Dright certify: I		Senton AR 72015	
(name of circulator)			(circulator's residence - include number, street, and municipality)	
the signatures on this paper. I know that the signatures of the signature of the signa	of Wisconsin, or a U.S. citizen, age 18 or older who, if I was gners are electors of the jurisdiction or district represented	ere a resident of this state, would not be disqualified from voting under very by the officeholder named in this petition. I know that each person signs	Vis. 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
name. I know their respective residences give	n. I support this recall petition I am aware that falsifying	the certification is punishable under § 12.13(3)(a), Wis. Stats.	the paper with run knowledge of its content on the date i	nuicated opposite his or her
4-24-24				Page No. 717
(date)		re of circulator)	4	
L-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 the	Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	-8005   web http://elections.wi.gov.lemail.elections@wi.gov	

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District 63	
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		his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR M	AILING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N.		
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. Meja	Melissa Dya	2931 Wisconsin St	Down Mount Plant	4-24-24
2 Lector	Pam Rector	520 s. Fancher Rd.	Town Willage Mount Pleasant	4-24-24
3. Ken Alon	Les Botter	423 & Fancher Rd	a village Mount Pleasant	4-21-24
4 Blum	Brennan Unisan	336 S Fancher Rd	Town At Pleasant	4/24/24
5. July Ranze	LJUAN BANGEL	209 5 FAICHER Rd	STVIllage Mt. PleasawT	4-24-24
" Weste Areard	Victor Kyprota	10 S FANcher, Rd	Styllage My Phensant	4/24/24
7. NJ 800	Max Syratage	1/00 N Forder he	Solvillage Mt Plengment	4/24/24
8.	1 1		☐ Town ☐ Village ☐ City	
9.			□ Town □ Village □ City	
10.			□ Town □ Village □ City	32%
Deshe	n Whalf certify: I	reside at Certification of Circulator Hope T		015
ne signatures on this paper. I know that the signature	gners are electors of the jurisdiction 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		
ame. I know their respective residences give $4-24-24$		this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 718
(date)  -170 (Rev.2019-09) The information on this form is re-		re of circulator) Wisconsin Elections 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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lack of committment to election integrity, block	ng lower prescription drug costs, and flagrant disrespect for	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 M. Swaney	Michael Swaney	1121 S. Sunnyslopsent Dr. #2	Village Mt. Pleasant W	4/26/24
2 Hollanderno	A Holly Sennett	514 Dunford Dr.	I Town WI WILL Burlington WI	4/26/24
3. General	Audrew Sonnot	514 Duforp DK	Williage & Critication with	4/4/14
4. Well How	Malt Harmeyes	324 Gaffielde St	Town Burlington	4/26/24
5 THAMPAN	KUIGA BIOBCI	324 garfei & St	Unilage BUY (UNCHUY)	412610
6.		0	☐ Town☐ Village☐ City	
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he signatures on this paper. I know that the si	of Wisconsin, or a U.S. citizen, age 18 or older who, if I w gners are electors of the jurisdiction or district represented	reside at Certification of Circulator resident of this state, would not be disqualified from voting under this certification is punishable under § 12.13(3)(a), Wis. Stats.	Renton AR 726  (circulator's residence - include number, street, and municipality) er Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each

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1. Range	James Blake	Heart Road	Styllage Burlington	127/29
2 James V Last	Sames M. SASTO	402 Bluebird	Other Burlington	427/24
3. Mindy	FM SINGER	202 Frankli	Otive Water Jan	4/27/24
4 Carrie Delbut	Corric Albert	28/00 Marthe Co	or Town United WI	4/21/24
5. Lova ast	Laura Albert	28600 Martha Ct	orown village Westerford, W7	427124
6. Democratic	Jessica parth	86el Co Country Wen lune	Oring Puringlan, WI	4/27/24
7. WYY	Lyay Bylian	748.5 pine 5+.	Village Bulington WI	4127121
8. May	miguel Garcia	7662 Highland avo	Unilage Righting 90 n WI	4/27/24
9. Forein'l	Lorena Garcia	7662 Higland ove	Village Burlington, w1	4/27/24
10. Comy	Henry Gascia	7662 Higland are	Village Bulling CN, WI	4127/24
I, State (name of circulator)	Orght , certify: I	reside at 1603 New Hope	Rd Benton AA	72015
I further certify I am either a qualified elector of the signatures on this paper. I know that the sign	cis are electors of the furisdiction of district represented	ere a resident of this state, would not be disqualified from voting under to by the officeholder named in this petition. I know that each person signs	(circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition as ed the paper with full knowledge of its content on the date in	nd personally obtained each of dicated opposite his or her
1 - 27 - 24	i support this recall petition. Tam aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
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1.	for set	Tion House	Oxl Com 10 Acc	U Town	Market
	the one Stevenso	liftony fevenson	901 Grove Ave.	excity Kacine NA	7/24/24
2.	( A DI. )	0/1 11. 1	cin N	Town	11111111
	Tuxe pury	corresto Heinaudo	66/2 Duraled Ave	ocity of leasen	4/24/24
3.	7 1	(2 )	MAL D	☐ Town ☐ Village	1112 11211
	and of	cory bontaltz	7510 Republic Ave	Defty 1240,02	4 51150
4.	2 11 17	ERIC Sevell		Town Village Ma 7 P1 CACA 17	4717
	and Devel	CRIC SEREII	1030 NSUNDPSIOP 20 7	ocity MILENZADI	7-24-24
5.	accord and	Wheel Arout	14121. 1+1 5+20+	Urllage A C	414111
	- care a capus	Migut	ation of see	Town	1-17-d4
6.	hun or ne	Jacob Luoroski	651/ Green Ridge Dr	Village MI Pleason T	4-24-24
	9		ar / brancing Di	□ City C T ( 7 × × × × × × × × × × × × × × × × × ×	~ /
7.	Jod Hegerman	Jod; Hegeman	727 Corneistone Court	UVIllage Water ford	4-74-74
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8.	the cisting Tiles of	Minha Penan	4543 Party Ave	City (heldonic	4-74 24
0 -				Town MY 8:51	
3.	10) voin	Tom DIXON	3211 DURAM ANE 110	Si Village City City	4-24. 29
10.	MY and hand	Annie	Octob de la co	Town C L . I	11/21/12/1
	11 ac/ M	Mariela Morales	5901 Bradway Dr.	Village STUKEVANT	4124127
	(Mass H		Certification of Circulator	2 11/1/02/12/12	. 1
I,	CAUS [	vcc , certify: I	reside at 4536 46 TH ST. M	U, WASHWOOD D	C 20016
I furthe	(name of circulator) r certify I am either a qualified elector of V	Visconsin, or a U.S. citizen, age 18 or order who, if I we	e a resident of this state, would not be disqualified from voting under	(dirculator's residence - include number, street, and municipality)  Wis. Stat. 8 6.03. I personally circulated this recall petition a	nd personally obtained each of
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	9/24/2024		4		Page No. 721
L-170 (R	ev 2019-09) The information on this form is require		e of cfrculator) Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	5-8005 hugh: http://elections.usi.gov.lemail.elections@	

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Car Drue	Haron toess	9203 Dahla Lane	ocity M+ flegsant	9/24/24
2 1/2 1 1/2 - 210.	11.10 5000	6010 0 11.1	Normal Straight And And Andrews Andrew	11/2 11-1
Fasher VVIII	Kasna Thess	1203 Danila Ln	ocity /V/T YeasanT	4/24/24
3. 16	16 Di -	1730 1111	Town	11/11/11
1995	royman fivera	1 136 Millarum 51	acity Union Nove	7/04/24
4			☐ Town ☐ Village	
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			City	
(1)0.0	+111	Certification, of Circulator	1/11/1/10/11/1	N DC 20016
_ CHUS	TVU certify:	I reside at 4536 46TH ST.	1000, WASHINGTO	DE 20016
further certify I am either a qualified elector of	f 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 u	(circulator's fesidence - include number, street, and municipality) under Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each of
e signatures on this paper. I know that the sign	ners are electors of the jurisdiction or district represente	d by the officeholder 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
ame. I know their respective residences given	I support this recall petition. I am aware that fall fyir	ng this certification is punishable under § 12.13(3)(a), Wis. Stats.		- W
9/24/2	4	V/V		Page No. 722
(date)	/signa	ture of cir(u) (or)		

The Wisconsin Election Commission

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

petition for the recall of	Robin Vos	from office pursuant to Article XIII, Sec	ction 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		
legislative, judicial, or county officials.)	for city, village, town, and school district officials. The	reason must be related to the official responsibilities of the officehol		of state, congressional,
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."		
THE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE		
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. May	many noicon	2901 Gillen St	Utiliage Raline	04/24/24
2. Quim linggooth	Julie M. Koszkowski	8716 Queinsbury Lane	City Sturtevant	4-24-24
3. Marie Guleoje	13/12/ANA GRUBACIC	6743 BROOKS 9	Town Willage M. ILASAWY	04/24/29
4. Page Syc	Renee George	707 Newman Rd.	St. Village Mt. Pleasant	19/024/29
5. Oakedalle	variene doellep	S314 Racina wire	No Village Mt Pleasant	4/14/24
6. Caughilan	CARRY AUN OWEN	6613 DURAND AVÉ	Octy Mr PLEASANT	4/24/24
2 Januar Bengan.	JAME! R Bergm	182 County Rope V	Willage MT. PCEASANT	4.24-24
8. Date Ques	GALE IVES	210 HKV	a village Mt PLEASANT	4-24-24
9 Est Des	EURLYN Iveg	Die Hy. V	Styllage mt Pleasant	4-24-24
10. Kome	Doug KAMMer	314 HVV	Si Village M+ Pleasan T	4-24.24
CHOIS H	VrL , certify: I	Certification of Circulator	UW WASHINGTON D	L 20016
(name of circulator)  I further certify I am either a qualified elector of V the signatures on this paper. I know that the signe	Wisconsin, or a U.S. citizen, age 18 or older who, if I or sare electors of the jurisdiction or district represented	ere a resident of this state, would not be disqualified from voting und by the officeholder named in this petition. I know that each person s	(circulator's residence - include number, street, and municipality) der Wis. Stat. § 6.03. I personally circulated this recall petition signed the paper with full knowledge of its content on the date i	and personally obtained each of indicated opposite his or her
name. I know their respective residences given.		this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 723
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## RECALL PETITION We the undersign

(official with whom nor	mination papers or declaration of candidacy for the office is filed)	we, the undersigned quantile	d electors of theAssembly District 63(jurisdiction or dis	trict 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	of the Wisconsin Statute
	(name of officeholder to be recalled and office).			
The reason for recall must be stated on noti-		STATEMENT OF REASON FOR RECALL		
recast for recall must be stated on peti-	tions for city, village, town, and school district officials. The	reason must be related to the official responsibilities of the offic	cholder. No statement of reason is required to initiate the recall	of state, congressional,
	pport of the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the C	CCP.	
		his own constiuents by calling them "whack-jobs, morons, and idio		
THE MUNICIPALITY USED FOR	MAILING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. T	HE NAME OF THE MUNICIPALITY OF RESIDENCE MU	ST 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
1	JOSH CHITISTIANSO	1201 center for	□ Town	11/20/20
The same	059 Christinson	was Grove	2 Village Union grave	9/18/2
2. 0 1 1	10 × 10	1210 000000	□ Town	11-01
- grown	- Honora tranks	1340 CENTER ST	acity Union Grove	4/20/24
3. 1 1 1-1	THE TOTAL PROPERTY OF THE PROP		□ Town	1. 1-1
Notal Oloti	y Sarah wnithey	1351 nrihst	Ocity 120100 000198	4120121
Contract Contract	The surviving	1001 1191101	Town	710010
4 Kanen Jehalla	Vacon Schahla	1701 State St	SKVillage	11/20/2
Jown Solding	NAIDEN SCHUDIG	THE STATE	Drown Onion GROVE	4/28/24
5.			☐ Village	
			□ City	
6.			☐ Town☐ Village	A STATE OF THE STA
			□ City	1 1 1 1 2 2 3 7 7
7.			☐ Town☐ Village	
			□ City	
8.			Town	
			□ Village □ City	
9			☐ Town	
			☐ Village ☐ City	
10.		And the second s	□ Town	
10.			□ Village	
		Carre di CCI II	□ City	
(2theoine)	1 Rtice	Certification of Circulator reside at 10920 12:dee Diver	- 21 1D AD 777.2	
(name of circulator)	, certify: I	reside at 16920 Ridge River	(circulator's residence - include number, street, and municipality)	
further certify I am either a qualified electo	or 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	inder Wis Stat 8 6 03. I personally circulated this recall petition	and personally obtained each
ie 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	n signed the paper with full knowledge of its content on the date i	ndicated opposite his or her
ame. I know their respective residences give	ven. I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
April 28, 20	1 and	oure Justin		Page No. 724
(date)	required by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the	e of circulator)		

TO: The Wisconsin Election Commission		. We, the undersigned qualified e	electors of the Assembly District 63	
(official with whom nominat	ion papers or declaration of candidacy for the office is filed)			strict of officeholder)
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		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 officeho	older. No statement of reason is required to initiate the recall	of state, congressional,
legislative, judicial, or county officials.)  Robin Vos should be recalled for his facit support	of the Chinese Communist Party (CCP), accentance of	trips from the CCP, failure to protect Wisconsin farmland from the CCF		
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.		
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1. Poranghill	Perry Wither	Z4906 Hánalla Dr	Unillage Povey	5-5-24
2.	Shaw A Place	308hillside DR	Utillage BUN1149401	\$ 310524
3.	DAND Hee Hall	422 Whipple tree for	DAYIllage Waterful	05 g 3 4
4.	No son Safor	2355 Stones de	U Village	DEGREE
5. Kinger Worly	Kovied Mooiley	2128 650 DV.	Servillage Linush Grove 53/6/	05-5-24
6.			☐ Town ☐ Village ☐ City	
7.		A Salar	☐ Town ☐ Village	
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			O City	
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			City	
	-	Certification of Circulator	La City	
, Steven sean (name of circulator)	Ohlrugge , certify: I	reside at W5179 mamorial driver	Elkhom, WI 53121	
(name of circulator)	Wissensin or a U.S. sitizen oga 18 er elder ube if Lu		(circulator's residence - include number street and municipality)	
the signatures on this paper. I know that the signa	ers are electors of the jurisdiction or district represented	ere a resident of this state, would not be disqualified from voting und by the officeholder named in this petition. I know that each person s	der Wis. Stat. § 6.03. I personally circulated this recall petition	and 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.	signed the paper with full knowledge of its content on the date	indicated opposite his or her
05-05-2024	8000	2		Page No. 725
(date)		re 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 the	Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608	8-266-8005  web: http://elections.wi.gov   email: elections@wi.gov	

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District 63	
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	(name of officeholder to be recalled and office).	TATEMENT OF DEACON FOR DECALL		
(The reason for recall must be stated on natition		TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder	No statement of regroup is required to initiate the recall.	of state congressional
legislative, judicial, or county officials.)	s for city, viriage, town, and school district officials. The	reason must be related to the ornicial responsionnes of the officeholder	. No statement of reason is required to initiate the recuit	ij state, congressionat,
	t of the Chinese Communist Party (CCP), acceptance of tr	ips 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	his own constiuents by calling them "whack-jobs, morons, and idiots."		
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		UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE MU	DATE OF
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1 July Law valt	Judy LAWOVatta	3036 91st St	Town STUKTEVant	4-24-24
2. honor	Keith Albertson	3224 925	B.Village Stuntovant	4/24/124
3. Min	Nicholas Exnar	10024 northwestern we	Drown Avillage Egladonia	04/24/29
4.	Sasan La Schiave	10232 NW Aug.	Town Pillage Caledovia	04/24/24
5. Da Cemp	Joy Engel	3339 Marris St	Drown Willage Calcolin! 9	4/24/24
6. John July	John Taycon	7925 Whitetail DK	Do Village Oct Mark Melany	4/21/24
Musing thenes	Courtney Thomas	8016 Whitefail Dr	Drown Dr. Pleasant	4/24/24
8 VeraBall	a Debra Beike	7208 Northwestern Ave	ority Roledonia	4/24/24,
"Macho CX	Sabono Carter	1814 lash Street	O Village City Racine	4/24/24
10. Marion Marre	y Marian Mamero	474 Lake Aul	Unilage Racine	4/24/24
orstin Gracia		Certification of Circulator	lorado springs CO 68	1908
1, OCTIN Gracie	, certify: I	reside at 19695 herring to Col	(circulator's residence - include number, street, and municipality)	108
(mino of circulator)	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		and personally obtained each of
		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 i	ndicated opposite his or her
1 know their respective residences given.		this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 726
4/27/24	Justin G	e of circulator)		1 age 110. / 20
L-170 (Rev 2019-09) The information on this form is requ		Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-260	6-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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The reason for recall must be stated on netition		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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Robin Vos should be recalled for his tacit suppo	ort 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	ng lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		1,34
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		RACINE, WI	□ Town	Sidiano.
1 8	GRACE BURG	3430 HAVEN AVE 534 05	Ocity RACTIZE	1494-24
2		(0.70)	Town DV:illage M14 D/	11/10/1/201
2 MERI A. Stougaar	d Heri U. Stougagna	4215 Spring St.	city 1117. Reason	7/24/34
3.	Daylouin	2400 1000 1000	□ Town □ Village	4-7-4-74
(IV)	Raul Aviio	1400 horaine Ave.	ocity /2 a Ci Ne	101-69
4. James Otto	Lames OH3	410 Indain HILIS Dr.	Village Mount plagant	4-24-49
5. Elizabeth A. Gumm	Elizabeth A. Green	609 Graceway Dr.	Village Caledonia	4-24-24
6. / A A	Maria South	1976 N/WT ST Zaine, WI	Utiliage Racine	4.24.24
7/0	Ch	03=11	□ Town □ \text{\tiny{\text{\tiny{\tinit}}\\ \text{\texi\text{\texi}\text{\text{\texi}\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\texit{\text{\tex{\text{\text{\texi}\text{\text{\tinit\text{\texi}\text{\tin	11 - 20
Clipbash RR	um Whatofu Boro	835 Tayes Ave	Vacity Malenea	4-24-24
866	Fran Blin	13623 4 mire Rosa	Village Cum Jania	4-24-21
"SBMM	Sarah Bam	136234 mile Rd	Uvillage Colledong	4/24/24
10. Larena Mar	Lineyerena Martine	5526 Lasale	Unity 2000	9/24 124
+ (1)		Certification of Circulator	1 - 5 1 1 - 5 1	
, tostin Grac	, certify: I	reside at 14695 herring rd co	lorado springs co	
(name of circulator) 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 V	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each of
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name. I know their respective residences give	n. I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 707
9/29/29 (date)		1ac 4		Page No. 727
-170 (Rev 2019-09) The information on this form is re		re of circulator)	\$005 hugh: http://elections.usi.gov/amail.elections@usi.gov	

TO: The Wisconsin Election Commission		. We, the undersigned qualified e	lectors of the Assembly District 63	
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"Coy ofh	Cony J Rosen	1803 Domanik Dr	United Pacine	4/24/24
2. 10.2	JOSH CAIN	2309 Summit AU	Uvillage PACINS	4/24/24
3.	Hear Holbroile	1576 Com 5+	Village Pacine	4/24/21
4. Al Medry	John Meding	409 LuidtKe St	Village Cacine	4-24-24
ing to	Mike Friesema	5410 Chestant Dr	Village Caledonia	4-24-24
6. Carlos Silva	Cados Silva	97 villa st	Usillage Racille	4-24-4
7. Collapoints	Coleb Roberts	1811 Grand AVe	Unillage ROLIX C	4-24-24
8.			□ Town □ Village □ City	
9.			□ Town □ Village □ City	
10.			Town	
			☐ Village ☐ City	
tobles ( a co		Certification of Circulator		
toftin Gracie	, certify:	I reside at 10695 herring 10 col	orad springs Co 80	908
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	were a resident of this state, would not be disqualified from voting und d by the officeholder named in this petition. I know that each person s	(circulator's residence - include/dumber, street, and municipality) ler Wis. Stat. § 6.03. I personally circulated this recall petiti igned the paper with full knowledge of its content on the da	on and personally obtained each
		ng this certification is punishable under § 12.13(3)(a), Wis. Stats.	and the paper with the showledge of the content of the de	nareaca opposite ins of tier
4/24/24	T-UST'N	raciel		Page No. 728
(date)	(signal	ture of circulator)		
-170 (Rev. 2019-09) The information on this form is requi	red by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the	he Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608	3-266-8005   web: http://elections.wi.gov   email: elections@wi.gov	

TO:_	The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District 63	
	(official with whom nomination	papers or declaration of candidacy for the office is filed)		(jurisdiction or dist	rict of officeholder)
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		the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
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1.	And Touted	Chris Southant	3065) Quercel Are	Matrown Utillage City  Butility tun	4/27/24
2.	See Out	Surina Ebbott	400 20 Pine Speet	Town Village Burlington	4/27/24
3.	1Am	Lule Bacezal	7901 (0) gr Dr	To Fown  a Village  c City	4/27/14
4.	Neine Sil	Desiree Sitz	WG70 Kearney Rd	working Purchase	4/27/21
5.		AutoNia Bartobus	733 Fextrail clr.	Town Village Tag(City  City	4/27/24
6.	\$	Subriin Brandt	372 E. Market st	Town Village Sur lington	4/2-124
7.	allen Galf	DALTON BARNAS	L377 E. Masket st	Ullage Sullington	74/27/24
8.	La Corqual	Lisa Dipasquale	P8 1970 HEIBM	Ullage Borungton	558 4-2n-24
9.	Dath/Rell	Davielle Petkus	448 N. Pice St	Village Byllmoton	4-27-24
10.	Karnes	Kastin Males	801 Browns Layle Dr	Uvillage City	4-27-24
	021/20=:00	lisation.	Certification of Circulator		
I,	Cathenne	JUSTICE , certify: I	reside at 10970 Rains RD	LR AK 78210	
I furthe	r certify I am either a qualified elector of Wi	sconsin, 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	(circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition a	and personally obtained each of
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	117724	- FAI	rerue futto		Page No. 729
L-170 (R	(date)	1/	re of circulator) Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	6.8005 hugh http://elections.ui.gov.lamail.elections@ui.gov.	

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(The reason for recall must be stated on petitions	s for city, village, town, and school district officials. Th	e reason must be related to the official responsibilities of the officeholde	r. No statement of reason is required to initiate the rec	call of state, congressional,	
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lack of committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect fo	r his own constiuents by calling them "whack-jobs, morons, and idiots."			
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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	
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Storage	Stephanel Arroyo	1546 W. Chestnut St	Desity Burlington	4127/2024	
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4 Dennie Thomas	Danie Thomas	2905 MAPLE Rd BUSTINGTON	-B-Village	4-27-24	
The promes	Dennis Ihomas	2905 MARG Kd Burlington	ocity Rochestes	1 a l df	
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, Cattletive of	, certify: I	reside at 16920 Raines RD	(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 v	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 petiti	on and personally obtained each of	
the signatures on this paper. I know that the sign	ers 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 da	ate 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.			
4/27/24	Patho	ran Chiston		Page No. 730	
(date)		re of circulator)			
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 Elections Commission   P.O. Box 7984 Madison, WI 53707-7984   608-260	6-8005 bush: http://elections.wi.gov.lemail.elections@uri.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 district 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	of the Wisconsin Statutes.
	(name of officeholder to be recalled and office).	STATEMENT OF REASON FOR RECALL		
		reason must be related to the official responsibilities of the officehold	er. No statement of reason is required to initiate the recall	of 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. M. Colleen &			☐ Town ☐ Village	
Cotteen Parenteau			City	
2. Collean Parenteau	Colleen Parenteau	6620 mariner Ds.	Uillage Ut. Pleasant	4-26-24
3 Linda Wedner	Vinda Weidner	6640 Mariner Dr.	Willage M. P. Casart	4.26.24
4 Cunting 200	Cuntia Coenler	15761. Star St.	Town Village Duranta.	4-26.24
5 Valler 190les	Ashler Volling	117 Fost Market St.	Town Village Ruy Kngton	4-26-26
6.			□ Town □ Village □ City	
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1 -1:0 100	10- /	Certification of Circulator		7011
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(name of circulator)	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 unde	(circulator's residence - include number, street, and municipality)	and personally obtained each
he 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 sig		
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.		Page No. 704
4-26-24	- tusta			Page No. 731
(date)  170 (Rev 2019-09) The information on this form is requi	1	re of circulator) • Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-7	266-8005   web: http://elections.wi.gov   email: elections@wi.gov	

TO:	The Wisconsin Election Commission		. We, the undersigned qualified elec-	ctors of the Assembly District 63		
	(official with whom nomination papers or declaration of candidacy for the office is filed)  (jurisdiction or district 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).		,		
			STATEMENT OF REASON FOR RECALL			
		for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officeholde	<ol> <li>No statement of reason is required to initiate the rec</li> </ol>	all of state, congressional,	
	ive, judicial, or county officials.) Tos should be recalled for his tacit support of	of the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,			
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	SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF	
			Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING	
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Gurthar	(name of circulator)	Visconsin or a U.S. sitizan and 18 or alder who if I w		(circulator's residence - include number, street, and municipality)		
he sign	atures on this paper. I know that the signer	rs are electors of the jurisdiction or district represented	ere 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. § 6.03. I personally circulated this recall petities of the paper with full knowledge of its content on the de-	on and personally obtained each of	
name. I	know their respective residences given. I	support this recall petition. I am ware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.	ed the paper with run knowledge of its content on the da	ne mulcated opposite his or her	
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	(date)	(signatur	e of circulator)		132	
L-170 (R	ev.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   608-260	6-8005   web: http://elections.wi.gov   email: elections@wi.gov		

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TO:	The Wisconsin Election Commission		We the undersigned qualified also	Aggambly District 63	
10		on papers or declaration of candidacy for the office is filed)	. We, the undersigned qualified elec	(jurisdiction or distr	rict of officeholder)
petiti	on 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	
			STATEMENT OF REASON FOR RECALL		
legisla	tive, judicial, or county officials.)		e reason must be related to the official responsibilities of the officeholder rips from the CCP, failure to protect Wisconsin farmland from the CCP,	t. No statement of reason is required to initiate the recall o	of state, congressional,
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T	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	ST 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
1.	Robinsegrande	Robyn Segmandel	9500 Broadwayer.	Drown Servillage City Studerant	4-24-24
2.	cateb Butler	caleb Blutter	2910 Sharlon lane	Styllage Ocity 1000 to program	ent 4-24-2
3.	Dean Davido	Dean Barban	3546 Emmentsen Rd	Village Caledonia	4-24-24
4.	(43)	Carolina Navarro	9635 Northwestern Ave	Uvillage Franksville	4-24-24
5.	mul high	Jordan Benish	10009 Spring St.	Styllage Mt Pleasant	4-24-24
6.	ChTRy	Chris Bisman	651 Adeline de	Urown Village Raymond	4-24-24
7.	She Toutaly	There Consenbers	6451 Hwy, A	Uvillage Collections	4-24-24
8.	Charlotte Leonar	Charlotte Leonard	1946 N. LOREEN BAY	avillage mt Pleasaut	4-24-24
9.	Murd My	had the trighey	32 2 Fmestsa BR	Town to village Cal DIN O	4-24-24
10.	Katelyn Syn	& Katelyn Sugent	1525 Quincy Ave told of	o Village Rache	4/24/24
I,	Josias An	dy a certify: I	reside at Certification of Circulator 376 47+1	An Viro Brack F	1 32966
I furth	er certify I am either a qualified elector of V matures on this paper. I know that the signer	Wisconsin, or a U.S. citizen, age 18 or older who, if I was are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person signs	(circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition a ed the paper with full knowledge of its content on the date ir	nd personally obtained each of
name.	1 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. 733
L-170 (	Rev.2019-09) The information on this form is require		Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	5-8005  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 nomin	nation papers or declaration of candidacy for the office is filed)			strict of officeholder)
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The reason for recall must be stated on natitio		STATEMENT OF REASON FOR RECALL		
egislative, judicial, or county officials.)	nis for city, vinage, 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 recal	of 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. MM	Brandi Mease	4613 Northwestern Ave	N village N+ REASON+	4/24/24
2.	Dirama ad course	2000 carlose me	□ Town □ Village □ City	4/24/24
Som Jane	Serera Garia	1112 N. Fancher Rd	Village MT. Pleasant	4124124
4 Hyponey Korley	Stephence Kirlsey	102 terrera 14	Sa Village Aut. Pleasant	4/24/24
5. The Phones	Lind Brower	4804 Shirley Ave.	Si Village mt. Pleasant	4/24/24
6. Junto	Nortalie Benisch	953 oregon St	Uvillage CaeMe	4/24/201
1. axx	Arageli Arroyo	1615 W let St.	Uvillage Cacin	4/24/24
8. July Compage	The Williams	4808 Mollwestern ave	Village City N + poart	4/24/24
9. Juleling	Le ce line de airre	1611 Spring Pl	□ Town □ Village □ City	4/04/24
10.			☐ Town	
			□ City	
(name of circulator)	Andy a , certify: I	reside at Certification of Circulator	An Vino Beach FL	3294
further certify I am either a qualified elector of the signatures on this paper. I know that the signatures	mers are electors of the jurisdiction or district represented	vere a resident of this state, would not be disqualified from voting under to the officeholder named in this petition. I know that each person signature of the officeholder named in this petition.	(circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition ed the paper with full knowledge of its content on the date	and personally obtained each of indicated opposite his or her
4.24.24		this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. <b>734</b>
~170 (Rev.2019-09) The information on this form is re-		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	

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(The re	ason for recall must be stated on petitions tive, judicial, or county officials.)	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	f state, congressional,
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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
1.	Charles Walk	Charles Wollow	354 Donald Dr.	Drown Bur (mg ho)	4-26-24
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	1 Im Durier	Jun Decker	119 N 2nd 51	City Water (380)	4 20 27
3.	Raguel Derty of	Raquel DeHart	30215 forest Dr.	Strown Unillage Burlington	4-26-24
4.	Model	RSol Carter	30215 Farest D	Village Bulling for	4/26/24
5.	Merkalots	Amber Reberts	26341 Overline Rel	U Town U Village U City ( ) Reference	450024
6.	11 h10 6.	1 1 NI R -	-0011 11 ( - 5	Town Village D	11 21 011
	In pul se	17mber Wala Dianca	7981 W Calceshore Drive	city DWY I nato Y	4.06.00
7.	auni Posts	Inlian Patty	33023 Clarence St	Village Burlington	4.26.24
8.	The Dedley	Tiara Woodkey	W180 Ct VOD, Burlington	Village Honly Crelk Unit	4.26.24
9.	haven any	Kaillyn Andes	34901 WStatestree	Uvillage Burlington	4-26-24 -
10.	Who	WILLIAM PERSON DR	141 MCHENRY ST	Uvillage BURLWERN	4-26-24
	losias 4		Certification of Circulator	the An Van a / Co	2-011
Ι,	(name of circulator)	tuduja, certify: I	reside at 814 97	(circulator's residence - include number, street, and municipality)	3294
the sign	r certify I am either a qualified elector of V natures 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 signature	Wis. Stat. § 6.03. I personally circulated this recall petition a	nd personally obtained each of adicated opposite his or her
name.	4.24 - 24	4	this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 735
L-170 (R	(date) Rev 2019-09) The information on this form is require		re of circulator)  Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	6-8005  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 distr	rict of officeholder)
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1 Ongretty Payer	W Ametta Rousch	34010 Evelid OR	Village Burlington	4-27-20:
2. Stanformy	Steven Humby	7670 Russet St	Village Burlington	4-27-202
3.	Cochil V	273 Chare + was Chapel Terrou	Village FW//1/15/fer	4-27-24
4.	Acron Plotz	18805 Robers St.	Village Payington	4.27.24
5. The second of the second	e Melissa Buce	3221 Fischer dr	Uvillage Bornaten	4.27.24
6. Kind June	Rick Carrows	821 Cornerstan Craring	Uvillage City	4-27-211
7.	John Brenen	705 Elizabeth st	Village unter ford	4-27-24
8. Dontwo W	Jarles Woods	317 E south st	□ Town □ Village □ City   Blocaffield	4-27-21
9. Gu Refor	Even Diger	1644 MAI St.	Utiliage Durling ton	4/27/24
10. Stephanetas	Stohanie Hafex	29936 Old Huy A	Village Bur lington	4-27-24
, Stepley u	Original certify: I	reside at 1003 New Aose	Rd Benton AR	77015
the signatures on this paper. I know that the signer	rs are electors of the jurisdiction or district represented	ere a resident of this state, would not be disqualified from voting under to by the officeholder named in this petition. I know that each person signs this certification is punishable under § 12.13(3)(a), Wis. Stats.	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petition a ed the paper with full knowledge of its content on the date in	nd personally obtained each of ndicated opposite his or her
5-10-2024	Shan the	e of circulator)		Page No. 736
L-170 (Rev 2019-09) The information on this form is requir		Wisconsin Elections Commission   P.O. Box 7984 Medison, WI 53707-7984   608-266	-8005 liveh http://elections.wi.gov.lemail-elections@wi.gov	

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		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	No statement of reason is required to initiate the recall of	of state congressional
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2.	14011101	(010 (1th ave	Town	11 19-74
THE will as	Michelle Isiner	(010 11, 000	Ocity Lascan Brown	4-28-24
2 : 20.1 Cm	7 / 01 11	12 1 1 2	Town	1 1
3. 2000	Dob (Wistleson	1211 high St.	Selvillage Union Craw	4-28-24
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4.	1. 1000ica Caragia	1201 Hola (+	Allage 1 MIMA 6 100 10	4-28-24
	VOSICA JULEVIAN	1600 11/01/1 21-	Cocity OVIIOVI GYOV	9-60 29
5		, , ,	Town	.1
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(name of circulator)			(circulator's residence - include number, street, and municipality)	
urther certify I am either a qualified elector of V	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	and personally obtained each
e 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	ned the paper with full knowledge of its content on the date is	ndicated opposite his or her
	support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
4-23-24	1	14		Page No. 737
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170 (Rev 2019-09) The information on this form is require	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   608-26	66-8005  web: http://elections.wi.gov   email: elections@wi.gov	

#329

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)
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).		3,5,10	a the wisconsin statutes.
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rice reason for recall must be stated on petitions to	or city, village, town, and school district officials. Th	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,
	f the Chinese Communist Party (CCP), acceptance of	trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
ack of committment to election integrity, blocking lo	ower prescription drug costs, and flagrant disrespect fo	r his own constiuents by calling them "whack-jobs, morons, and idiots."		63
THE MUNICIPALITY USED FOR MAIL	ING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MU	ST 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
516NATURE	PRINT NAME	ADDRESS	O Village City	DATE
2/100/10	Paige Kravner	232 Bridge St. #130	Village BUYLINGTON	5 4 24
3. Val.	Costell Krumer	232 Bridge St. # 130	Village Berlington	5/4/24
4. Casel H. Perviger	CAREL PI HRINGER	232 BRIOGE ST #128	Utilage BUREINGLEON	5/4/24
5. + 1	Sangatha Freewor	232 Bridge St # 233	Uvillage Burling ton	5/4/24
6. Barber Rand	BARBARA RAMLOW	232 PRIDGE # 247	Uvillage BURL(A BTON	5/4/24
7. angie Carde	Angie Carden	232 Bridge St Apt 343	Utilage But is a	5/4/20
8. Dorothy Jakole	Dorothy Hakala	232 Bridge St. Apt. 332	Village Burlinden	5/4/24
" Gudet Fodel	Judith Lodg!	232 Bridge St At. 323	Uvillage Burlington	5-4-24
10. Hally	Talkal labols	273 Charpel Ter#	Usilage Ber 120/00	5-4.74
11		Certification of Circulator		
MIKEGAI	RLEMAN, certify: I	reside at 54755. Williams	Rd. New Berlin.	WISZ
further certify I am either a qualified elector of W	isconsin, 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	(circulator's residence - include number, street, and municipality)  Vis. Stat. § 6.03. I personally circulated this recall petition a	and personally obtained each
ne 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 signe	d the paper with full knowledge of its content on the date in	ndicated opposite his or her
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(date)		e of circulator)		Page No. 738
170 (Rev. 2019-09)-The information on this form is required	u by wis. Stats. 99. 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	

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 o	f the Wisconsin Statutes.
	(name of officeholder to be recalled and office).			
		STATEMENT OF REASON FOR RECALL	N	
(The reason for recall must be stated on petitions legislative, judicial, or county officials.)	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,
	of the Chinese Communist Party (CCP), acceptance of t	trips from the CCP, failure to protect Wisconsin farmland from the CCP,		10 1
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."		
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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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2 Ben Middleton	Bun S. Hotel	916 Echods	ortown Village Barlington	4-2624
3 Jan Mely	Jolin Melson	6000 16th St	Unilage Q Q Q Y	4-9634
4 Low Middleton	Kathy Widdleton	great of Bul.	Uvillage Regulation	4262
5.4-7-	Tania Zaia	6414 2 of Kenosha WI	Ulliage City Kenosha	4/26/21
ODE IN	Dave Kawakan	6414 Dot An Kenosha	U Village City	4/26/24
7 Novel less soci	-Nicde Rebstock	1214 CHYNWY K tranksul	D Town Willage TANSESMILE	2/26/21
8 Ever Kangy	Erica Karwowsk	704 J. Colony Ave	Town Parillage Union Grove	4/26/21
" Konny Guzma	Herry Gurman	144/S.65hSt.	O City M Maddle W	4/20/24
10. Damon Diedo	Damion Oviedo	15746 Dorond Aug. 53182	a Village Korrow Ville Union Grove	4/25-29
, Justin Gracier	certify: I	Certification of Circulator reside at 14695 herring rd 4016	orado springs co 80	909
(name of circulator)  I further certify I am either a qualified elector of the signatures on this paper. I know that the signe	Wisconsin, or a U.S. citizen, age 18 or older who, if I were 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	and personally obtained each of
name. I know their respective residences given.  4/26/24	I support this recall petition. I am aware that falsifying	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 739
(date)  EL_170 (Rev 2019-09). The information on this form is requi	(signatured by Wis Stats 88 8 40 and 9 10. This form is prescribed by the	ure of circulator)  e Wisconsin Elections Commission   P.O. Box 7984, Madison, WI, 53707-7984   608-26	6-8005 lweb http://elections.wi.gov.lemail.elections@wi.gov	

TO: The Wisconsin Election Commission	n	. We, the undersigned qualified elec-	ctors of the Assembly District 63	
(official with whom nomi	ination papers or declaration of candidacy for the office is filed)			district of officeholder)
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	(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	MUNICIPALITY OF RESIDENCE	DATE OF
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oughin Gran	certify	Treside at 14695 herring rd CO	locado SPINAS CO	
(name of circulator)			(circulator's residence - include in moer, street, and municipality)	
further certify I am either a qualified elector	of Wisconsin, or a U.S. citizen, age 18 or older who, if	were a resident of this state, would not be disqualified from voting under	Wis. Stat. § 6.03. I personally circulated this recall petition	on and personally obtained each
ne signatures on this paper. I know that the si	gners are electors of the jurisdiction or district represent	ed by the officeholder named in this petition. I know that each person sign	ed the paper with full knowledge of its content on the dat	te indicated opposite his or her
		ng this certification is punishable under § 12.13(3)(a), Wis. Stats.		
4/26/24	JUGIM 6	(reil		Page No. 740
(date)	(sign	ature of circulator)		

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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
you were	Travis melicher	35402 Lakeshur DV.	O Town O Hillage O City  Rocks 510V	4-25-26
Job thoustone	Jody Thorsbensen	513 Fair View Cinte	Oringe Waterford	4-25-26
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y. Oon Serses	DEAN LARSEN	3925 LALTVIEW	Village DT PLEASALT	4-25-24
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ΓΟ: The Wisconsin Election Commissio	n	We, the undersigned qualified elec	tors of the Assembly District 63	1 1
(official with whom nomi	ination papers or declaration of candidacy for the office is filed)			rict of officeholder)
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Robin Vos should be recalled for his tacit supp	oort of the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, block	ing lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
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1. Car ha	Cory Reer	187 South Parcist	U Town U Village U City U City	4-27-
2. Sergon	Stacey Goodh	6065 Cogswey or	or Village Sliver Kake	4-27-24
3.	Paul Sadler	W.3295.8227 Manay Lin	O Village Tomn O City of Mukuungo	4/27/24
4. in Labor	7. Wekenborg	31014 Lake Pointe Ch, Walston	Uvillage Wake tord	4(27/24
5. New Had Dar	the Chiefine Harris	117 N. Perkins Blud, Bar	Marketon Berlington	4/27/29
6. Somferont	2 Speroto	533Water St	U Village C Village C City	4/27/24
1 ann	Andrew Kosowsti	1027 Late Cremen Black	Uvilage Late Cross	1/27/24
8. Kelly MW	Kelly Westerland	917 CENTER ST	Village UKGENEVA	4/27/24
9. 60	Darwin Westerlund	917 center St	o Village Lake General	4/27/24
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, Kelly W.	) ke, certify: I	reside at 643 Joy Cor Ben	Circulator's residence - include number, street, and municipality)	38401
the signatures on this paper. I know that the s	signers 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	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
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(fate) (L-170 (Rev 2019-09) The information on this form is		ure 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	ally and a

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1. Jacque Hal	Cacqueline Hahn	1325 main Street	Uniton Grove	4-28-24
2. Suga	3ohn Ryan	1320 Main 51	Usilage Union Conve	4-28-24
3 Russell & f	Russell Jacobs Jr.	1612 New St.	Village Union Grove	4-28-24
4 Melissa De Groot	Melissa De Grat	11228th Ave	Village MIM CVVI	4-28-24
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L-170 (Rev.2019-09) The information on this form is red	quired 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	508-266-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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-170 (Rev 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	0-8005 [web: http://elections.wi.gov   email: elections(a)wi.gov	

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(name of circulator)			(circulator's residence - include number, street, and municipality)	1000
urther 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 Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each
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(date)		of circulator)		
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://elections.wi.gov   email: elections@wi.gov	

ГО:	The Wisconsin Election Commission		. We, the undersigned qualified elect	ors of the Assembly District 63	
97101	(official with whom nominate	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	rict of officeholder)
etitio	n 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).	TATEMENT OF DEACON FOR DECALL		
The res	son for recall must be stated on netitions		TTATEMENT 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	of stata, congressional
	ve, judicial, or county officials.)	for eny, vinage, town, and sensor district officials. The	reason must be related to the official responsibilities of the officeroider.	No statement by reason is required to intitute the recuit of	y state, congressional,
Robin V	os should be recalled for his tacit support	of the Chinese Communist Party (CCP), acceptance of tr	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
ack of c	committment to election integrity, blocking l	lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
Tı	IF MUNICIPALITY USED FOR MAI	LINC PURPOSES WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	ME OF THE MUNICIPALITY OF DESIDENCE MUS	ET AL WAVE DE LISTED
	SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE MUSICIPALITY 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
1.	auch Reman	-Amber Bohson	1039 ChM St. UND (2004 45318)	Town  Town  City  Only  Carry	4 28/24
2.	Station	Stephanic Hush	1425 High St. Union Gran	a Town Calvillage Union Grove	4/28/24
3.	I On Co	Hailey Carport	13902 60th pl	Sa Village Union grave	4/28/24
4 X	wheel Intine	Suberly Martinez	21818 9th 9. Lot 7 Kansopuille	OXTOWN Village Cansasy (e	46824
5.	and I	Dan Coop	1203 Center 8T	a Village City Mion Gable	4/28/24
6.	rough Lubring	Rayla Fiebrink	1850 new St.	D Town  28 Village City  City  City  City	4128/201
7	aren Solatia	Taylor Schattner	1612 new St	Savilage Union Grove	4/28/24
8.	9			□ Town □ Village □ City	
9.				□ Town □ Village	
		(martin)		□ City	
10.				□ Town □ Village	O AL BROWN IN
				□ City	
	Josias And	, certify: I	Certification of Circulator	Au 1/10 B. 1 Pl 3291	/
,	(name of circulator)	, certify: I	reside at 1/4 Y	(circulator's residence - include number, street, and municipality)	· 6
			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.	the paper with full knowledge of its content on the date in	ndicated opposite his or her
	4.28.24		a parismere and a re-re-yar, mas suns.		Page No. 746
	(date)	(signatur	e of circulator)		140
-170 (R	ev 2019-09) The information on this form is require	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   608-266	-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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).

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

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

(jurisdiction or district of officeholder)

		STATEMENT OF REASON FOR RECALL		
(The 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 of	state, congressional,
		rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking I	lower 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		
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 Mhis	Melissa Kozlowski	6119 114th Ave	Uyilage Cenosia	4/27/24
22 L.W-15	Rim WinTher	20710 County Lim Rd,	Styllage Rouseswill Union Grove	4/27/24
3. Just	TIMOTHY I MARTIN	7329- 45TLANE	U Village U City  E MOSh	4/29-24
4 Sulliem Show	Lillie M. THOM	3310 POLK_ST.	Uvillage City KANSASVILLE	4-27-24
James Berra	Laura Becerro	1304- main 5T	Sivillage Union Grove WI	4-27-24
1/2 the	Trays Kerscher	,	Ullage Oak creek	4-27-24
Bayle Poren	Baylie Norton	1200 Center St.	Styllage Union Grove	4-27-24
8 Alexander	Metissa Fox	1708 March CxCo	Uvillage Vac	4-27-29
Hough 1			☐ Town ☐ Village ☐ City	
The Shead and	PAOL SHASKLET	1401 11 HAVE #61	Prillage UNION GROVE	4/21/24
, toutin Gacie	certify: I	reside at 14695 herring (& Colore	rdo springs co 80908	
the signatures on this paper. I know that the signe	rs are electors of the jurisdiction or district represented	ere 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. § 6.03. I personally circulated this recall petition a ed the paper with full knowledge of its content on the date in	nd personally obtained each of adicated opposite his or her
name. I know their respective residences given.	oc 9tin G	this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. <b>747</b>
(date)	(signatu	We will Election Commission IDO Do 7094 Ma Feet WI 52707 7094   609 26	C 8005 by the true (following and the still starting Great and	

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District 65	
(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	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 of	the Wisconsin Statutes.
	(name of officeholder to be recalled and office).			
		STATEMENT OF REASON FOR RECALL		
	for city, village, town, and school district officials. The	e reason must be related to the official responsibilities of the officeholde	r. No statement of reason is required to initiate the recall of	of state, congressional,
legislative, judicial, or county officials.)	of the Chinese Communist Party (CCP), accentance of the	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking I	lower 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	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N	AME OF THE MUNICIPALITY OF RESIDENCE MUS	ST ALWAYS BE LISTED.
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	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=3 GA 2	Sa. SI day	1689th St Kansasville	Town Willage If a a G o a alla	11/2-101
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2 1/1/19/ 7	1104 5	Tun knowns lave or And IC	Town	11/2-124
1 HOURS, US	HUILLA FOX	100 100-19 2112 11	Willage Burlington	17/27/29
3 1 10		1219 011 100 111 5318	Village 1 1000 C	462/20
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85 . 17	C	2741	Town O	1/1/22/24
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0 20 0	2.0	21000 066	Town	1
I with the	Kiley Cornog	21818 7 SE.	City Kansasville	4/21/24
10.		21- 1	□ Town	41/
Dayle laggie	Hada Garage	3632 E. Pulcol,	City Verm	122/2021
L. (1)		Certification of Circulator	100 / (00)	m
1, JUTIN Gracie	, certify: I	reside at 14695 herring 10 C	010 rado SPrings Co	80408
(name of circulator)  I further certify I am either a qualified elector of V	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 & 6.03. I personally circulated this recall petition a	nd personally obtained each of
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		
	I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.	The state of the s	
4/27/24	ナレタカカ	Challer		Page No. 748

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: <a href="http://elections.wigov">http://elections.wigov</a> | email: elections@wigov</a>

10: 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 di	istrict of officeholder)
petition for the recall of	Robin Vos (name of officeholder to be recalled and office).	from office pursuant to Article XIII, S	Section 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes.
		TATEMENT OF REASON FOR RECALL		
(The reason for recall must be stated on natitions		eason must be related to the official responsibilities of the officel	holder. No statement of reason is required to initiate the recol	I of state companyional
legislative, judicial, or county officials.)	for city, vinage, town, and school district officials. The f	eason must be related to the official responsibilities of the officer	noider. No statement of reason is required to initiate the recal	i oj state, congressionat,
	of the Chinese Communist Party (CCP), acceptance of tric	os from the CCP, failure to protect Wisconsin farmland from the CC	CP.	
		is own constiuents by calling them "whack-jobs, morons, and idiots		
THE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN MU	NICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. TH	HE NAME OF THE MUNICIPALITY OF RESIDENCE M	UST 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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CONTRACTOR DICTOR	DPDVQ STATIMON		☐ Village ☐ City	
	- 00101 0011		Town	
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9.			Town	3/99
			☐ Village ☐ City	
10			Town	
10.			□ Village	
			City	
1. testin Gracier		Certification of Circulator	and against the storage	
1, 10 min brace	, certify: I re	eside at 14695 herring rd Cold	11100 711195 CO 80408	
(name of circulator)	Vii U.Siki 18 14 1 i61		(circulator's residence include number, street, and municipality)	
		te a resident of this state, would not be disqualified from voting up the officeholder named in this petition. I know that each person		
		his certification is punishable under § 12.13(3)(a), Wis. Stats.	is signed the paper with full knowledge of its content on the date	mulcated opposite his or her
4/24/211				Page No. 740
7100104	Justin Gra	164		Page No. 749
(date)	(signature	of circulator) Visconsin Elections Commission   P.O. Box 7984, Madison, WI, 53707-7984   6	200 244 000E   1   1   1   1   1   1   1   1   1	

. 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)

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	N	
legislative, judicial, or county officials.)		e reason must be related to the official responsibilities of the officeholder trips from the CCP, failure to protect Wisconsin farmland from the CCP,	. No statement of reason is required to initiate the recall of	of state, congressional,
lack of committment to election integrity, blocking	ng lower prescription drug costs, and flagrant disrespect for	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. 5.3.82	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
Much & North	Christina Wadwark	651 9th Ave, Union Grove	City Union Grove	4/28/24
2 Would Dodge	Virgij wood wo	on 651 9th Ale. Miones		4/28/24
de stry	AMERON COCHRAN	726 9TH AVE. UNION	Stillage UNION GROVE	4/20124
4 Thuys Will	mir michel	726 9th Ave. Union Grove	Drive Union Grave	4/28/24
5. aby la John	Alyla Gordan	815 9th Hulpion Grove	Brillage Un: on Grove	4178124
"Can barrell	Courtney Begueaith	807 907 8th AVE WAIGHTS	Si Village Union Grove	4-28-24
7 Christina Behrens	Christma Behrens	907 main street	Town Village Un on Orove	4/28/24
8 Pufe Bech	Pete Beck	580 Mill Ave	Village union grove	4/28/24
" Nauhbort	Saral Bent	E80 MillAure	Stillage nion Core	8/2824
10. en e	Michael Goldberg	642 Mill Ave	a Village Cove	04/28/2024
, testin Gracia	, certify: I	reside at 14695 Lemny rd Cold	orado springs co 809	08
the signatures on this paper. I know that the sig	mers are electors of the jurisdiction or district represented	were 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 signs this certification is punishable under § 12.13(3)(a), Wis. Stats.		
4/28/24	toghin Grac	re of circulator)		Page No. 750
EL-170 (Rev.2019-09) The information on this form is rec		e Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	6-8005  web: http://elections.wi.gov   email: elections@wi.gov	Total Control of the

The Wisconsin Election Commission

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

petition for the recall of	ation papers or declaration of candidacy for the office is filed)  Robin Vos	from office pursuant to Article XIII. Secti-	on 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes.
petition for the recan or	(name of officeholder to be recalled and office).	nom office pursuant to runtere rim, seem	on 12 of the Wilsonian Constitution and 3.577	
		STATEMENT OF REASON FOR RECALL		
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		f trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking	ng lower prescription drug costs, and flagrant disrespect f	or his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR M	AILING PURPOSES, WHEN DIFFERENT THAN	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N	AME OF THE MUNICIPALITY OF RESIDENCE M	MUST ALWAYS BE LISTED.
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	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
1 2 U. 1X	Dan Hora	431 Hier Grove of chier	Da Village UNION Carove	4-28-29
2. Brooks	Rose were Brooks	1612 Mildown 8 t.	Town St Village Union Cwal	27-2824
3 000	TILL BORRER	1928 Nottinghan De Uni	Town Jel Village Ocity Longon Dare	413812
NO.	3. 2000	· · · · · · · · · · · · · · · · · · ·	□ Town	1
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, JUSTIN MC	)SEV, certify:	I reside at SO345 OAKVICW Dr.	Chesterfield M. 47 (circulator's residence - include number, street, and municipality)	3047
he signatures on this paper. I know that the sig	gners are electors of the jurisdiction or district represente	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	Wis. Stat. § 6.03. I personally circulated this recall petitioned the paper with full knowledge of its content on the day	on and personally obtained each ate indicated opposite his or her
ame. I know their respective residences give	n. I support this recall petition tam aware that falsifying	ng this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 751
4-28-24	TUSTINO -			Page No. 751
(date)	(Signi	iture of circulator)	CC 2005 by the later Well and one of some lampid alertic and Out and	

TO: The Wisconsin Election Commission		RECALL PETITION	C.I. Accombly District C2	
	ion papers or declaration of candidacy for the office is filed)	. We, the undersigned qualified elec	fors of the Assembly District 63	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	
	(name of officeholder to be recalled and office).		and the control of th	the Wisconsin Statutes.
		STATEMENT OF REASON FOR RECALL		
egislative, judicial, or county officials.)		reason must be related to the official responsibilities of the officeholder rips from the CCP, failure to protect Wisconsin farmland from the CCP,	. No statement of reason is required to initiate the recall o	state, congressional,
		THE RESERVE AND A SECOND CONTRACTOR OF THE PARTY OF THE P		
ack of community, blocking	lower prescription drug costs, and hagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR MA	ILING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA		
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 Hesdubar	Wesley R. andson	737 Husy DD	TOWN BUCK 19 to	3 Max 24
2. Bonnie L. Carlon	Bonnie L. Carlson	737 Hwy. P.D.	State Rocheste Bushington	3 mg 4 24
3. The Follow	Linda Hughes	Nong Paradise Dr.	ON Town Village Bullingon	05/03/24
4 Jovenl le langit	Samantifloor	13324 Shore dr. Bam	Uvillage Burlington	5.3.24
5 molton Willer	maxhar Radgers	742 Still pond dive	Uvillage Waterford	5/3/24
· Janner Tamital	Tanner Belland	507 Paul St Burlington	Village Cachester	5-5-24
Methodo	ANTHONY TORRES	607 STEPHANIEST	DEVIllage ROCHOSTON	5/5/29
Le secraticepes:	Rebecca TORRES	LOT Stephanie St.	a village PCC NISTER	5.5.24
" Left loll	Geoffrey Cook	33719 Academy Rd	a village Roch chester	5-5-21
10. Marofell Coah	Mardell Cook	33719 Acadery Rd	O City Roches Lev	5/5/24
(MATT <	NOREV	Certification of Circulator	= 10 Balled	++
(name of circulator)	, certify: I		(circulator's residence - include number, street, and municipality)	W1 55105
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 very the officeholder named in this petition. I know that each person signs	Wis. Stat. § 6.03. I personally circulated this recall petition at	nd personally obtained each of
		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
5/5/J4		e of circulator)		Page No. 752
-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 the	Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984   608-260	5-8005  web: http://elections.wi.gov   email: elections@wi.gov	

TO: The Wisco	onsin 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 distri	ct of officeholder)
petition for the re	ecall 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 f		(name of officeholder to be recalled and office).	nom office pursuant to rittle ratin, seem	on 12 of the Wisconsin Constitution and §15.10 of	the Wisconsin Statutes.
			STATEMENT OF REASON FOR RECALL		
(The reason for recal	Il must be stated on petitions		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.
	or county officials.)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			since, cong. contonin,
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,		
lack of committment	to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNIC	IPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA		T ALWAYS BE LISTED.
SIGNATUI	RES OF ELECTORS	SACRAMIA A SIGNAGO	STREET & NUMBER OR RURAL ROUTE  3.5 6.3 Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
15 year	to Myejurg.	Sacrei 16 House	3500 308/4 AU	O Town O Village O City Bun (Mg/z)	5/5/24
2.		Greg Capoun	201 County RD DD B	Sivilage Barlington Rochester	5/5/24
3. MEl	hallo	Mike Lope	323 County Line Bud.	Drown Servillage Cochester	5.5.24
4. Not	noticher	Nothan Richardson	456 Edward Street	Uvillage Bur 1/45/04	5-5-24
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I,//	14//	certify: I	reside at 308.39 Kaning Fox	TM. BUNINGTON, WI	53105
	(name of circulator)			(circulator's residence - include number, street, and municipality)	
			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 signatus 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
5	15/24				Page No. 753
	(date)		re of circulator)		
L-170 (Rev.2019-09) /Th	ne information on this form is requi	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   608-260	6-8005  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 nominat	ion papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	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 of	the Wisconsin Statutes.
	(name of officeholder to be recalled and office).		•	
	5	STATEMENT OF REASON FOR RECALL		
	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,
egislative, judicial, or county officials.)	- th- 01			
Robin vos snould be recalled for his tacit support	or the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
ack of committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR MA	ILING PURPOSES, WHEN DIFFERENT THAN M	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MUS	ST 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
1 Agusting T.	A: Agustina Tecpile	0 1400 H West St. #10	Town Strillage City (81/11 Cocce	5-6-24
2 Fareasal	Lawrence A Siegel 50	9600 7 Mile Rd	Village Raymond	5-6-24
3 Eler M Zore S	EITEN Brown.	1380 Park Dace	Styllage and from	5-6-29
4. Ode Mil	Action Kalewicki	1400 7/8t ORive	Town 27 illage Und Grove	5624
5. Selly glings	CLIFFORD PRASNIK	310 18 th Ave # 9	Q Village Con VAION Grove	5-6-24
6 Calista Thompson	Calisto Thompson	407 Ivy Glen court	Divillage Dity Waterford	5-6-24
7.			U-Town U-Village U-City	1
8.			□ Town □ Village □ City	
9.	X		☐ Town ☐ Village ☐ City	
10.			☐ Town☐ Village	
MAT 511-8-11		Certification of Circulator	Col D Nincka	
1/AII SIVONKI	, certify: I	reside at 50839 Kunning Fox	1 all Bullington	
ne 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 by the officeholder named in this petition. I know that each person sign		
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.		D 754
5/ 6/ (date)		re of circulator)		Page No. 754
-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 the	Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-26	6-8005   web http://elections.wi.gov   email: elections@wi.gov	

The Wisconsin Election Commission

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

	UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT: THE	AME OF THE MUNICIPALITY OF RESIDENCE M	UST ALWAYS BE LISTED
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
Abbigail Stasiewicz	601 14th Ave Min Grove Cu 53182	OF Village UMM GNOVE	4/28/24
Oneida Hagen	1121 Bluebird Ct	ocity Union 6 mue	4/28/24
Cameon Evans	1024 New Street	City Union Grove	4-28-24
Andrea Evans	1024 New Street.	Scity Union Grove	4-28-24
TruditeRoyssel	1107 Dewst.	a Village Un ONGY OU a	4/28/54
16 RET Swenson	1416 Dew St	City UNION UTOUR	4/28/24
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	The state of the s	☐ City	
	Abbigail Staslewicz Oneida Hagen Cameon Evans	Abbigail Stasiewicz Gol 14th Are Whin Grine w 53182  Oneida Hagen 1121 Bluebird Ct  Caneon Evens 1024 New Street  Andrea Evans 1024 New Street.  ThereRowsel 1107 New Street.	Rural address must also include box or fire no  Abbagail Stasiewicz  Colly Are Whith Gaive at 53182  Convert Earls  ID24 New Street  Drown  Willage  City  Union Grove  Town  Willage  City  Union  Crove  City  Union  Crove

TO: The Wisconsin Election Commission		We, the undersigned qualified elec-	ctors of the Assembly District 63	
(official with whom nomina	ation papers or declaration of candidacy for the office is filed)			r district of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Secti	on 12 of the Wisconsin Constitution and §.9.1	0 of the Wisconsin Statutes.
	(name of officeholder to be recalled and office).			
egislative, judicial, or county officials.)	s for city, village, town, and school district officials. The	STATEMENT OF REASON FOR RECALL e reason must be related to the official responsibilities of the officeholde trips from the CCP, failure to protect Wisconsin farmland from the CCP,	ex. No statement of reason is required to initiate the rec	call of state, congressional,
ack of committment to election integrity, blocking	g lower prescription drug costs, and flagrant disrespect to	r his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR MA	ALLING PURPOSES, WHEN DIFFERENT THAN M	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N	AME 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
1 SIGNATURE	PRINTNAME	STREET + NUMBER	Town City	DATE
2 Cht florily	Clint J. Pospichal	273 Chapel Terrace	ortown Village Burlington	05/04/2024
3. Lux Loranger	1sa loranger	609 Madow [N Apt 1	Town Village BULLING FON	05/04/24
4. And I	REX BADGER	SOG EDGEWOOD DR	Town Village Secity  BUNGA	5-8-24
5. Du Dei	Taylor Oson	583 Edgewood DR	Town Village SetCity Village	5-4-24
6. 100	DANIEL OPEL	600 MEADOW LN	Town Village SQCity  BURLINGTON	5-4-54
7.			☐ Town ☐ Village ☐ City	
8.			□ Town	
			☐ Village ☐ City	
9.			☐ Town ☐ Village	
		-	☐ City	
10.			☐ Village	
		Continue College	□ City	
he signatures on this paper. I know that the signature know their respective residences given.	Wisconsin, or a U.S. citizen, age 18 or older who, if I was are electors of the jurisdiction or district represented I support this recall petition. I am aware that falsifying (signature)	reside at 7 5 6 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petiti ed the paper with full knowledge of its content on the da	on and personally obtained each of the indicated opposite his or her  Page No. 756

TO: The Wisconsin Election Commission		. We, the undersigned qualified elect	tors of the Assembly District 63	
(official with whom nomin	nation papers or declaration of candidacy for the office is filed)		(jurisdiction of	r district of officeholder)
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	ons 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 rec	call of state, congressional,
legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support	ort of the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking	ng lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR M	AILING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA		
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 Loly By	Le Land Busi	736 N. Browns Lake Col	Village Raches Ter	4-29-24
2. Lian Buse	Diane Buss	736 N. BROWNS LAKE DA.	Driving Rochestes	4-29-24
3. Perta.	Matt Shepherdan	746 N. Browns Like Do.	Village a City Rochester	4-29-24
4. Allanda	ALTER ALFRED	406 5. Floot St. \$6	Pvillage ROCHSTE	4-29-24
5. 2 - 4	Iscac Cordova	406 S. FRONT ST #5	Oche Ser	4-29-24
6. Jun My	Lian Pritzhon	501 Mary L St. (Mary st.)	1 Town 12 Village Rochester	4-29-24
7. 2 3 gun	ENDAR MEDIUM MANSUR	22047 ACANEMY R (32047 Academy Rd)	Dillage Rochester	4-30-24
8. Fryela Eval	Angela Engel	32328 Academy Rd.	BEVIllage Rochester	4-30-24
9. Elaine Tagle	w Elaine Taylor	32328 Academy Road	Va Village City Rechaster	4-38-24
10. Kathy anderson	- Kathy Anderson	32615 Academy Rd.	SVIllage Rochester	4-30-24
MAT 5.1	06K	Certification of Circulator	TTO BING	1
i,	ortify: I	reside at 50839 Kunni.	na Fox 11 Milling	167, WI 53105
I further certify I am either a qualified elector	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 V	Vis. Stat. § 6.03. I personally circulated this recall petit	ion and personally obtained each of
		by the officeholder named in this petition. I know that each person signed		
name. I know their respective residences give	n. I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
4/30/24				Page No. 757
(date)		re of circulator)  Wisconsin Electrons Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	5,8005 lweb: http://elections.wi.gov.lemail:elections@wi.gov	

TO: The Wisconsin Election Commission	on	. We, the undersigned qualified	electors of the Assembly District 63	
(official with whom non	nination papers or declaration of candidacy for the office is filed)			strict of officeholder)
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	(name of officeholder to be recalled and office).			
		STATEMENT OF REASON FOR RECALL		
	ions for city, village, town, and school district officials. The	he reason must be related to the official responsibilities of the officeh	older. No statement of reason is required to initiate the recall	of state, congressional,
legislative, judicial, or county officials.)  Robin Vos should be recalled for his facit sup	port of the Chinese Communist Party (CCP), acceptance of	f trips from the CCP, failure to protect Wisconsin farmland from the CC	P.	
		or his own constiuents by calling them "whack-jobs, morons, and idiots		1000
THE MUNICIPALITY USED FOR	MAILING PURPOSES, WHEN DIFFERENT THAN	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. TH	E NAME OF THE MUNICIPALITY OF RESIDENCE MI	UST 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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Till Mid	20 5		□- <del>Village</del> □ City	
2			Town Dachester	1 - 24
Man	Matthew Thomas	505 5 Front St APT #2	De City Bon hay ton	4-30-01
3 /1 /			Town	
3. (DELI/MA)			□ Village □ City	
1 1 1 1 1 1 1 1 1	111-1-1	11/2 0 21	□ Town	11/2/
* 11	Wayne Lane	405 Paul St	City COUNTER	4/30/24
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7.			□ Town	
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8.			□ Town	
		X	☐ Village	
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10.			□ Town □ Village	
			☐ City	
NINTE	1-2-11	Certification of Circulator	-/-	
	OREK , certify:	I reside at 30839 Kyning		WI 53105
(name of circulator)  I further certify I am either a qualified elector	r 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 ur	(circulator's residence - include number, street, and municipality)	and personally obtained each of
the signatures on this paper. I know that the s	signers are electors of the jurisdiction or district represente	d 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 giv	en. I support this recall petition. I am aware that falsifyin	g this certification is punishable under § 12 13(3)(a), Wis. Stats.		
1 100H0100 0000	KER 4/30/24			Page No. 758
(date) MA		ture of circulator) he Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   60	266 8006 but, but // but and a land	
(Rev 2019-09) The information on this form is	required by Wis. stats. 99, 8.40 and 9.10. This form is prescribed by t	ne wisconsin elections Commission [P.O. Box 7984, Madison, WI 53707-7984] 60	08-200-8003   web: http://elections.wi.gov   email: elections@wi.gov	
41301114				

ΓΟ: The Wisconsin Election Commission		. We, the undersigned qualified elect	tors of the Assembly District 63	
(official with whom nominate	ion papers or declaration of candidacy for the office is filed)			strict of officeholder)
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	(name of officeholder to be recalled and office).	STATEMENT OF DEASON FOR DECALL		
The reason for recall must be stated on natitions		STATEMENT OF REASON FOR RECALL ereason must be related to the official responsibilities of the officeholder.	No statement of reason is required to initiate the recell	1 of ododo
legislative, judicial, or county officials.)	s for city, viriage, 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 initiale the recall	of state, congressional,
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	his own constiuents by calling them "whack-jobs, morons, and idiots."		
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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
1. am 0000 mm	MARGIER MAZEIMO	507 Paul A purinator lall	Town O'Village Pachester	E12124
001010010	Angelek Anzelmo	507 Paul St., Burlington, WI	Rochester	0/2/21
2.6	King Good	5320 - + 81. 4.	D Villado	C/2/21
(Manel	Eric Oranam	D) reneed Porlingion	Join Jochester	2/2/29
3.1 14	Tain	11-7 11-1 11 12 1 1	Town	51- 72
Jun 2 Jung	19rr, L Jung	907 Kyon St Buylingto	ACITY BOCKESTEV	12-24
4.	111-31	107 1 11 2 2	O Village	7 12 021
	JACOB 4. LOT	108 S. SIATE ST KEETER	Q Village ZeCAE 8 ZJZ	5/2-24
5/1 10/10	Tamas Curatations	HAPBE CITE CY POLINION	O Village Park	2/2 211
Ch day	Jary's (905/0750)	10> State of Jacksta	orchy 10001 8701	2/0-07
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new wiffer	MEN OUSTATSON	JUD DIRTIST ROCHERE	ocity kochester	D12/24
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MATT SAD	NEEK	Certification of Circulator	For The River notes 1	VI 53105
(name of circulator)	certify: I	reside at 50839 hanning	(circulator's residence - include number, street, and municipality)	5500
further certify I am either a qualified elector 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 V	Vis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each
the signatures on this paper/ I know that the signa	ers are electors of the jurisdiction or district represented	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	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.		Daga No. 750
2/0/07		To of simulated		Page No. 759
-170 (Rev 2019-09) The information on this form is requi		re of circulator) - Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	-8005 lweb: http://elections.wi.gov.lemail.elections@wi.cov	
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		RECALL PETITION		
TO: The Wisconsin Election Commission		. We, the undersigned qualified elec-		
(official with whom nominati	on papers or declaration of candidacy for the office is filed)		(jurisdiction 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.
	(name of officeholder to be recalled and office)	CTATEMENT OF BEACON FOR RECALL		
		STATEMENT OF REASON FOR RECALL		
	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	f state, congressional,
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SIGNATURES OF ELECTORS		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
1 Made 011	1100	3420 To Bounout AV & Kassille	<b>Q</b> Town	-/ ,
110 che sylv	Mosho bail Getta		☐ Village ☐ City ☐ CIT C	5/6/24
2 04	Gas Gland Chloral	1422 VineSt. union Gave, Wit	□ Town	10101
2. Those Della and	Georg Jeninger Schlage	1422 Vinesti Viale Cota 1st	City Union Coroc	5/11/14
sery transe	George	Willow Carre, Wil	Town	7901
3. (3) 1/200	Bonnie Sallagel	14/22 12 C+ 11 C 15E		5/2/21
Winne Schlage	Bonnie Schlages	17 ad Vine St. Whion Grove, WI	Ocity Union Grove	0/4/21
4. 110	Chris Hush	1422 Vine St. Union Grove, WI 1425 High st. Union Grove, WI	□ Town □ Village . 1	C 7724
y with	Chris Hush	1929 Tigh St. Union Grave, WI	City Union Grove	5-7-24
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1 11.	2 -1/	Cartification of Cinculators	2 day	
///ATT	WORES certify:	reside at 30 8 39 handag F	of TM Krilingfor, a	+ - 3100
(name of circulator)	, certify. I	reside at 30839 Panning To	(circulator's residence - include number street and municipality)	14 3 3105
	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 V	Wis. Stat. § 6.03. I personally circulated this recall petition ar	nd personally obtained each of
he signatures on this paper. J 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 signed		
ame. 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.		
5/1/24				Page No. 760
date		ure of circulator)		
~170 (Rev.2019-09) The information on this form is requi	red 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   608-266	5-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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lack of	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 ESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.  PRINTED NAME OF THE MUSIC N				
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19 /			STREET & NUMBER OR RURAL ROUTE		
	*		Rural address must also include box or fire no.		SIGNING
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1,	(name of circulator)	certify:	reside at /25 13A Drive	(circulator's residence - include number, street, and municipality)	
I furthe	er certify I am either a qualified elector of W	Visconsin, 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 a	and personally obtained each of
the sign	natures 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	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	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		
	5-5-24		A Secretary of the second seco		Page No. 761
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ΓΟ: The Wisconsin Election Commission		. We, the undersigned qualified elect	tors of the Assembly District 63	and the second of the second
(official with whom nomina	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 of	f the Wisconsin Statutes.
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ack of committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		<u> </u>
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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. Auto Moro	Julie Morrison	1230 Vila Stree 534B	Urilage COLON	5/10/64
Wale Squeres	pale Squires	9311 angehica Drive	of Village Steensean	5/10/24
3. J CAD	Jordan Christensen	9417 Carol Ann Drive	a Village Stytevant	5-13-26
4 Richel Gayn	Richard Gacin	9429 Hulda Dire	Down St. Village STUNTENAUT	9-10-2K
5. Mayle Cima	Angola Amay	3637 91st Place St.	St. Village Statevant	5-10-26
6. Lairpon Vy	Kerson AMAYA	3637 9157 PLACE	Styllage STURITURN	5-10-24
1. Casey Acello	Casy Ore	9625 Huldadrive	Styllage Sturlevant &	5.16-24
8. Brideatus	Briana Finalt	3646 95th Pl.	Town XI Village Styrty ant	5/10/24
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LORRIZI	JST CC , certify: I	Certification of Circulator reside at 1990 ANES ROW	LLAR 1220	
(name of circulator) further certify I am either a qualified elector of	Wisconsin or a U.S. citizen, age 18 or older who, if I w	ere a resident of this state, would not be disqualified from voting under V	(circulator's residence - include number, street, and municipality)  Wis Stat 8.6.03. I personally circulated this recall petition	and personally obtained each
e signatures on this paper. I know that the sign	ers are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person signed		
me. I know their respective residences given.	I support this recall petition. I am aware that fals fying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
5-10-24	Tol	A. Du		Page No. 762
(date)	1/	re of circulatory  Wisconsin Elections Commission   P.O. Box 7984 Madison, WI 53707-7984   608-266	9005 hugh, http://olactions.vii.gov.l.amiil.alaction.	

ΓΟ: The Wisconsin Election Commissio	n	. We, the undersigned qualified e	electors of the Assembly District 63	
(official with whom nom	ination papers or declaration of candidacy for the office is filed)			r district of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII, Se	ction 12 of the Wisconsin Constitution and §.9.1	0 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 officeho	lder. No statement of reason is required to initiate the re-	call of state, congressional,
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ack of committment to election integrity, block	ing lower prescription drug costs, and flagrant disrespect for	r his own constiuents by calling them "whack-jobs, morons, and idiots."		
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(name of circulator)	of Wissensin or a H.S. sitings are 18 and 1-15	and a solidary of this state would not be discussed in the	(circulator's residence - include number, street, and municipality)	
e signatures on this paper. I know that the si	or wisconsili, or a U.S. citizen, age 18 or older who, if I wiscons are electors of the jurisdiction or district represented	were a resident of this state, would not be disqualified from voting und by the office of the named in this petition. I know that each person s	ier wis. Stat. § 6.03. I personally circulated this recall petit	ion and personally obtained each of
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(ante)		Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608	3-266-8005 lweb: http://elections.wi.gov.lemail:elections@wi.gov	

TO: The Wisconsin Election Commission		We the majories a sufficient star	Accomply District 62	
	ation papers or declaration of candidacy for the office is filed)	. We, the undersigned qualified elec	(jurisdiction or dist	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 o	
petition for the recair of	(name of officeholder to be recalled and office).	nom onice pursuant to Article Am, Section	in 12 of the wisconsin Constitution and §.7.10 o	the wisconsin statutes.
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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. Hour duy	Mayson Oviedo	15746 Durand Ave.	Stillage Union Grove.	412 9/24
2. Wy	Andrea Pangburn	375 South Pine St.	Original Bullington	4/29/24
3. Ginger Speed	D Ginger Smeasol	409 Gartifly 5+	Village Bullington	4/29/24
4. Coty warriet	Coty Warnick	583 edgewood drive	Village Burlington	4/29/24
5. Mark Land	mark Traughber	5753 St R136	Uvillage Burlingfon	4-29-124
6. Lavis Rycen	laurre Ryga	52535£MO36	Utilage Burlander	429/29
1 Betty Parker	Belly Parker	33611 Contour Drive	O Village Ber lington	4/29/24
8 X Jules Do	La Karsmin DAWOCK	E 35 7 EMarket In Orpti	Dayillage Redigition	4/29/24
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25105	And u a certify: I	Certification of Circulator	Am Ver Beach P2 329	6
he signatures on this paper. I know that the sig	f Wisconsin, or a U.S. citizen, age 18 or older who, if I w ners 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 signs	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petition a	and personally obtained each of
ame. I know their respective residences given	9	this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 764
-170 (Rev 2019-09) The information on this form is rec	//	e Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-260	5-8005  web: http://elections.wi.gov   email: elections@wi.gov	

TO: The Wisconsin Election Commission			Accomply District Co	
		. we, the undersigned quantied elec		ict of officeholder)
petition for the recall of	Robin Vos	from office pursuant to Article XIII Secti		The state of the s
	(name of officeholder to be recalled and office).		on 12 of the Wisconsin Constitution and 9.5.10 of	the wisconsin statutes.
		STATEMENT OF REASON FOR RECALL		
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	of Whenein or a U.S. citizen, and 18 or older who if I w	from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.  STATEMENT OF REASON FOR RECALL  In the reason must be related to the official responsibilities of the official re		
the signatures on this paper. I know that the sig	mers are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person sign	wis. Stat. § 6.03. I personally circulated this recall petition an	d personally obtained each of
name. I know their respective residences given	n. I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.	and paper man run knowledge of its content on the date in	neated opposite his or her
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		RECALL PETITION		
TO: The Wisconsin Election Commission		. We, the undersigned qualified elec		
	on papers or declaration of candidacy for the office is filed)	c c v v v v v v v v v v v v v v v v v v		rict 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 o	the Wisconsin Statutes.
		TATEMENT OF REASON FOR RECALL		
(The reason for recall must be stated on petitions t		reason must be related to the official responsibilities of the officeholder	No statement of reason is required to initiate the recall	of state, congressional,
legislative, judicial, or county officials.)				
Hobin vos should be recalled for his facit support of	of the Chinese Communist Party (CCP), acceptance of the	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking le	ower prescription drug costs, and flagrant disrespect for	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	MUNICIPALITY OF RESIDENCE	DATE OF
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2. Jan Hush	mann CHARFLEISCHM	ANN 325 British + 145	O Village Bullingon Wi	5-4-2021
3. Carol Dio	& Carol Himb	127 Bridge St.	Village Surlenger	1-410r
4. Instructing	STEVE POTKAY	232 BATPGE ST #321	Ovillage SERLINGES	5-9-24
5. Frances KKysc	4 Frances KKirsch	232 Bridge St Pots	Village Burlington	5-4-20
6. Osspens	Rick Kirsch	232 Bridg St Apt 228	Village Burlington	5-4-24
1 Susan A. Brills	Susan A. Bailey	232 Bridge St	Uvillage Borlington	5-4-24
8 Jusy	Felina Gence	765 NPiec St	Uvillage By My	5.4.84
9. (Seda -	contang 4M Hill	765Npinest	□ Town □ Village □ XCity □ WINDEN	5-4-24
10. Crystal King	Crystal King	273 Chapel Terrace #9	Village Burlington	5-4-24
i, )65100	Andu o , certify: I	reside at Certification of Circulator 76 47 H	An Un Beach F	1 3296
(name of circulator)  I further certify I am either a qualified elector of V	Visconsin of 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	(circulator's residence - include number, street, and municipality)  Wis. Stat. 8 6 03. I personally circulated this recall petition.	and personally obtained each of
the signatures on this paper. I know that the signer	rs are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person signed		
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.		P V 700
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(date)	(signatured by Wis Stats 88 8 40 and 9 10. This form is prescribed by the	re of Greenfalor) Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	5-8005 lweb: http://elections.wi.gov.lemail.elections@wi.gov	
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D. Hampfield	Desiroe Henningfiel	ol 297 Chapel Ferrace	Village Burlington	5/4/24
2. Joseph Gralet	ant Ja Edul Edel	532 pr Dinestro	Village Screeken	5/4/24
3 Ray Shores	RAY ALABOTE	27 Chape	Village P3 ( / W / Q)	5/4/24
4.	GREG HONSE	559 Boxwood Dr.	Village BUT RUGTON	3/4/24
5. Destrus John	Destiny Jork	3292 Center St	Village Burlington	5-4-24
6. Anautoles	Ancie lakes	219 Jefferson St.	Utilage Bulington	5.4-24
1. Cloups	Anthone Jacki	825 echo Dr.	Utilage Bullington	5.4.24
8. Eleander	Hexand (a Cape)	213 chape terrace Apr	Usilage Burlington	9429
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ne signatures on this paper. I know that the sign	Wisconsin, or a U.S. citizen, age 18 or older who, if I were 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 signs	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petition an ed the paper with full knowledge of its content on the date inc	d personally obtained each of dicated opposite his or her
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(date) -170 (Rev.2019-09) The information on this form is requ		e of circulator) Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	5-8005  web: http://elections.wi.gov   email: elections@wi.gov	

O: The Wisconsin Election Commission		We the undersigned qualified along	tors of the Assembly District 63	
	nation papers or declaration of candidacy for the office is filed)	. We, the undersigned qualified elect	(jurisdiction or distri	ict 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.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
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3. Joan Rossm	when I dan Ross miller	302 North Browns	University Bun i naton	5/5/24
	TOGO J GARTEKE	217 Smain Straked	Uvillage Burlington	5/5/24
5. Aux Why is	NICK CALARIONS	404 N. PLNOSO #5	O Village Buller Com	5/5/24
6. operse 2 must	Jesse Quist	2562 Honey Creek Circle	Village City East Troy	515124
1. Geford	Elisabeth Lynd	2562 Honey Creek Cir.	Village East Troy	5/5/24
the go	Sam Dow & 1 Ag	W399 Honey Creek RJ.	Village Spring Prairiengh	5/5/24
6 Kray	Kich Ligh	01726 Pinest	U Village & CILL Gorfely	5-526
o mal	Mike Bangli	433 Okhard Street	Village Durlington	5.5.24
- dicion	Adda	Certification of Circulator	1 11- R 1 B may	
(name of circulator)	, certify: I	reside at 8 16 4 N	(circulator's residence - include number, street and municipality)	
signatures on this paper. I know that the sig	ners 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 this certification is punishable under § 12.13(3)(a), Wis. Stats.	Wis. Stat. § 6.03. I personally circulated this recall petition a ed the paper with full knowledge of its content on the date in	and personally obtained each on indicated opposite his or her
5-5-24 (date)		re of osculator)		Page No. 768
		Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	5-8005  web: http://elections.wi.gov   email: elections@wi.gov	

TO:	The Wisconsin Election Commission		We do not not a life to the	C.I. Assembly District CO	
10		on papers or declaration of candidacy for the office is filed)	. We, the undersigned qualified elec	tors of the Assembly District 63 (jurisdiction or distri	ict of officeholder)
petitio	on for the recall of	Robin Vos (name of officeholder to be recalled and office).		on 12 of the Wisconsin Constitution and §.9.10 of	
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 recall of state, congressional, legislative, 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,  lack of committment to election integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents by calling them "whack-jobs, morons, and idiots."				f state, congressional,	
lack of committment to election integrity, blocking lower prescription drug costs, and flagrant disrespect for 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.					
T	HE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MUS	T ALWAYS BE LISTED.
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2.	Lamond	Te 35e Mullens	29headow lark DV	O Town O Village SUN OS FON	5-5-59
30	menda Mela	Amanda Miller	701 County RD DD	avillage Barthagton	5/5/24
4.	Kepiccash	relek Rebencer St	each 525 miller The	Urillage SWIMM	5/8/2000
5.	Kaylu Hansen	Kaylee Hanson	456 Edward St	Uvillage Burlington	5/5/2024
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the sign	atures on this paper. I know that the signer	rs are electors of the jurisdiction or district represented	Certification of Circulator 776 47 reside at	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petition all ed the paper with full knowledge of its content on the date in	nd personally obtained each of dicated opposite his or her  Page No. 769
L-170 (R	(date) ev 2019-09) The information on this form is require		e of circulator) Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	5-8005  web http://elections.wi.gov   email elections@wi.gov	

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District 63	
(official with whom nomina	ation papers or declaration of candidacy for the office is filed)			listrict 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).			
		ATEMENT OF REASON FOR RECALL		
	ns for city, village, town, and school district officials. The rea	ason must be related to the official responsibilities of the officeholde	x. No statement of reason is required to initiate the reca	ll of state, congressional,
legislative, judicial, or county officials.)				
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(name of circulator)			(circulator's residence - include number, street, and municipality)	
I further certify I am either a qualified elector o	f 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 petitio	n and personally obtained each
the signatures on this paper. I know that the sign	ners 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 dat	e indicated opposite his or her
name. I know their respective residences given	. I support this recall petition. I am aware that falsifying this	s certification is punishable under § 12.13(3)(a), Wis. Stats.		
5-8-24				Page No. 770
(date)	(signature of			
L-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 Wis	sconsin 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 elect	tors of the Assembly District 63	A Blog Comment
	(official with whom nomination	on papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	rict of officeholder)
petitio	on 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).	CTATEMENT OF BEACON 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
1.	Ousk Am	Destiny Janish	218 Capital Street	Ortown Village Rutington WZ	4 30 24
2.	marthy Cartage	Martha Carbayal	5640 Short Valley Ln.	City Mount Pleasant	4 30 24
3.	Burker	Bridget Raminez	5640 Short Valley in.	Devillage Mount Pleasant	4/30/24
4.	Romede Ethou	y Romady Esta	922 2202 loni Ln	DAVIllage MOWIPLAGE	(jurisdiction or district of officeholder) onsin Constitution and §.9.10 of the Wisconsin Statutes.  Inson is required to initiate the recall of state, congressional,  ICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. IPALITY OF RESIDENCE ate Town, City, or Village  ICIPALITY OF RESIDENCE ATE OF SIGNING  ICIPALITY OF RESIDENCE ATE O
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6.	Dean M. Paull	DOWN M. PAUL	19911 RANK RD	City YORKVILLE	4/30/2024
7.	ashley Krengle	Ashley Krenzle	16437 5049 Rd	ority Racine tranksull	4/30/24
8.	Jan Dun .	JESSE BURPS	16437 50 th Rd.	City Ragnetralsvill	4/30/24
9.	Ein Stublas	a ERIN STUBLAS	(I 18502 5240 RD	Ocity YOKVILLE.	4/30/24
10.	Mely	Most Main	16820 aved AV	Village VI VIII	4/30/29
I,	Kelly welker	, certify: I		Columbia, TN 380	701
the sign	natures 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 signed	Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each of ndicated opposite his or her
name.	04.30.24	support this recall petition. I am aware that falsifying	prins certarcation is punishable under § 12.13(3)(a), Wis. Stats.		Page No. <b>771</b>
L-170 (F	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   608-260	6-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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)

HE MUNICIPALITY USED FOR M	IAILING PURPOSES, WHEN DIFFERENT THA	N MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	ck of committment to election integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents 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				
Carol Knight	Carol Knight	32-67th Drive Union Grove	Styllage Yorkville	5-6-24				
Irabella Sevend	isabella Seward	2036 69th Drive Union Grove	Village WIONGROVE	5-6-2				
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TO: The Wisconsin Election Commissi	on	We the undersigned qualified also	ators of the Assembly District 63	
• • •	nination papers or declaration of candidacy for the office is filed)	. We, the undersigned qualified elec-		district of officeholder)
	Robin Vos	C C C		
petition for the recall of	(name of officeholder to be recalled and office).	Irom office pursuant to Article XIII, Secti	on 12 of the Wisconsin Constitution and §.9.10	of the Wisconsin Statutes
		STATEMENT OF REASON FOR RECALL		
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	ions for city, village, town, and school district officials. The	reason must be related to the official responsibilities of the officeholde	ex. No statement of reason is required to initiate the reco	all of state, congressional,
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Hobiii vos silodio de recalled foi fils tacit sup	port of the Chinese Communist Farty (CCF), acceptance of t	rips from the CCP, failure to protect wisconsin farmland from the CCP,		
lack of committment to election integrity, bloc	king lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
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- July V	, certify: I	reside at	DIE WOOK DI.	
(name of circulator)	of Wisconsin or a U.S. citizen, age 19 or older who, if I w	are a resident of this state, would not be discustified from action and	(circulator's residence - include number, street, and municipality)	
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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	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 Wissers Floring Commission	_	We do not enter a continual	-1	
TO: The Wisconsin Election Commission (official with whom norm	nination papers or declaration of candidacy for the office is filed		electors of the Assembly District 63	district of officeholder)
	Robin Vos		ection 12 of the Wisconsin Constitution and §.9.10	
petition for the recall of	(name of officeholder to be recalled and office).	nom office pursuant to Afficie Affi, S	ection 12 of the wisconstit Constitution and 9.3.10	of the wisconsin statutes.
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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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		nted by the officeholder named in this petition. I know that each person ying this certification is punishable under § 12.13(3)(a), Wis. Stats.	signed the paper with full knowledge of its content on the da	ne indicated opposite his or her
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, ,	required by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by	by the Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   6	08-266-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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, Secti	ion 12 of the Wisconsin Constitution and §.9.10 c	of the Wisconsin Statutes.
	(name of officeholder to be recalled and office).			
		TATEMENT OF REASON FOR RECALL		
	for city, village, town, and school district officials. The	reason must be related to the official responsibilities of the officeholde	er. No statement of reason is required to initiate the recall	of state, congressional,
legislative, judicial, or county officials.)	4 th - Ohio Ohio	in the COR tolling to enter the COR		
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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
Hame Monterat	Kathleen Monefeldt	2849 93rd St.	Styllage Stufflyaut	5/10/24
2. Chad A. Knepster	Chad J. Krenzko	2500 90th St.	Town Sturtevant	5-10-24
3. Cychorus Bonesti	Settrey K, Danoust	2121 90 57.	Town Stunge Stunge Vant	5-10-24
4. Sign L. Malm	Lisa L. Halin	2900 9bt. St.	Proving Sturfevant	5-10-29
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		Certification of Circulator		
I, Danie R	oun Sanis , certify: I	reside at 877 Private Road	2220 Hartman AR 728	40
(name of circulator)			(circulator's residence - include number, street, and municipality)	
		ere a resident of this state, would not be disqualified from voting under		
		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
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.		
5-10-24	2	noi		Page No. 775
(date)	(signatur	re of circulator)		
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	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 nomin	ation papers or declaration of candidacy for the office is filed)		(jurisdiction or distr	
etition 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 Statute
	(name of officeholder to be recalled and office).	CTATEMENT OF DEAGON FOR DECALL		
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ick 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."		
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Du Jen	Dennis Jense-	3010 Knollerest D.	Ocity Burlington	5/7/24
2. Old # 50	HEATHER JENSON	300 Knollerest Dr	ority Bir lington	3/1/24
3/ Then thena	Gray Raman	30324 Forest Dr	Town Village Burlinton	5721
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	f Wisconsin, or a U.S. citizen, age 18 or older who, if I w	reside at Certification of Circulator 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition	
me. 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. 776
(date) 170 (Rev 2019-09) The information on this form is rec	, ,	re of circulator)  Wisconsin Elections 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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	PAUL QUAST	3405 S. BROWS GAKEDY	Ocity BURLING TON	5-8-84
7 / Ry	Adam Blinsk	105 Megygvack St	Otiliage Burlington	5-8-24
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9. Good Hend	Sacis Howard	30245 poplar Dr.	Urillage Burlington	518/24
10. Ozeli Hlwa	MA Jackiethward	30245 poplar Dr	O Village BUV Ington	5/8/24
I, (name of circulator)	Gdec , certify: I	reside at Certification of Circulator + 330	3Scottsdale AZ85 (circulator's residence - include number, street, and municipality)	460
the signatures on this paper. I know that the s	igners are electors of the jurisdiction or district represented	were receident of this state, would not be disqualified from voting under voting the office holder named in this petition. I know that each person sign this certification is punishable under § 12.13(3)(a), Wis. Stats.	Wis. Stat. § 6.03. I personally circulated this recall petition	
5 S S S S	4 Aluli	re of circulator)		Page No. <b>777</b>
L-170 (Rev 2019-09) The information on this form is	(J. British	e Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-260	6-8005 lweb http://elections.wi.gov   email: elections@wi.gov	

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(date)	(signature	e of circulator)		.,,
L-170 (Rev. 2019 09) The information on this form is re	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   608-260	6-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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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	vere a resident of this state, would not be disqualified from voting under \	Vis. Stat. § 6.03. I personally of	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 efficience 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.	name. I know their respective residences given. I support this recall petition. Turn aware than falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats.						
	210104	17000 U	Mal	,		Page No. 779	
	(signature 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 |

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I,	Call Biec	, certify: I	reside at 13005 N W TOO	13 200 Bawelly 85	160
I further	(name of circulator) certify I am either a qualified elector of V	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	(circulator's residence - include number, street, and municipality)  Vis. Stat. § 6.03. I personally circulated this recall petition as	nd personally obtained each of
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T 170 /P o	(date)	(signatured by Wie State && \$ 40 and 9 10. This form is prescribed by the	re of circulator)  Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	9005 hugh http://alactions.uir.gov.lamail.alactions@uir.gov	

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1. grent	Danise Wheaten	213 E Mart of Apt B	U Village BUC A COM	5/6/24
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4 Landon	Posell Wallis.	813 E. May et 31. #14	Village Burlington	5/6/24
5. Kandy Blo	Rands Johnson	313 E Market 74 23	Town Unlage Bull 1970	5/624
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, Joshua Foss	Rodora GUZZ		Bates Lille A  (circulator's residence - include number, street, and municipality)	R 72501
further certify I am either a qualified elector of 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 under by the officeholder named in this petition. I know that each person sign this certification is punishable under § 12.13(3)(a), Wis. Stats.	Wis. Stat. § 6.03. I personally circulated this recall petition	
5 - 6 - 2 4	Justio	re of circulator)		Page No. 781
(diffe)		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	

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1.	which arm	Lais Bastida	767 N line St	University Burlington	5-6-24
2.	Ana Maria C.	Ana Maria Carpajal	767 N pine ST	Village Burlington	5-6-24
3		Brian Lobors	5 49 W State St	Village Burlington	5/6/24
4. 9	consistation	Elena Metzler	640 Methors t ADI 4	Village Burlington	3/6/24
5.	augh	anka Darga	424 harfield st	O Village Burngton	7-6-24
6.	Elh	Toylor Condra	1745. ELMWOODAG	Uvillage BURLINGTON	5/6/24
7.	Correre Low	Corrine Lois	116 5. Elmwood AVE	O Town O Village Bulingthe	5/4/24
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I,	Joshua Fos	certify: I	Certification of Circulator reside at 25 18080 wood Rd	Batesville, AR 72	501
I furthe	(name of circulator)		ere a resident of this state, would not be disqualified from voting under V	(circulator's residence - include number, street, and municipality)	
the sign	natures on this paper. I know that the signer	rs are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person signed		
name.	S/6/24	Johna.	this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 782
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The Wisconsin Election Commission

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lack of committment to election integrity, blocking leads to the second	ower prescription drug costs, and flagrant disrespect for	r his own constiuents by calling them "whack-jobs, morons, and idiots."		
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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
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Thana Womas	maria Thomas	560 west State St.	Octy Sewlington	5-6-24
2 42 1	Do all	The same of the sa	□ Town	
- Tillad hun o	111971 7 ADMAS	5 > West 50 Fit 5	City Burlington	5-6-24
March Comment	1011	36 0000000000	Town	0 0
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		Cartiffaction CCi. 14	1	
l Joshua Fos	72	Certification of Circulator reside at 25 Rosewood Ro	1 Bates 11.0 HA	72501
(name of circulator)	, certify: I	reside at 3 / 105 cm occ / 10	(circulator's residence - include number, street, and municipality)	100
I further certify I am either a qualified elector of W	Visconsin, 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	Wis. Stat. § 6.03. I personally circulated this recall petition an	d personally obtained each
the signatures on this paper. I know that the signer	rs 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 inc	dicated opposite his or her
name. I know their respective residences given. I	support this recall petition am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		
5-6-29	How h	no tost		Page No. 783
(date)		re of circulator)		
-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	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	

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

The Wisconsin Election Commission

(official with whom nominate	on 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	the Wisconsin Statutes.
	(name of officeholder to be recalled and office).		•	
legislative, judicial, or county officials.)	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 trips from the CCP, failure to protect Wisconsin farmland from the CCP,	No statement of reason is required to initiate the recall o	f state, congressional,
lack of committment to election integrity, blocking	lower prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR MA	LING 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
1 Lane a. Donahue	- Lane A. Donahue	365 So Kendrick Ave.	Village Byrlington	05/07/2024
2/2/37	RANDY BREY	UJ 75 KEMPLICK	Village By Willintoney	5/1/22
3.	P		□ Town □ Village □ Eity	1 1
4/12	Ken Schuerman	525 Westridge Ave	Village Bus ( ua tok	3/7/24
5 Vorry ( 1)	Lang Siro Phine	150 who pringe twe	O Town Village SULLY CON	50/20
6.	1	000000	□ Town □ Village □ City	119
7 to lummugan	Ashley Morgan	433 Donald DR#20	O Town O Village Bully Alex	5/7/24
* Cou fleitight	Cole Helaeist	433 Danald Dr #19	Village Barling fon	171
9///	Jacob Lopez	201 meador last Dr apt #11	Uvillage Becklingto L'	5/7/21
10/1/2	Ashley lopez	201 Meadowlark Dr Apt 11	Village Burlington Wi	5/7/24
I, Joshua Fr	certify: I	reside at Certification of Circulators	Rosewood Botesville A	A 7250(
I further certify I am either a qualified elector of the signatures on this paper. I know that the signe	rs are electors of the jurisdiction or district represented	ere a resident of this state, would not be disqualified from voting under to by the officeholder named in this petition. I know that each person signa this certification is punishable under § 12.13(3)(a), Wis. Stats.	(circulator's residence - include number, street, and municipality)  Wis. Stat. § 6.03. I personally circulated this recall petition a ed the paper with full knowledge of its content on the date in	nd personally obtained each of adicated opposite his or her
5-7-24 (date)	Jos and	re of circulator)		Page No. <b>784</b>
L-170 (Rev.2019-09) The information on this form is require		Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	8-8005   web: 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)

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)

Robin Vos

MUNICIPALITY LISED FOR MA	IL INC DUDDOSES WHEN DIFFERENT THAN	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. TI	IF NAME OF THE MUNICIPALITY OF RESIDENCE M	UST ALWAYS RELIS
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
Swiften	Stephen Tell	652 Cardinal Cir #1	orty Burlington	5/7/2
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Joshua Fos	S , certify	Certification of Circulator Treside at 25 Rosewood Rd	Bataville AR 725	:01

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

The Wisconsin Election Commission

THE MUNICIPALITY USED FOR M	AILING PURPOSES, WHEN DIFFERENT THAN M	this own constiuents by calling them "whack-jobs, morons, and idiots."  IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N.  STREET & NUMBER OR RURAL ROUTE	AME OF THE MUNICIPALITY OF RESIDENCE M 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
KANLLY	SEAN POFFENBEAGER	237 W JEFFERSON	City Burlington	5-6-29
The state	Reka Munich Wich	OF BLS. Perkins Polva.	Village Bullington	bS-06-24
Cynthin Suestian	of Cynthia C. Kucz Kows	1272 S. Perkers Blue	Original State Control	5-624
Aust	LUIS ESTRAPH	125 S. PINA STKART	Utillage Burlington	5-6-24
	, Sarah Klahs	409 S Pine Street	Urcity Bully	5-6-24
That Dad	e Kirsten Velando	441 S Pine Street	orcity Burleyon	5-6-26
Julie Donn	Julie Dunn	440 N. Pine Street #2	Other Busington	5-6-24
	Priston Krueger	1480 auget 1 1/2	Oron Village Bulington	5-6-24
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TO: The Wisconsin Election Commission	72 10 100 12 12 12 12 12 12 12 12 12 12 12 12 12	. We, the undersigned qualified elec	tors of the Assembly District 63	
	nation papers or declaration of candidacy for the office is filed)		(jurisdiction or c	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 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	ons 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 reca	all of state, congressional,
legislative, judicial, or county officials.)				
		trips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, blocking	ng lower prescription drug costs, and flagrant disrespect for	r his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR M	AILING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE M	IUST 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
1. Sang June	Savanna Mendovson	bun myton WI,53105	United Buckington	5/7/24
2. Low Valto	Lonnie VunHook	808 Uhen Ct	Utiliage Burlington	8-7-24
3. Var (historie	Paul Christersen	100 Larksper In	Ordinge Bullingen	5/7/24
* Richard Thomas	& Richard Thomas	2209 Browns Lt. Dr. Apt6	Oity Bulington	5-7-24
5 Polrices Morro	o Potoicia marris	2709 Brown LK Dr	Otive Burlington	5-7-24
6.	Joseph Serpico	1439 Meadow Wood Rd	Village Burlington	5-7-24
7. AMMA	Repecca Dankers	1439 Meadow Wood Rd	Otiv Dulington	5-7-24
8. Slaay Colsm	Stacey Cailson,	2032 StonogateRd	Village Burlington	5-7-24
Ina teme	- James A Bastme	y 189 W Jefferson St.	Oth Bulled	5-7-28
6. Chan gas	c Chapte Jones	1126 Motor Dr	Utiliage Burlington	5-7-24
- 1101		Certification of Circulator	- 11 1 10 73 840	
I, Daniel Round	certify:	reside at 87) Private Road 222	(circulator's residence - include number, street, and municipality)	
the signatures on this paper. I know that the si	gners are electors of the jurisdiction or district represented	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	Wis. Stat. § 6.03. I personally circulated this recall petitioned the paper with full knowledge of its content on the data.	on and personally obtained each of ate indicated opposite his or her
		g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 787
5-7-2024	J~ (signat	ure of circulator)		101
EL -170 (Rev 2019-09) The information on this form is r		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	

The Wisconsin Election Commission		. We, the undersigned qualified	d electors of the Assembly District 65	
(official with whom nomination	n papers or declaration of candidacy for the office is filed)		(jurisdiction or	district 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.
petition for the recall of	(name of officeholder to be recalled and office).	nom one paramit to ration rain,	3	
		STATEMENT OF REASON FOR RECALL		
(The reason for recall must be stated on petitions for		reason must be related to the official responsibilities of the office	cholder No statement of reason is required to initiate the reco	all of state, congressional.
legislative, judicial, or county officials.)	if city, village, town, and school district officials. The	reason must be related to the official responsionness of the office	inolder. The statement of reason is required to initiate the rect	an of state, cong. contain,
	the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the C	CP.	
lack of committment to election integrity, blocking lo	wer prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idio	ts."	
THE MUNICIPALITY USED FOR MAIL	ING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. T	HE NAME OF THE MUNICIPALITY OF RESIDENCE M	MUST ALWAYS BE LISTED.
		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
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Bundickunhman	Branda Knuchman	189 W Jefferson St	Village P 1 4	15/2/24
maria in the second of the sec	DIRION DIUSTINAL	101 10 0 1110 301 31	Scity Burlington	-1101
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D \ D \ .	, certify: I		10 H + + 10 7) 0110	
1, Daniel Roumban	, certify. 1	reside at a 11 PLIVATE COUNTY	(circulator's residence - include number, street, and municipality)	
I further certify I am either a qualified elector of W	Visconsin or a U.S. citizen age 18 or older who if I v	vere a resident of this state, would not be disqualified from voting		ion and personally obtained each of
the signatures on this paper. I know that the signers	s are electors of the jurisdiction or district represented	by the officeholder named in this petition. I know that each person	on signed the paper with full knowledge of its content on the da	ate indicated opposite his or her
		this certification is punishable under § 12.13(3)(a), Wis. Stats.	P. T.	
		. (		Page No. 788
5-7-2024	25 6	re of circulator)		700
(date)		ure of circulator)	Long and appropriate the state of the state	

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec	ctors of the Assembly District 63	
(official with whom nominate	ion 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 of	of the Wisconsin Statutes.
	(name of officeholder to be recalled and office).	STATEMENT OF BEACON FOR BECALL		
(The second for small small be stated as matitions		STATEMENT OF REASON FOR RECALL	No statement of season is sequired to initiate the second	of state compactional
(The reason for recall must be stated on petitions legislative, judicial, or county officials.)	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	oj state, congressionat,
	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 MUNICIPALITY USED FOR MA	ILING PURPOSES, WHEN DIFFERENT THAN M	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MU	ST 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
1. 11/2/11/11	Kyle Mc Kusker	3565. PerkinsBlud	Urlown Burlington City	5-8-24
2. CN X	are wender 100gt	250 S. Perkins Blud	O'lilage Burlington	5-8-24
3. Brady Saras	Brady Harris	117 N Perkins Blod	Dillage Burlington	5-8-24
1 Mary Reits	Mary Beates	189 W Highland Ave	O Town O Village B was (incton)	5-8-24
5. 20 9	Jith Reynich	AL W market, St.	Unilage BUT 1 Agt ON	8-28-28
6. Gant Bonner	Junet Bonner	308 Johnson St	Ulliage Burlington	5-8-24
7.	Shane Bonner	JO8 Johnson St	O'lilage Burlington	5-8-24
8. Paul forte	Pnul Pather	210 w Sefferson St	O Town  O Village O City  O Town	5-8-24
9. ambrea & Recher	Andrew J. Reiherzer	301 Henry St.	Utiliage Burlington	5-8-24
10			☐ Village	
			□ City	
1, Daniel Roums	, certify: I	reside at 877 Private Road	2220 Hartman AR 7284	10
(name of circulator)  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 vers are electors of the jurisdiction or district represented	were a resident of this state, would not be disqualified from voting under I by the officeholder named in this petition. I know that each person sign g this certification is punishable under § 12.13(3)(a), Wis. Stats.		
5-8-2024	a) a	ner		Page No. 789
(date)		ure of circulator)	6 9005 hugh, http://ologicos.vii.gov.lamail.elections@vii.gov	

# 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)

petition for the recall of	Robin Vos	from office pursuant to Article XIII, S	ection 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		e reason must be related to the official responsibilities of the officeh	nolder. No statement of reason is required to initiate the recal	ll of state, congressional,
legislative, 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 CC	CP,	
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	3."	
THE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. TH		
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 Sue Voss	Sue Vosss	2925-96thSt.	Town Nativillage Sturtevant	5-10-24
2. Hary You	Gary Voss	2925 96 Street	g Village Stortevant	5-10-24
3. De	Ben kortendick	2848 97th 81	or Town or Village Stutevent	5-10-24
4 Samon Server	Graven Polera	9323 Michigan St.	Original Sturteward	5-10-24
5 Xoury Marden	Kathy Maiden	2035 90th St	oriving Sturtevant	5-10-24
6. Becky Mulder	Becky Mulder	2924 90th ST	Oriving Sturterant	5-10-24
" Mick Morero	Nick Moreno	2920 90th St	Otiv Sturtargnt	5-10-29
* Pamille Sauchan	TAMEKA SAMPLEZ	2920 90th 51	Orive Sturtevant	5-10-24
9.000			☐ Town ☐ Village	
LECCARACIU			City	
10. Danna Morrero	Deanna Marren	2815 9154 St	or Town village Sturtevant	5-1024
0		Certification of Circulator	1 2	
I, Danjel Blows	, certify: I	reside at 877 Private GC	(circulator's residence - include number, street, and municipality)	12840
I further certify I am either a qualified elector of the signatures on this paper. I know that the signa	ers are electors of the jurisdiction or district represented	were a resident of this state, would not be disqualified from voting u d by the officeholder named in this petition. I know that each person	nder Wis. Stat. § 6.03. I personally circulated this recall petition	on and personally obtained each of the indicated opposite his or her
name. I know their respective residences given.  J-10- L-4	24	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 790
(date) EL-170 (Rev.2019-09) The information on this form is requi		ure of circulator) ie 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

legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support of the Cl lack of committment to election integrity, blocking lower pro-	hinese Communist Party (CCP), acceptance	STATEMENT OF REASON FOR RECALL The reason must be related to the official responsibilities of the office of trips from the CCP, failure to protect Wisconsin farmland from the Co for his own constituents by calling them "whack-jobs, morons, and idiot	CP,	l of state, congressional,
legislative, judicial, or county officials.)  Robin Vos should be recalled for his tacit support of the Clack of committment to election integrity, blocking lower pro-	hinese Communist Party (CCP), acceptance	of trips from the CCP, failure to protect Wisconsin farmland from the Co	CP,	l of state, congressional,
Robin Vos should be recalled for his tacit support of the Cl ack of committment to election integrity, blocking lower pro				
ack of committment to election integrity, blocking lower pro				
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
		Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
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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)

ng lower prescription drug costs, and flagrant disrespect fo	r his own constiuents by calling them "whack-jobs, morons, and idio	ts."	
AILING PURPOSES, WHEN DIFFERENT THAN N	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. T	HE NAME OF THE MUNICIPALITY OF RESIDENCE N	MUST ALWAYS BE LISTED
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
Priscilla Crowley	116 N. Wisconsin St	Village Burlington	5/8/24
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	PRINTED NAME OF ELECTORS	PRINTED NAME OF ELECTORS STREET & NUMBER OR RURAL ROUTE	Rural address must also include box or fire no  PRISCILLA Crowley  ILL N. Wisconsin St  Town  Village  City  Town  Village

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)

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the Chinese Communist Party (CCP), acceptance of trip	os from the CCP, failure to protect Wisconsin farmland from the CCP,		
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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
Judy Obuchowski	1631 Kuiden Lawe	ortown Village MT, PleasauT	5-9-20
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# RECALL PETITION We the undersigned qualified electors of the Assembly District 63

TO: The Wisconsin Election Commission		we, the undersigned quantied ele		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, Sect	ion 12 of the Wisconsin Constitution and §.9.10 c	of the Wisconsin Statutes.
	(name of officeholder to be recalled and office).	STATEMENT OF REASON FOR RECALL		
om 6 N to the state does notificate	for city williage town, and school district officials. The	reason must be related to the official responsibilities of the officehold	er. No statement of reason is required to initiate the recall	of state, congressional,
1 - 1-1-the indicial or county officials				
Robin Vos should be recalled for his tacit support of	of the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		SAME SEE SEE
		his own constiuents by calling them "whack-jobs, morons, and idiots."		
THE MUNICIPALITY USED FOR MAIL	LING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE	NAME OF THE MUNICIPALITY OF RESIDENCE MU	IST ALWAYS BE LISTED.
	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	Rural address must also include box or fire no	Indicate Town, City, or Village	SIGNING
1. Makers y	Marthufer the	85/9 Faplorer chese	Willage Sturtevant	5/10/24
2. Trune Vols	-lorena Nelsen	8501 Foxhaven Chase	Drown Sturterant	5/10/24
3. G 61011	01 0/00/10/00/50	031/2/64 0 2000-1 =	Town Strit event	5/10/24
on my	£11-161-161-161-161-161-161-161-161-161-	0010 1011 2000 12 11	Town	110101
4. Am Alex	Mice Karvelas	850 Kubsur	Ocity STUNE VA	3/10/24
5. Alex Ton	Airy Temterry	3726 Princeton Way	Divillage Stureturat	5/10/24
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, LARRAN OLSO		Certification of Circulator  Treside at 831 Tommank ST- GREE	N DAG 601 54304	
i,		~ ( ( )	(circulator's residence - include number, street, and municipality)	
(name of circulator)	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	er Wis. Stat. § 6.03. I personally circulated this recall petition	and personally obtained each o
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 si	gned 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.		
05/10/2024	( da A - 8 30			Page No. 794
(date)	(signate	ure of circulator)		
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 the	ne 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 Commiss	sion	. We, the undersigned qualified elec	ctors of the Assambly District 63	
	mination papers or declaration of candidacy for the office is filed)	. we, the undersigned qualified elec		listrict 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	
	(name of officeholder to be recalled and office)		constitution and §.7.10	o. the misconsin statutes.
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SIGNATURES OF ELECTORS	PRINTED NAME OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE M MUNICIPALITY OF RESIDENCE	DATE OF
SIGNATURES OF ELECTORS		Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. Sant AC	Sandra A Callis	87/6 Buckingham Dr	Town St us Ewent	5-12-04
2.	Logan Jourson	3c or Bushing Da	Town Stillage S and sugar	5/12/24
MANA	Cogar Corregor	Jos all hirighes Di	□ City	7,-(-)
Tosan Vill	a Susan VIIa	264 WChestnut St	village Buringth	5/12/24
4. Muld kun	Michael Broffen	801 Browns Lak Dr	Utillage BUN I nateh	5-2-24
5-MA Brack			□ Town □ Village	
6.	Mar Shpace		□ City □ / fown □ Village □ City	VV
2- 6-6 km -	Regine O LINCA PAR	4319 ( 200 1 200 2 1 1 1	□ Town Sel Village A A = P//Do/ A	= 1- 31
ner Trof	KICUARO HAGOFIAN	4319 GREDIBRIAK LN	ocity MILITERSANT	5-/2-27
8. Cypithis Huyes	Cynthon Hugoprun	439 Greenbrar Ly	Utiliage M, Pleasant	5-WILL
9.	JanaZara	6414, 21st Street	U Town U Village U City U L SX h	5.12-24
10. Option to	Chris Runjo	114 Clark	Da Town U Village U City	3/12/24
	Ald	Certification of Circulator	A 11 2 5	7
(name of circulator)	, certify: I	reside at 7/6 (744)		32966
further certify I am either a qualified electo	or 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	(circulator's residence - include number, street, and municipality) Wis Stat 8 6 03 I personally circulated this recall petition	and personally - Lt.
the signatures on this paper. I know that the s	signers are electors of the jurisdiction of district represented	by the officeholder named in this petition. I know that each person signs	ed the paper with full knowledge of its content on the date	indicated opposite his or her
name. I know their respective residences give	ven. I support this recall petition. I am aware that falsifying	this certification is punishable under § 12.13(3)(a), Wis. Stats.		FF 300 III OI IIO
2 7 7				Page No. 795
(date) 4-170 (Rev 2019-09) The information on this form is	required by Wis Stats 88 8 40 and 9 10. This form is precentled by the	e of cifculator) Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	COOK! I I I	
YI WIN TOTAL	75 o to and 710. This form is presented by the	Wisconsin Electrons Commission   P.O. Box 7984, Madison, W1 53707-7984   608-266	o-8005  web: http://elections.wi.gov   email: elections@wi.gov	

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

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

(jurisdiction or district of officeholder)

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

THE MUNICIPALITY USED FOR MA	AILING PURPOSES, WHEN DIFFERENT THAN	MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. TH	E NAME OF THE MUNICIPALITY OF RESIDENCE M	MUST ALWAYS BE LIST
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
Katllen Rentan	Kathleen Rentas	6411 Wheatland Rd.	Utillage Burlington	5/8/24
angels Rentas	Angelo Rentas	6411 Wheatland Rd	Dillage Burlington	5/8/24
Denige Wisneusler	Denia Wisnewski	124 N Wisconsun St	Town Village Buy ungton	5/8/24
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TO:	The Wisconsin Election Commission		. We, the undersigned qualified elec-	tors of the Assembly District 63	
	(official with whom nominated	on papers or declaration of candidacy for the office is filed)			strict of officeholder)
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		(name of officeholder to be recalled and office).	TATEMENT OF DEACON FOR DECALL		
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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."		and the same of the
Т	HE MUNICIPALITY USED FOR MAI	LING PURPOSES, WHEN DIFFERENT THAN M	IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA	AME OF THE MUNICIPALITY OF RESIDENCE MU	JST ALWAYS BE LISTED.
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1.	Siono Banos	Digne J Bauer	8570 Fox Haven Chase	City Sturtevant	5/10/24
2.	and	Carlota astillo	8473 Westbrook Dr.	Town Willage Lu-Lavant City	5/10/24
3.	Mosh-	Michael Ervin	8449 Westminster DR	Original Stusteumt	5/10/24
4.	129	Jacquelin Gacia	2834 894 54	a Village Sturtums	5/10/24
5.	Kne Ubrta	ne Gina R Montero	3333 Kensington Sigl	Ocity Studerant	10 may 200
6.	MASchu	Jeff Jellyand	3409 Kensing In Silla	avillage Stu Herry t	10-Warg-2022
7.	Aus.	Janickonen	3475 Kennangy Synd	Orown Willage Styte Vand	5/10/24
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			6 15 1 161 1	□ City	
I	Sonathan	Karte , certify: I	reside at 118 S. washington st.	Green Bay WI 54301	
"	(name of circulator)		7	(circulator's residence - include number, street, and municipality)	
			rere are sident of this state, would not be disqualified from voting under by the office to the named in this petition. I know that each person sign		
			the ertification is punishable under § 12.13(3)(a), Wis. Stats.	ed the paper with full knowledge of its content on the date	indicated opposite his of her
	5-10-24	- Winds	re openiculator)		Page No. 797
L-170 (R	Rev.2019-09) The information on this form is requir	ed by Wis. Stats. §§. 8.40 and 210. This form is prescribed by the	Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-260	6-8005  web: http://elections.wi.gov   email: elections@wi.gov	

TO: The Wisconsin Election Commission	n	. We, the undersigned qualified elec	tors of the Assembly District 63	
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	(name of officeholder to be recalled and office).	STATEMENT OF REASON FOR RECALL		
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logislative judicial or county officials.)				
		rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
lack of committment to election integrity, block	ing lower prescription drug costs, and flagrant disrespect for	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. Edga John	Seddle Fliess	22501 Washington Are/	Orillage City Kansonville	5-12-24
2. Middle	Matt Thom	22223 washington to	Oily Kansasville	5-12-24
3. Just	Juan Botero	22225 Wishington are	Oring Lensos Me	5-12.24
4. Hele places	Johanna Gran	2225 Weshington sur	Orivate Language	5-12-hi
5. Jan Dardy	Sack Sherkerver	3125 bearmontare	Unillage City Consassing	5-12-21
6. Nancy Pear	Nancy Near	2201 Beacemont Ave	oring Kansasville	5-12-24
7. Sha I Vas	Sharon Vaught	4208 Stormy Dr	oriy Kansasville	5-12-24
8. Jeh	Jongthan CALEK	214d Plank Rd.	Oily Kansasville	5-12-24
9.	Vin Calek	21401 Plank Rd	Utiliage Ukansasville	5412-24
10. CM	Carliller	29 404 Plank Rd	order of Kansasville	点 5-12-24
, Joshua Fe	oss , certify: I	reside at 25 Assurand Rd (	Batesville AR 7250	/
(name of circulator)  I further certify I am either a qualified elector	r 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 I by the officeholder named in this petition. I know that each person sign	Wis. Stat. § 6.03. I personally circulated this recall petition a	and personally obtained each of
name. I know their respective residences giv	en. I support this recall petition. I am aware that falsifying	g this certification is punishable under § 12.13(3)(a), Wis. Stats.		Page No. 700

EL-170 (Rev.2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is presented 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

claration of candidacy for the office is filed)			
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bin Vos	from office pursuant to Article XIII, Sectio	n 12 of the Wisconsin Constitution and §.9.10 of	of the Wisconsin Statutes.
f officeholder to be recalled and office).			
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ge, town, and school district officials. T		No statement of reason is required to initiate the recall	of state, congressional,
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tion drug costs, and flagrant disrespect	for his own constiuents by calling them "whack-jobs, morons, and idiots."		
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UNTED NAME OF ELECTORS	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
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t t	ge, town, and school district officials. To Communist Party (CCP), acceptance of the drug costs, and flagrant disrespect	STATEMENT OF REASON FOR RECALL  ge, town, and school district officials. The reason must be related to the official responsibilities of the officeholder.  Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, dion drug costs, and flagrant disrespect for his own constituents by calling them "whack-jobs, morons, and idiots."  OSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NATURE NAME OF ELECTORS  STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	STATEMENT OF REASON FOR RECALL  te, 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 accommunist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, formally acceptance of trips from the CCP, failure to protect Wisconsin farmland

TO: The Wisconsin Election Commission		. We, the undersigned qualified elec	tors of the Assembly District 63	
(official with whom nomination	papers or declaration of candidacy for the office is filed)			rict of officeholder)
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		STATEMENT OF REASON FOR RECALL		
The reason for recall must be stated on petitions to legislative, judicial, or county officials.)	r 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,
	the Chinese Communist Party (CCP), acceptance of t	rips from the CCP, failure to protect Wisconsin farmland from the CCP,		
ack of committment to election integrity, blocking lov	ver prescription drug costs, and flagrant disrespect for	his own constiuents by calling them "whack-jobs, morons, and idiots."		711200
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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
De James	DANKakonch	2200674h DRIVE	- Village Virion (gove	5/13/24
2. 946	William Casper	5/ Televion	Uvillage Burlington	5-13-24
3			-SLTown □ Vinage □ City	/
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		Certification of Circulator	_ a ony	
Daniel Rounda	certify: I	reside at 977 Private Runn	2220 Nothing AN 721	1417
(name of circulator)			(circulator's residence - include number, street, and municipality)	
he signatures on this paper. I know that the signers	are electors of the jurisdiction or district represented	ere a resident of this state, would not be disqualified from voting under very the officeholder named in this petition. I know that each person signature this certification is punishable under § 12.13(3)(a), Wis. Stats.	Wis. Stat. § 6.03. I personally circulated this recall petition and the paper with full knowledge of its content on the date is	and personally obtained each ndicated opposite his or her
5-17-2024	8-2	this certification is punishable under § 12.13(3)(a), wis. Stats.		Page No. 800
(date)		re of circulator) Wisconsin Elections Commission   P.O. Box 7984, Madison, WI 53707-7984   608-266	-8005 hugh: http://elections.u/i gov.lemail: elections@u/i gov.	