| O: The Wisconsin Election Commission | . We, the undersigned qualified | electors of the Assembly District 63 (jurisdiction or district | et of officeholder) |
|--|--|--|--------------------------------|
| O: The Wisconsin Election Commission (official with whom nomination papers or declaration of candidacy | for the office is filed) | Section 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes |
| Robin Vos | | • | |
| tition for the recall of (name of officeholder to be re | STATEMENT OF REASON FOR RECALL | is serviced to initiate the recall of | f state, congressional, |
| | A district officials. The reason must be related to the official responsibilities of the officel | holder. No statement of reason is required to initiate the recent | ,, |
| he reason for recall must be stated on petitions for city, village, town, and school | STATEMENT OF REASON FOR RECALL sol district officials. The reason must be related to the official responsibilities of the officer of the offi | CP. | |
| gistative, judicial, or county officials) | (CCP), acceptance of trips from the CCP, failure to protest | | |
| obin vos stiduid de recalled for mo tast depres | id flagrant disrespect for his own constituents by calling them "whack-jobs, morons, and idiot | IS." | TO ALMANO DE LISTED |
| ck of committment to election integrity, blocking lower processions and | of diagrant disrespect for his own constituents by calling their whack-jobs, moore, and diagrant disrespect for his own constituents by calling their whack-jobs, moore, and dispersion of the property of the | HE NAME OF THE MUNICIPALITY OF RESIDENCE MUS | DATE OF |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN D | OFFERENT THAN MUNICIPALITY OF RESIDENCES, INC. STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | SIGNING |
| SIGNATURES OF ELECTORS / PRINTED NAME OF | Rural address must also include box or fire no | Town | - 10 - |
| A MACALIA | - Martavori | □ Village V V V V V V V V V V V V V V V V V V V | 15-10-6 |
| 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | Inil them 85 CC VUI a Lake | Dicity 100/14 | 1001 |
| Market Ma | Callinan Anst Cina | Brillage NAL-Pleasont | 15102 |
| 2. 12 Hingella | 3011. VAII 19020 GIREL PV | D Town | |
| 43 | | I Village I.A. Pleasant | 10-10-24 |
| 3. Michelle M | 19100 Settlement Trail | acity WIF TEUSCIAT | 1 - 10 3 |
| The state of the s | CITIE! PRODUCTION CI | O Village MAPPORT | 15-10-2 |
| 4 M bill Karry Sh | reeder 9516 Old spring St | a city / 1 14 PC OCSCIO | |
| reller paren so | · Ceach | Village Mi Dleasont | 15-10-2 |
| 5 | 10 GC/60ld SATINAST | City / TU JULY | w |
| 5 MAN Summer 3 GSON SW | UN301 13.0014 1 3 | □ Town □ Village | |
| 6 | | -O-City | |
| 0. 1 | | ☐ Town | |
| 7 | | □ City | 2 |
| | | ☐ Town | |
| 8. | | □ City | _ |
| 0. | | ☐ Town | |
| 0 | | □ City | |
| 9. | | □ Town □ Village | |
| 10 | | □ City | |
| 10. | a de de Africa de Circulator | A Bible arove I | 62858 |
| 2 1 07 | Certification of Circulator | | |
| Cody Eller | | (circulator's residence - include number, street, and municipality) | on and personally obtained e |
| (name of circulator) | age 18 or older who, if I were a resident of this state, would not be disqualified from votir tion or district represented by the officeholder named in this petition. I know that each pe | ng under wis, state 9 0.03. I personally extended the paper with full knowledge of its content on the da | te indicated opposite his or l |
| I further certify I am either a qualified elector of wisconsin, of a 0.3. children | age 18 or older who, if I were a resident of this state, would not be disqualified from votir tion or district represented by the officeholder named in this petition. I know that each per I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. | Signification pro- | Page No. 001 |
| name. I know their respective residences given. I support this recall petition. | tion or district represented by the officenoider named in this pestador. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. | | 1 ago 110 90 1 |
| | | | |
| (date) | (signature of circulator) O. This form is prescribed by the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-79 | 984 608-266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| 1.170 (Rev 2019-09) The information on this form is required by Wis. Stats §§ 8.40 and 9.10 | 0. This form is prescribed by the wisconsin elections | | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elect | ors of the Assembly District 63 | |
|---|--|--|--|---------------------------------|
| | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | • |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Sectio | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office) | A THE STATE OF BEACON FOR BECALL | | |
| | | STATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall of | state, congressional. |
| | for city, village, town, and school district officials. The | e reason must be related to the official responsibilities of the officeholder, | 140 statement of reason is required to initiale the recuit of | orale, congressionary |
| legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of t | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots," | | |
| | | | The second secon | TAX MANORE LIGHTED |
| THE 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 MUNICIPALITY OF RESIDENCE | DATE OF |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 6:1 | | | □Town | -/ 1/ 210 |
| 1. Office | Joey Barrera | 3425 Kennsiration sa, Rd. | City Sturtwant, W1 | 2/11/94 |
| 11/2/11 | | Tool | Town Ale C C 1900 HIT | Tula V |
| 2 Wayne Thomas | Lulevne 1 Hemen | 15 941 Durand HVA, 201 000 | ocity an ion order at | 5/11/27 |
| 1 of a o open | 14 | 1 - 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | D Town | Etulail |
| 3. My Cochaus | Mary Aschauer | 1599/ Durand Hue JOHO10 | acity Chron 6 rove W? | 2/11/24 |
| - Down Owen Do | | 2011 2 1-11 | □ Town | [- ' · ' ~ ' |
| 4 Mills | Slarg Copps | 18991 Duranet 400, 198 | acity Union GROPPER | 2-11-04 |
| 500 | 10 | Dill Day Lavallace | Town Village 1 12 1 10 C P A D TATT | ~ 11 7/1 |
| (LOCAL) CONDUCTOR | Sharon Gwens | 13941 1241 MODINO 1410 - 1418 | city WILLY CAROUP, ULL | 5-11-29 |
| 6 1/2 1/1 | 11 00 1- | 10-1911/0 1 1110 | Town UVillage: 1/2 C D A CO 10 1.) T | -11/211 |
| Lage Andlive | 11 Have Winderson | 155791 Verand Me 190_ | acity Union France WI | 5 11/24 |
| 7. 2 0 0 | Post of point | tion of the | Town Williage Towned WE = | 3/1/10 |
| JANK 13 | and Charles | 15H 5700 n | OCIO CONTEDITO | 770 |
| 8 6 1 1 1 | 0 | 100111 10000 11 | Urillage T. Storgart Live | 3/1/24 |
| Day In | DAKYL POISL | 15-111 Brass Rd | Town | 27.4 |
| 9 | | | ☐ Village | |
| • | | | □ City | |
| 10. | | | -D-Village | |
| | | | □ City | |
| Cody & V | certify: I | reside at 250 Caleb 170 | | 75 P |
| (name of circulator) | | were a resident of this state, would not be disqualified from voting under | (circulator's residence - include number, street, and municipality) Wis Stat 8 6 03. I personally circulated this recall petition a | and personally obtained each of |
| the signatures on this paper. I know that the signa | ers are electors of the jurisdiction or district represented | d by the officeholder named in this petition. I know that each person sign | ed the paper with full knowledge of its content on the date in | 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. | | |
| 5/11/24 | Coll | EL | | Page No. 902 |

(date)

(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

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

The Wisconsin Election Commission

| The motion for the recall of the visconish Constitution and § 9,10 of the Wisconish Natures. Tom office pursuant to Article XIII, Section 12 of the Wisconish Constitution and § 9,10 of the Wisconish Natures. Tom office pursuant to Article XIII, Section 12 of the Wisconish Natures. Tom office the visconish of the visconish nature of the visconish of the visconish of the visconish nature of the visconish of the visconish nature of the visconish natural on peritors. And the visconish natural of the Nature of the visconish natural of the Nature of the visconish natural of the Nature of t | (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | Qurisdiction of dist | |
|--|--|---|--|--|--|
| The reason for recall must be stand on pertitions for eity, village, (town, and school district of Read of Read School district of Read School School School School Read School School School Read School School School Read School S | petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | f the Wisconsin Statutes. |
| The reason for recall must be stand on portions for city, village, lown, and shool distract official. The reason must be related to the official report of the official content of reason is required to initiate the recall of state, congressional, legislative, legislative, particle, or county officials. Ribbs to should be recalled for his sort support of the Citiesee Community Party (CCP), acceptance of tips from the CCP, stature to protein Wasconsin turniand from the CCP, leaked or recalled for his sort support of the Citiesee Community Party (CCP), acceptance of tips, because of the citiesee Community Party (CCP), acceptance of tips, because of the citiesee CCP, acceptance of the citiesee CCP | • | (name of officeholder to be recalled and office) | The second secon | | |
| Registeries, publicate, or country efficials. Registeries, publicate, or country efficials in the Lupport of the Critices of communist Party (CCP), acceptance of trips from the CCP, feature to protect Wisconsin farmland from the CCP. Residue to recombinate to selection integrately, becoking lower prescription drug costs, and flaggard disexpend for the communistic public publication of the communistic public pu | | S | STATEMENT OF REASON FOR RECALL | No statement of regrouping required to initiate the recall. | of state congressional |
| Right very should be recalled for instead apport of the Chinese Communia Party (CPP), accordance of types from the CCPF, failure to proteed Visconia Instruction of the CCPF. Take the decident instance apport of the CCPF instruction of the CCPF failure to proteed Visconia Instruction of the CCPF. Take AUMINICIPALITY OF RESIDENCE, IN NOT STEPFCRENT, THE NAME OF THE MUNICIPALITY OF RESIDENCE, IN NOT STEPFCRENT, THE NAME OF THE MUNICIPALITY OF RESIDENCE. SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS PRINTED NAME OF ELECTORS Rule address must also includes on frience in Community of the Comm | | 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 rectific | ny siute, congressional, |
| teck of commitment to effection integrity, blocking lower preacription drug costs, and flagrant disrespect for his own constituents by calling them "what-lobe, morous, and ideols." 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 FLECTORS PRINTED NAME OF ELECTORS STREET AN UNBROR ROUNDAR, ROUTE SIGNATURES OF FLECTORS PRINTED NAME OF ELECTORS STREET AN UNBROR ROUNDAR, ROUTE 1. | legislative, judicial, or county officials.) Robin Vos should be recalled for his facit support | of the Chinese Communist Party (CCP), acceptance of t | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, SINCE TO SUBJECT OR | | | | | |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS Rarial address made in endude box or fire row Rarial address made in endude for row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or | lack of committment to election integrity, blocking l | lower prescription drug costs, and flagrant disrespect for | his own constituents by calling them whack-jobs, morons, and idiois. | | |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS Rarial address made in endude box or fire row Rarial address made in endude for row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or fire row Rarial address rarial address for row or | THE 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 | ST ALWAYS BE LISTED. |
| 1. Described and should not be some standard of the solution o | | | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATE OF |
| 2 / What Daw Jand 17542 garwg 57. 3. Vall Daw Jand 17542 garwg 57. 4. Under Jand 17542 garwg 57. 5. Jand Daw Jand 17542 garwg 57. 6. Daw Jand Daw Jand 1882 Wash Ave Grow Yorkville 5-12-24 6. Daw Jand Daw Jand 1882 Wash Ave Grow Yorkville 5-12-24 7. What Jand Jand Jand 1882 Wash Ave Jand 1882 Wash | SIGNATURES OF ELECTORS | A TRINIED HAME OF ELECTION | | |) SIGNING |
| 2 Yell fasher Dan Janda 17542 garwa 57. Olive William Color Street Stree | 1 Destator | Kellytanse | 17303 Washington | Davillage OF COTTLE | 5 12 24 |
| 3 Value of consider of the signers are electors of the jurisdiction 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. I an awaye that falls from the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the signers are electors of the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. I know that the signers are electors of the purper with full knowledge of its content on the date indicated opposite his or her name. | 2 Kentader | DAN JANDA | 17542 SPRING ST. | UVillage VIIICUIII | 5-12-24 |
| 4. Lingbil Terri Behveria 3700 n. Colung Ave 3 Vision Virkville 5-12-24 5 Chomas M. Behreus 2700 n. Colony Ave 3 Colony Ave 4 Colony 3 Colony Ave 4 Colony 3 Colon | 3. P. D. O. | Paul JANDA | 17.542 SORING ST | □ Village (/) / | 5-12-24 |
| Some of circulator Some of | 4. (R) | Turvi Behvens | | ∆ Village (/ / / / / / / | 5-12-24 |
| 6. Day Murker Day G Mintal 8826 Wash, AVC Gilyange Sort VI C 5-12-24 7. Williage Girchard Giliage Golden G | 5 Mayer M. Beherra | Thomas M Behreus | 2100 | RVIIIage VANKIII (Q | 5-12-24 |
| 7. | 6 Da H Minte | - Day & Minto | 0188210 Wash AVE | Town Willage Vo V 1/1 | 5-12-24 |
| 8. Grid Town Willage City | Dana J Tour | TOUVIC V 41110 | in 101 (data to to to | □ Town | |
| 8. Order of circulator residence include migher, street, and municipality) [cline of circulator] [cline of circu | 7. | | - WWWIITHARM | | |
| City Give I reside at Certification of Circulator Color City | | | J | □ Town | |
| [Independent of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that the signers are electors given. I support this recall petition. I am awage that fallsifying this certification is punishable under § 12,13(3)(a), Wis. Stats. Town Ording Ord | 8. | | | | |
| Certification of Circulator In the certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am awage that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 903 | | | | | |
| I, | 9. | | | | |
| I, | | | | | |
| Certification of Circulator PD B be grove I (2757) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am awage that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 903 | 10, | | | _□ Village | |
| I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 903 | | | | City | |
| (circulators residence - include number, street, and municipality) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 903 | Mal C | 11 | | D Ribb across th | 12750 |
| I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am awage that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 903 | I, Ody Y | certify: I | reside at 137 Cole 0 | (circulator's residence - include number, street and municipality) | 00.00 |
| name. I know their respective residences given. I support this recall petition. I am awage that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 903 | I further certify I am either a qualified elector of | Wisconsin, or a U.S. citizen, age 18 or older who, if I vers are electors of the jurisdiction or district represented | vere 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 | and personally obtained each o indicated opposite his or her |
| Page No. 903 | name. I know their respective residences given. | I support this recall petition. I am awage that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | |
| (date) (date) (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 | 5/12/24 | Carl | and the same of th | | Page No. 903 |
| | (date) 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 or circulator) e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | 66-8005 web: http://elections.wi-gov email: elections@wi-gov | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified | d electors of theAssembly District 63 | |
|--|--|--|---|---------------------------------------|
| (official with whom nominati | on papers or declaration of candidacy for the office is filed) | | (jurisdiction o | r district of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, S | Section 12 of the Wisconsin Constitution and §.9.1 | 0 of the Wisconsin Statutes. |
| petition for the recall 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. T | he reason must be related to the official responsibilities of the office | cholder. No statement of reason is required to initiate the rec | call of state, congressional, |
| lanislativa judicial or county officials) | | | | |
| Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of | of trips from the CCP, failure to protect Wisconsin farmland from the C | 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 idio | its." | |
| THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. T | HE NAME OF THE MUNICIPALITY OF RESIDENCE | MUST ALWAYS BE LISTED. |
| | | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATEOR |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| | 14' 014 | 12-01-01 | □ Town □ Village → □ V | 61121261 |
| Kimbolo Star | Mun HKer | 2807 oakhurst lave | City TOCK LOI \Le | 5113/24 |
| (15) SVICE | 1000 | | □ Town | and the same of |
| 2. | E TO IVE | 2407 DakHarro La | Uvillage Vacat V | 15-17-21 |
| ween N | Coregina | 20109KAGITO LA | O City 101 N V / (C | 1, 1, 19 |
| 3. | 1 | | | |
| | | | □ City | |
| | | | ☐ Town | |
| 4. | | | □ Village | |
| | | | □ Town | |
| 5. | | | D Village | |
| | | | ☐ City | |
| 6 | | | Village | |
| VI 4 | | | □ City | |
| | | | ☐ Town | |
| 7. | | | ☐ City | |
| | | | □ Town | |
| 8. | | | | |
| | | | □ City | |
| 9 | | | ☐ Town ☐ Village | |
| 7. | | | City | |
| | | | D.Town | |
| 10. | | | □ Village □ City | |
| | <u> </u> | Control Maria (Maria) | 1 7 707 201 100 M W | ndo. |
| (22) | 211 | Certification of Circulator | Rible answer To | 60 DS D |
| I, | 6 /1c , certify | I reside at 1232 (aleb RL) | (circulator's residence - include number, street, and municipality) | 0200 |
| (name of circulator) | Winnerin and H.C. sitings and 19 and describe if | I were a resident of this state, would not be disqualified from voting | under Wis Stat & 6.03. I personally circulated this recall peti | ition and personally obtained each of |
| the signatures on this paper. I know that the signatures | wisconsil, of a U.S. chizen, age 16 of older who, if | red by the officeholder named in this petition. I know that each person | on signed the paper with full knowledge of its content on the | date indicated opposite his or her |

Page No. 904

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.

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

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

(jurisdiction or district of officeholder)

The Wisconsin Election Commission

| (- | in papers of decidation of calculation, | from office pursuant to Article XIII Section | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
|--|--|---|--|---------------------------------|
| petition for the recall of | Robin Vos | from office pursuant to Afficie Affi, Section | i i z or the Wissensti | |
| | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| | Digitals officials The | reason must be related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recall of | f state, congressional, |
| | | | | |
| legislative, judicial, or county officials.) | 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 le | ower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPAL ITY LICED FOR MAIL | LINC DUDDOSES WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAII | | STREET & NUMBER OR RURAL ROUTE | | 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 |
| 1000 | V. 2 C. 2 1/20 | MADE IN DIRAGANA | GTOWN STIM SCHOLLAND | 5-17-2020 |
| I VAM LINEY THE | MINIO WINNER | ANN UR VIMONI | City / / / / / / / / / / / / / / / / / / / | - 10 9091 |
| CALL ANN XX | CITI MINO. | WP | □ Town | 5-10124 |
| 201 0 0 | OLE O'A Grandian | 9205 Mt Deasount Mre | Village Structe VCont | 1 5217 7 |
| Torge Buhland | Stage bruening | 4325 MT DEUDUNG MVC | Town | -5:10:24 |
| 3 / 2 | | a nuth 1 | Uvillage A Tallant | 1 |
| 1, W A Y W | Haran Lockard | 3219 94 -51 | ocity SIVIEVAII | 22 (1. |
| I W IV | 110 | as a could the | Town Village | 5/12/21 |
| 4 Cotton a Smith | 1 centh m G M111) | 1329 99" Muss | City Stutemen | 12/10/24 |
| Stan Oli XIVE | 0 1 0 1 | - (1) | □ Town | 1-1-1-11 |
| 5. Carried And | Corred Company | 15230 94th Strant | Oity Sturt event | 19/10/20) |
| (OTTOWN 1896 | CNIO COMMIT | 2001 11 | Town | 6/1 |
| 6 0 1 | 6 . 01. | 9211 11 11 12 | UVillage | 5/10/19 |
| | Sucob XNX MEN | 1714 Galda V81 | City / Town / To | |
| - MV | | nd on | □ Town □ Village | 5-10-24 |
| Book Nic 9 . Duck | Rannie Grubes | 2274-42165+ | acity Sturtevant | 2-10-01 |
| 1201010 | BORING GTWIE | 344 13 214 | □ Town | |
| 8.11 F AA | MicHAFI SOLMSSEN | 8901 MT. DIE ASKUT AVE | Ocity Straterant | 5-10-29 |
| Museul 1 x for | MICHAEL GIASSER | OTO WILL DISTRICT | □ Town | 6/1 /00 |
| 2 | Torre | 2144 90th St | Village Stratevant | 3/10/29 |
| law form | 1 Jawn Jones | 3111 10 36 | Town | 1// |
| 10 1 AT | Acola IDRC Until | +21209Alas+ | UVillage & LucteUANT | 5/1064 |
| Tour Roberto | ArNOLDRSCHATTORA | 1312010 31 | Ocity J TOTIE | 77.0 |
| D D | ^ | Certification of Circulator 15 372 | 110th et Dhank | 1-31-0VA |
| , Moira Kour | ι & C , certify: Ι | reside at 19812 | N 10'- 31 Meon 1) | (ALO)000 |
| | | | (circulator's residence - include number, street, and municipality) | and personally obtained each of |
| I further certify I am either a qualified elector of | Wisconsin, or a U.S. citizen, age 18 or older who, if I v | were a resident of this state, would not be disqualified from voting under | WIS, STAT. 8 0.03. I personally circulated this recall petition | indicated opposite his or her |
| the state of the second Theory that the gione | are are electors of the jurisdiction of district tentesented | I by the difficultied framed in this petition. I know that each person and | ied the babet with this knowledge of its content on the date | |
| name. I know their respective residences given | I support this recall petition. I am aware that falsifying | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 905 |
| 5/10/24 | \sim VV |) (Court | | 3 000 |
| (datc) | (signate | ent of circulator) | 24 9005 hugh: http://elections.wi.gov email: elections@wi.gov | 7. |
| 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 | e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | o-out fixer man renament to the format oronous will go | |

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

STATEMENT OF REASON FOR RECALL

(jurisdiction or district of officeholder)

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

The Wisconsin Election Commission

petition for the recall of __

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

Robin Vos

(name of officeholder to be recalled and office).

| Insiglating indicial or county officials | (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 officender. No statement of reason is required to induce the recall of the 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, | | | | |
|--|---|---|---|---------------------|--|
| | | his own constiuents by calling them "whack-jobs, morons, and idiots." | | | |
| | | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. | |
| THE MUNICIPALITY USED FOR MAII | LING PURPOSES, WHEN DIFFERENT THAN M | 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 | |
| Barbara Schattner. | BARBARA SCHATTNER | 3120 90TH ST | UVIIIAGE STURTEVANT | 5-10-24 | |
| Bun Derlle | BARRY ROSELLE | 3108 90TH ST. | Utiliage STUNTEV ANT | 5-10-24 | |
| 3. Chr Jad to | Charles Laurent I | 3113 90th st. | Ullage Sturte Vant | 5-10-24 | |
| 4. Pothy Loh | PATHI FOHR | 3131 90th St | O Village Sturteurnt | 5-10-24 | |
| & sto Nekleh | Scott Kiekhelzk | 3201 90 5 | United Startenant | 5-10-24 | |
| 6.9 | Chemenne Verneril | 3241 90m St | Unilage Turte vand | SHO/A | |
| I tolley die | Holly Larson | 3317 90 St. | O Village Sturte Vant | 5/10/24 | |
| 8 (010) | Alex Niesen | 3524 904 St A7+4 | O Village Sturterant | 5/10/27 | |
| · Capie Rodan | Capri Rogers | 3524 90th St. aft 7 | Olly Sty Sturter UM; | K 5/10/ | |
| 10. arevely Gynsto | Arevelon Tunstell | 9324 Hulda Dr | orown olivilage Sturte kint W | 5/10/24 | |
| Morra Rounds certify: I reside at Certification of Circulator 15872 N 18th St Phoonix Az 85092 | | | | | |
| (name of circulator) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each 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. | | Page No. 906 | |
| (date) (signature of circulator) (Separative of circulator) (Signature of circulator) (Signature of circulator) (Signature of circulator) (Signature of circulator) (Rev 2019-09) The information on this form is required by Wis Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-8005 web: http://elections.wi.gov email: elections@wi.gov | | | | | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec- | tors of the Assembly District 63 | | |
|---|---|--|---|---|--|
| | ion papers or declaration of candidacy for the office is filed) | | (jurisdiction or district of officeholder) | | |
| petition for the recall of | petition for the recall of | | | | |
| 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 rips from the CCP, failure to protect Wisconsin farmland from the CCP. | . No statement of reason is required to initiate the recall of | state, congressional, | |
| | | his own constluents by calling them "whack-jobs, morons, and idiots." | | | |
| THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE MUS | Γ 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 | |
| Saxa de Dovila | SHARON E. DAVILA | 9100 Mt PleasantAve | Unilage Styrkeways, W1 53177 | 5/10/2024 | |
| 2. Deuty-Stand | Paul Schutz-Stachn, A | 3035 91 Sturterant | 2 Village Spy Tevant 53177 | 5.16-24 | |
| 3. Katio Involvati | Kat. Suiderski | 3920 Hulda DC | Drown Stillage Sturby Co. W. | 5/10/24 | |
| 4. | Jame (Jones | 3144 90th sturtevant | Village Sturt Cuart | 5/10/24 | |
| 5,,, | | | □ Town □ Village □ City | | |
| 6. | | | ☐ Town ☐ Village ☐ City | | |
| 7. | | | ☐ Town ☐ Village | | |
| 8 | | | □ City □ Town □ Village | | |
| 0 | | | □ City | | |
| 9 | | | □ Village □ City □ Town | | |
| 10. | | | □ Village □ City | | |
| , Morra Rou | nds, certify: I | reside at | (circulator's residence - include number, street, and municipality) | KAZ-850 | |
| the signatures on this paper. I know that the signe | ers 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 | Wis Stat § 6.03. I personally circulated this recall petition a | nd personally obtained each of idicated opposite his or her | |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | this certification is punishable under § 12, 13(3)(a), Wis. Stats. | | Page No. 907 | |

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

| TO: | The Wisconsin Election Commission | | We, the undersigned qualified elect | tors of the Assembly District 63 | | |
|-----------------------------|---|--|--|---|------------------------------|--|
| | (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distr | rict of officeholder) | |
| netition f | 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. | |
| Permon | | (name of officeholder to be recalled and office) | ,, F | 3 | | |
| | STATEMENT OF REASON FOR RECALL | | | | | |
| (The reason | n 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 | of state, congressional, | |
| | judicial, or county officials.) | | | | | |
| Robin Vos | should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of t | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | | |
| lack of com | nmittment 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 NA | | | |
| s | IGNATURES 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 | |
| | A A | | Rulai address must also include box of the flo | Town | 0/11/0 | |
| 1. | Tolin Hand | Latio Haile | I april (acal Ann De | D Village | 14/1/90 | |
| | W.!! Payous | TOWN TIME | 7069 5000 11111 01 | | 111/11 | |
| 2. / | | | anul /11 | □ Town | Zil Ma. | |
| 16 | enone fry la | Veronicy Hayla | 1027 (010) HAN DY | city Sturteugn+ | 0/11/11/19 | |
| 3. | 114 | D1-5+11 781 (VC | 2 t- 26: 0 - 0: | Town Village C1 x 18 100 07 | T | |
| | WH 1 5 | In M 11-2, NURON | 12527 1017 | city J + V Y + C VO III | 15.11:20 | |
| 15 | 1 (10. 1 |) 1 | alus aard al | □ Town (\) | 181111 | |
| 701 | 11100 N Lind novel | La summor Lindsale | 15114 40' " 0t. | City STIVE IN | 19/1/124 | |
| | my way | Januar ourself- | | □ Town | 11.17 | |
| 3.00 | mes Edwards | WAMES EDWARDS | 3236 93 RD ST | City STURTEUANT | 5/11/24 | |
| 6. | 101 | 1 = 110 = T | 27.2 222 | □ Town □ Village □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ | 011 | |
| Sur | he Gustine | MIKE CHRISTMAN | 3212 93 57 | City STURTERANT | 3/11/28 | |
| 7/1 | 1-1// | 01 | 2121 94 1 -1 | □ Town □ Village | 1-1.6 | |
| 40 | ~ / Sel - | Morris Dwalor | 3126 93rd St. | ocity Start prant | 5/11/24 | |
| 6 | 4.4 | 16.11.0001 | 210-0000 | Town 74 | 2/1/21 | |
| NA P | mulle Orech | n JENNIFER WAREDK | AR 3100 931957 | City City | 5/11/29 | |
| 9. | 000 00 - (0) - | Osalona DI Misa | 0111 - 0/4/2 CT | Town Village | K IIIIni | |
| | MON PURCHAS | FINNEY Phillips | 311080NST | city | YIIIK | |
| 10 1 | 1 | | ZNUC 53M ST | Town | 01,100 | |
| 1/ | 1121 | Danarthe Hembera | 75 75 | Ocity Sturkvant | 17/11/24 | |
| Certification of Circulator | | | | | | |
| , N | 101ValCalla | certify: I | | 13 5 Phoonic AZ | 2507X | |
| -, | (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 signs | ed the paper with full knowledge of its content on the date i | ndicated opposite his or her | |
| name, i kn | ow men respective residences given. I | i support this recall petition. I am aware that faisifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | | |

Page No. 908

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

(signature of circulator)

| T(): The Wisconsin Election Commission | | We, the undersigned qualified ele | ectors of the Assembly District 63 | |
|--|--|--|---|----------------------------------|
| | on papers or declaration of candidacy for the office is filed) | | (jurisdiction of dis | strict 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 | | |
| (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 officehold | er. No statement of reason is required to initiate the recall | of state, congressional, |
| legislative, judicial, or county officials.) | All Destroy CODY assessment of | tring from the CCD, failure to proloci Wisconsin (armland from the CCP | | |
| | | 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 idiols." | | |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | NAME OF THE MUNICIPALITY OF RESIDENCE MU | UST ALWAYS BE LISTED. |
| | | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATEOF |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 1 | 7 : (1) | 044 | ☐ Town ☐ Village 7 | 6/1/2 |
| 1' '7' '0 | 1 / ach 5 cholex | 1 325 Day 1 54 | Scity Bullinglus | 1/2//2014 |
| 2 0 | Date 1 | | Ci Town | \all. 1. |
| 12 ANS | Samonth & Barrios | 456 Hartham St | acity Builington | 1/21/2024 |
| | 307797114 == 11703 | 150 100 101 | ☐ Town | (2) |
| 3 Jenn / | TUSSE CHAMIS | 451 Frankenn St | Ochy Chi Mastr | 12-41-40 |
| per i | Jul 10 010 01 | 1000 | □ Town | |
| 4 | | | ☐ Village | |
| | | | ☐ City | |
| -5 | | | - U Village | |
| | | | □ City | |
| 7. | | | ☐ Town | |
| 4 | | | □ City | |
| _ | | | □ Town | |
| -7 | | | ☐ City | |
| | | | Town | |
| . 8. | | | ☐ Village | |
| | | | ☐ City | |
| -0 | | | ☐ Village | |
| (36) | | | ☐ City | - |
| | | | ☐ Town | |
| 10, | | | □ City | |
| | | Certification of Circulator | | |
| · Fabian Mald | and de certify: | | Barino, W153403 | |
| Table 100 mame of suculation | UTIQUO | - 100 | (circulator's residence - include number, street, and minimenality) | |
| 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 | er Wis, Stat. § 6.03. I personally circulated this recall petition | n and personally obtained each o |
| the cionatures on this paper. I know that the signs | ers are electors of the invisdiction or district represented | d by the officeholder named in this petition. I know that each person si | igned the paper with full knowledge of its content on the dar | e materior opposite his or ner |
| name. I know their respective residences given | i support this recall petition. I am aware that falsilyin | g this certification is punishable under § 12.13(3)(a). Wis. Stats | | Page No. Q O |
| 05/21/2024 | - Falein | ure by checulators | | Page No. 909 |
| (datd) | (signal | ne Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608- | -266-8005 [web_http_elections wi gov Jemail_elections@wi gov | |

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

TO:

The Wisconsin Election Commission

| (official with whom nomin | nation papers or declaration of candidacy for the office is filed) | . we, the undersigned qualified | | |
|--|---|--|--|---|
| petition for the recall of | Robin Vos | from office purguent to A.C. 1. WHI C | (jurisdiction or dist | trict of officeholder) |
| | (name of officeholder to be recalled and office) | noni office pursuant to Article XIII, Se | ection 12 of the Wisconsin Constitution and §.9.10 o | f the Wisconsin Statutes. |
| (The reason for recall must be stated on petitio legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support | ons for city, village, town, and school district officials. Th | STATEMENT OF REASON FOR RECALL e reason must be related to the official responsibilities of the officehot trips from the CCP, failure to protect Wisconsin farmland from the CCP | older. No statement of reason is required to initiate the recall o | of state, congressional, |
| lack of committment to election integrity, blocking | ng lower prescription drug costs, and flagrant disrespect to | r his own constiuents by calling them "whack-jobs, morons, and idiots. | , | |
| | | | | |
| THE MUNICIPALITY USED FOR M | AILING PURPOSES, WHEN DIFFERENT THAN M | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THI | NAME OF THE MUNICIPALITY OF RESIDENCE MUS | ST ALWAYS DE 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. Uniter 1830 | Maiden Couros | 4228 Fair Way Dr. | Oxform Village Worker Ford, WT | 5/25/24 |
| 2. M. Poslo | Michaela Pode | 2009 Quinca Kive | U Town | 5/25/24 |
| 3. Orlences | Donald Kaivas | 3247 smmerter RD | UTown UVillage City RAC(NO | 5/25/24 |
| 4 Williter | - Willie Turner | 1305 Blaine Ave | Town Utilage City | 5/2/24 |
| 5. | | 3,51,71 | □ Town | 3/20/29 |
| | | | ☐ Village ☐ City | |
| 6. | | | Town | |
| | | | ☐ Village | |
| 7. | | The Principle Transport of the Control of the Contr | ☐ Town | |
| | | | ☐ City | |
| 8 | | | Q Town | |
| | | | | |
| 9. | | | □ City | |
| | | | □ Village | |
| 10 | | | O'City | |
| 10. | | | ☐ Town ☐ Village | |
| 0 | - 001 - | | □ City | |
| I. TOSEPL (name of circulator) | Stettler, certify: 1 r | | e RJ, Nashville MI 4 | 9073 |
| I further certify I am either a qualified elector of the signatures on this paper. I know that the sign name. I know their respective residences given | Wisconsin, or a U.S. citizen, age 18 or older who, if I we ters are electors of the jurisdiction or district represented I support this recall petition. I am aware that falsifying the support this recall petition. | 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 si this certification publishable under § 12.13(3)(a), Wis. Stats. | (circulators residence - include number, street, and municipality) er Wis. Stat. § 6.03. I personally circulated this recall petition an gned the paper with full knowledge of its content on the date inc | d personally obtained each of dicated opposite his or her |
| (date) | | TAN | | Page No. 9 10 |
| SECTION (INEX 2019-09) The Information on this form is requ | aired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by the | Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608- | 266-8005 web http://glusticograph.com/ it -tti C | |

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

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,

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.

STREET & NUMBER OR RURAL ROUTE

(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

legislative, judicial, or county officials.)

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

Robin Vos

(name of officeholder to be recalled and office)

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 constiuents by calling them "whack-jobs, morons, and idiots."

| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
|---|--|---|--|--------------------------------|
| 10/6/1 1/2 | Kindowsky Sterryood | hot challea lane mian true | QVillage UN IN OVIVE, WI | 5-11-24 |
| 2 May Down of | PULLIO | 410 Wellington Dr | Orown Original Union Grove, WI | 5-11-24 |
| 70 | Cory Pucker | 10 Delliglan Di | □ Town | . 1 . 5 . 5 |
| 3 | Prittony Fransen | 390 millare | city on or ove | 5-11-24 |
| 4. 10 A A State 1000h | Pologot Harriagen | 909 main Street | Oty Mack Grove | 5.11.24 |
| 5. Handon | Kaulyn Peterson | 809 main Street | Otilage Union 6-pul | 5-11-24 |
| 6. | hadyn releison | 2928 95th 51 | Town Stunt pront | 5-11-24 |
| 7 5 400 5 1 10 | 15124 Type | 0 2835 97 th ST | Town Village Sturtevant | 5-11-24 |
| 8 LADA ALLA | GO WILL ORD | 2719 Wisconsin St. | Brity Sturfugnt | 5/11/24 |
| made a | Kan Villal pondo | 211 00 388.13.1 | □ Town | |
| 9 | | | ☐ Village | |
| | | | □ Town | |
| 10. | | | ☐ Village | |
| I, Daniel Round | | Certification of Circulator I reside at 877 Private Road | Wie Stat 8 6 03 I personally circulated this recall petition | and personally obtained each o |
| | | 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 sig a this certification is punishable under \$ 12.13(3)(a). Wis. Stats. | ned the paper with full knowledge of its content on the date | indicated opposite his or her |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifyin | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 911 |
| 5-11-2024 | 200 | 6 1 1 1 1 | | |
| (date) | (signal | ture of circulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | 266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is requ | uired by wis stats gg a 40 and 3 10. This form is presented by a | | | |

| | | . We, the undersigned qualified elected | ors of the Assembly District 63 | |
|--|--|--|---|---------------------------------|
| TO: The Wisconsin Election Commission | n papers or declaration of candidacy for the office is filed) | We, the undersigned quantity | (jurisdiction or distr | ict of officeholder) |
| | Robin Vos | from office pursuant to Article XIII. Section | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| petition for the recall of | (name of officeholder to be recalled and office) | | | |
| | · · · · · · · · · · · · · · · · · · · | STATEMENT OF REASON FOR RECALL | | f-t-tional |
| (The reason for recall must be stated on petitions f | for city, village, town, and school district officials. The | reason must be related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recall of | f state, congressional, |
| Control of the Contro | | | | |
| | | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| | PRINTED NAME OF ELECTORS | STREET & NUMBER OF RURAL ROUTE | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | TRIVIED NAME OF DEBOTORS | Rural address must also include box or fire no | □ Town | |
| 1 12 11 21 | Bur Hearth | 4235 Eije St. Raine WI 53402 | □ Village | 5/12/24 |
| francisco / | nyan vestosey | 4235 Lie 37. Mark M4 3572 | D City TAC//LS | 3/10/01 |
| 2/1/ 1 ax & as la did | + Mh Dissa Schnhidt | 11026 Tino St Paring 61 | - U Village Pac up () | 5/12/24 |
| 1 X/(WY Lax IMMO | Charla Shirildi | 7255 EVIE ST. RUCHE, WI | D Town | 1171 |
| 3. 1 () | 1 · / / / / | SACHIR I . A | tillage \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | S/12/19 |
| Many St. | Jamie Colley | 920 Brown Dr. | Town | 1 (2) |
| 4 March Hallely | DEBNA ASTAHIO | the 2101 GONOV ST | U Village The All All All All All All All All All Al | 5-10 14 |
| July menu | Charle 11 deline | 123129 10110 21 | Town | - W/- |
| 5. A d d adlid | Talina Code While | 1 -7014 17.Th 4 KENDERICA | □ Village | 5.11-24 |
| 1000 /200 Cagua | SOUN Vayagor | 7 1110 10110 91 01 | □ City Town | 2 04 |
| 6. Kall 9 0 | 1 each baile | 2832 915 | Ocity Sturtevant | 5-12-24 |
| - COVC | 2000,000 | 00000 | □ Town | 10 0V |
| V7XXX | Haley Daley | 19338 + menoo DC | O Village Strate Volume | 2-15-51 |
| To till it is a | 111 MK FOULVERO | 0.322 Tiponaga 1016 | Town Sty VIOIMN + | 15-17-24 |
| 8 LAWWA MANNOC | DUULANIUG | M330 MOVENCE DY | acity Of 101 acvara | 007 |
| 0 . 0 | 5 1110 1110 | done change do | ☐ Town ☐ Village (*) | 5-17-24 |
| | Jonelle Milde | JOS ZOIENT CA | acity of unte vant | 3 -12-04 |
| 10 1 | A | 0000 01 0000 10 | □ Town □ Village C () | 15-12-24 |
| 10. | - Arthony Wils | IN 9003 FTOTENCE CIV | Ochy Stortevant | 13 10 |
| | | Certification of Circulator | 11 10 77 | 140 |
| 1. Duniel Rounde | | I reside at 877 Private Bload Z | (circulator's residence include number street and municipality) | |
| (name of circulator) | Wisconsin or a U.S. citizen age 18 or older who, if I.y | were a resident of this state, would not be disqualified from voting under | Wie Stat 8 6 03 I personally circulated this recall petition | and personally obtained each of |
| the street and this manner. I know that the signe | are are electors of the jurisdiction or district represented | by the officenoider named in this petition. I know that each person sign | ed the paper with full knowledge of its content on the date | indicated opposite his or her |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifyin | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 912 |
| 5-12-2024 | al no | lo l' | | 3 312 |
| (date) | (signat | ure of circulator) | 66-8005 web: http://elections.wi.gov email_elections@wi.gov | |
| 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 If | ne Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified el | ectors of the Assembly District 63 | |
|--|--|--|---|--------------------------------|
| | ation papers or declaration of candidacy for the office is filed) | | (jurisdiction or dist | rict of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Sec | tion 12 of the Wisconsin Constitution and §.9.10 o | f the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office) | STATEDMENT OF DEAGON FOR DECALL | | |
| | | STATEMENT OF REASON FOR RECALL | 1 N -4 4 C ii-d to initiate the second | of state congressional |
| | ns for city, village, town, and school district officials. The | reason must be related to the official responsibilities of the officehol | aer. No statement of reason is required to initiale the recuit | oj state, congressionat, |
| legislative, judicial, or county officials.) | et of the Chinese Communist Barty (CCD), acceptance of t | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | | | |
| lack of committment to election integrity, blocking | g lower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MA | AILING PURPOSES, WHEN DIFFERENT THAN N | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE | 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 |
| Bhawn fants | Snawna Fountes | 9019 Florence Dr. | Town Startevant W | 5/12/24 |
| 2 Branky Soranson | brully &- | 9019 Florence DR | Desiry WI SIL77 | 5/12/24 |
| Dianing with 180 | Charles II | 707 | Town | |
| 3. | | | -Q-Village | |
| | | | □ City | - |
| 4 | | | □ Town | |
| | | | □ City | |
| | | | □ Town | |
| 5. | | | ☐ Village ☐ City | |
| | | | ☐ Town | |
| 6 | | | - O-Village | |
| | | | City | |
| 7 | | | ☐ Town | |
| | | | □ City | |
| | | | □ Town | |
| 8. | | | □ Village | |
| - 53 | | | □ Town | |
| 9. | | | U Village | |
| | | | □ City_ | |
| 10. | | | □ Town □ Village | |
| 10. | | | □ City | |
| | | Certification of Circulator | | |
| 1, Daniel 200- | A certific I | reside at 877 Private Road | 1 7210 Harton An 7 | 2840 |
| (-amo of simulator) | | / - | (circulator's residence - include number, street, and municipality) | |
| I further certify I am either a qualified elector o | of Wisconsin, 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 und | der Wis. Stat. § 6.03. I personally circulated this recall petition | and personally obtained each o |
| the signatures on this paper. I know that the sign | mers are electors of the jurisdiction or district represented | by the officeholder named in this petition. I know that each person s | agned the paper with full knowledge of its content on the date | indicated opposite his or her |
| | | this certification is punishable under § 12,13(3)(a), Wis. Stats. | | Page No. 042 |
| 5-12-2024 | (signatu | 2015 | | Page No. 913 |
| (date) | (signatu | re of circulator) | | |
| EL-170 (Rev. 2019-09). The information on this form is rec | quired 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 | 3-266-8005 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)

The Wisconsin Election Commission

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

| (official with whom nomination | on papers of declaration of candidacy for the office is med) | | 12 - Cat - Wissensin Constitution and 8 9 10 0 | f the Wisconsin Statutes |
|--|--|--|---|---------------------------------|
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 o | Time wisconsin statutes. |
| | (name of officeholder to be recalled and office) | TO A TOPA SENTE OF DE A CON FOD DECALI | | |
| | | STATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall | of state, congressional, |
| (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, | The statement by reason is required to minimize the | , , |
| a trace to the test of the contract of Con | | | | |
| | | 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 NAME OF PROPERTY OF PROPER | ME OF THE MUNICIPALITY OF RESIDENCE MU | ST ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | 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 |
| Ω | 11 25 1 | 1 . 1 0 101 | D Town | T-/11/2 21 |
| 0. 1. 11 1. | T # (copy in | 6430 Bald Eule Rot Munt Hewart WI | City M+ Plansant | 5/16/2029 |
| MANIE | hnathan MEGIGE | 6 120 Para Dage 100, man Treasing | | 1/1/1 |
| 9)000 | 2000 | 6330 CINDSAY LANE | Devillage MT PICASAWT | 15/11/0/24 |
| 197 un 5 - | RYAN SORENSON | 6775 CTIODSALL CHIEC | U City | 1.01 |
| 110 10 100 | 1/1 / 1 / 1 / 1 | 1 9770 1 0 100 | Town Dioasant | 5/11/211 |
| 3KK KOLAN ON BOL | I KINKTAL Y)IONSVI | (4337) UNOSAU ON. | Willage M. Pleasant | 1/16/24 |
| 100809000 | NOBIOG COLO 9CI | J1 - | □ Town (7) | ~ ' |
| 42 / 12 - | 1/11/2 20-0 | 9008 Casol Ana D | ocity Stort exact | 5-110-21 |
| 17mm 12 | Wann Pordy | | Town | |
| 5 day Remiden | mindrell T | 6410 Lindsay Ln | □ Village ↓ ↓ ₽ ↓ ↓ | 5-16-24 |
| 2 SISTING NOTEDIO | michelle Jensen | oth cinusay an | Town | 10 70 07 |
| () | | <u> </u> | □ Village | |
| 6 | | | City | |
| | | | ☐ Town | |
| 7 | | | ☐ City | |
| | | | Town | |
| 8. | | | □ Village □ City | |
| | | | □ Town | |
| 0 | | | □ Village | |
| 21 | | | City | |
| .2 | | | □ Town | |
| 10. | | | City City | |
| | | Certification of Circulator | | |
| - / / n 1 | (¥%) | | 2220 Hartman AR 72846 |) |
| I, Daniel Roumba | | | (circulator's residence - include number street and municipality) | |
| (name 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 gignetures on this paper. I know that the signs | ers are electors of the jurisdiction of district represented | I by the officeholder harned in this perition. I know that each person erg. | ned the paper with full knowledge of its content on the date | indicated opposite his of her |
| name. I know their respective residences given | I support this recall petition. I am aware that falsifyin | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 914 |
| 5-16-2024 | 29~ | out | | 1 age 110 9 14 |
| | (rignet | are of circulator) | | |
| EL-170 (Rev 2019-09) The information on this form is requ | ired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by the | ne Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-20 | 66-8005 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)

The Wisconsin Election Commission

| (official with whom nomination | on papers of decimation of candidacy for the office is med, | from office pursuant to Article VIII Section | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
|--|--|--|---|-------------------------------|
| petition for the recall of | Robin Vos | from office pursuant to Afficie Affi, Section | TI 12 of the Wisconsin Constitution | |
| 14 | (name of officeholder to be recalled and office). | TATEMENT OF REASON FOR RECALL | | and the second |
| (The reason for recall must be stated on netitions | for city village, town, and school district officials. The | reason must be related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recall of | f state, congressional, |
| | | | | |
| Robin Vos 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, | | |
| 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 | ILING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | ST ALWAYS BE LISTED. |
| | PRINTED NAME OF ELECTORS | SIREEI & HUMBER OF RESERVE | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF BEECTORS | Rural address must also include box or fire no. | □ Town | C |
| 10 4 | Car Din Tolland | C413 74A2 111 | □ Village GrOity | 5-17-69 |
| James Villa | GART PLOTENTAR | 317 292 1406 | □ Town (a / | |
| 2. | Lucas Gilmae | 1721 staddard circle | Octor Mt fleasand | 5-17-24 |
| 10mil Aller | Lucas Gilman | MOZ | □ Town\ | , |
| 3. N (() () () | Marin melal | 1411 Warnick Way | City M+ Pleasant | 5-17-24 |
| gent Mc Call | Marin Macal | 1-111 VVar pine | □ Town | 1 D DU |
| 4. | FIRST 11/5A | 1405 Warick WAV# | City MT Tracoil | 3-11-21 |
| 777 | Post is in the second | * | □ Town □ Village | 5-17-24 |
| Armo Francisco Zer | Jennifer-Sconzer | 140S worwick way | och m+ pleasant | 2-11 44 |
| The second of th | CATALOT STATE | 200.6. 20 | Town Village On TOURSON | t-17-24 |
| " Mesne Johnston | CHERRIE JUHNSTON | 1505 PKHRIE DR | Town | |
| 7010 | 0 111 | 11/01/0-16-0 1/13 | All Village | 5-17-24 |
| | Unrustal Harrington | 1 1421 bales ROMES | Town Ola Cost | 17711 |
| PAN MITTE | Niva Da Harring | n 1421 vares ruts | City H KCOCKH | 5-11d4 |
| 10000000 | 1/000 00 100 | 727 71 11 2 51 | Town Utiliage O C C V | 17-24 |
| 2XM2 landata | > KIKSITI (LOTATUIO) | 2052GIILLAST | ACON HOLLING | D-1191 |
| 10 10 | 11/1 | 11/20 x L P-14 1/ | Town Village ML Pleasant | 5-17-24 |
| Marian | Margares Inedium | 1900 Dakes 101 = P | acity VIT 1/200000 | |
| | 7 | reside at 87) Private Road 2220 | N. 1 AD 77690 | |
| 1. Duniel Room | banil certify: | reside at 877 Private Cond LLLO | (circulator's residence - include number, street, and municipality) | |
| (name of circulator) I further certify, I am either a qualified elector of | Wisconsin, or a U.S. citizen, age 18 or older who, if I | were a resident of this state, would not be disqualified from voting under | Wis. Stat. § 6.03. I personally circulated this recall petition | indicated opposite his or her |
| | | | ned the paper with this knowledge of its content of the date | |
| name. I know their respective residences given. | I support this recall petition. I am aware that faisityin | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 915 |
| 5-17-2024 | STW Scient | ture of circulator) | | |
| (date) EL-170 (Rev 2019-09) The information on this form is requ | uired by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the | ture of circulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | 66-8005 web http://elections.wi.gov email: elections@wi.gov | |



| 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 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 | reason must be related to the official responsibilities of the officeholder | No statement of reason is required to initiate the recall of | f state, congressional, |
| legislative, judicial, or county officials.) | -t-th Ohine Communist Darty (CCD) accontance of t | wine from the CCB failure to protect Minaganain formland from the CCB | | |
| | | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| lack of 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." | | |
| THE 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 | ST ALWAYS BE LISTED. |
| 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 |
| 1. 155500 6 | | 201 E Highend Ave | Town Village Bin of mateur | 5/77/24 |
| Tries ari | | 011111111111 | ochy DW/C 1990 | 01201-1 |
| 27 V | 1/1/2// | Co-7 1065 7 - 17 61 6- | D-Town D-Village | 5/23/24 |
| J Hen (| 100 | DIOS LEGICA | □ City | 17.7. |
| 3.00 | Beet 6 001.410 | 627 | □ Town □ Village N - C + A 1 1 6 A | (150 h DU) |
| NOXXIN DOUNT | Jessica ComhoHZ | 502 Evan AVENUL. | City LOMINER | 3/23/2004 |
| 100000 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Town Magazine | ED2 12011 |
| Desver 1 | Deserve Thompeins | 2424 Taylor Ave | O Village / La leasent | 1/03/004 |
| A 1 | | | O Town | |
| Josephnym | Joseph Evane | 5420 Ock forest Dr. | acity Racine Caledonia | 5-23-04 |
| 6. 5 '00 N OD | N. C. N. I | 22120101010 | Town Utiliage M + D1 | 5111011 |
| 6 Dilla Myell | Dillon Merel | 12000 Graneland Blud My 1205 | acity Plansant | 17/25/24 |
| 7 (10 | | 171100 1 5 | Town 1/1 M | 2/20/201 |
| erry d. Jansen | Terry L. Jansen | 6 7 40 EXPLANER WILL | Octy Mt. Pllasant | 2/20/24 |
| 8 9 9 | Land Apparl | 1800 MAR WER DR # 202 | Town Village M T PIC: C. 17 | 1-177174 |
| WW DM | William Start | (800 MINK . DIE # 20- | City // / / / CCC SARD | 21/11/11 |
| 9 1100 1000 00 | Brown . | 177/1500000 | Town Village 1 10 50 0 to 00 1/0 | C12/2/2 |
| 14 18 114: 156NEM | K KUI CARINS Chatch R | 16924CONANN ST | acity (18710) 104 | 712/107 |
| 10 / 10 / 100 / 1/1 000 | male III | 1221 0 -12601 | Town | 5/22/21 |
| ELESMINESCHI (UCO) | Annu was | 1324 (eittel 5. | City WIGH CHOVE | 13125124 |
| h Hei A | 7 | Certification of Circulator | -11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | · |
| 1, Vantu A | V16 certify: I | reside at 730 Kilver w ccd Jt R | Tuhland 1/ 1 16134 2 | |
| (name of circulator) | | , | (circulator's residence include number, street, and municipality) | and according the imades to - C |
| I turther certify I am either a qualified elector of V | Wisconsin, 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 under be by for the officeholder named in this petition. I know that each person sign | wis. Stat. 9 0.03. I personally circulated this recall petition a ed the paper with full knowledge of its content on the date in | ndicated opposite his or her |
| name. I know their respective residences given | I support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | ed the paper with this knowledge of its content on the date in | notetica opposite illa or iloi |
| | | | | |

Page No. 916

(date)

(Signature of Occulator)

(Signature of Occulator)

(EL-170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 879. This form is prescribed by the Wisconsin Elections Commission | P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 | web: http://elections.wi.gov | email: elections@wi.gov

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec- | tors of the Assembly District 63 | |
|---|--|--|---|---|
| (official with whom nominati | 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 | f the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office). | STATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on petitions | | 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 |
| legislative, judicial, or county officials.) | | | To statement by reason is required to initiate the retuit to | y state, congressional, |
| 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 MUNICIPALITY USED FOR MAI | 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 | MUNICIPALITY OF RESIDENCE | DATE OF |
| | Terrance | Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| My | TEESSALE (ANS | 1503 92 Nd st | Ullage OSturdivan | 5-11-24 |
| 2. con fature | 1 Hims Kichir | 1509 90 th St | Unilage Control Puppy | 5-11-20 |
| 3 hydy Sec 20 | Anniew Sentro | 15/59200 Stille (8 | O Village STURTEILANT | 5/11/24 |
| 4 K Mauser | ROBERTPROCHHAMEN | 1523 92 STOTHETEVAL | UVIllage STURTEVANT WI | 5/11/24 |
| 5. Many Church | MARX CHURCH | 1640 96 th #86 | O'Village Sturtt VANT WILL | 5-11-24 |
| 6 Patricia Emerick | PATRICIA EMERICK | 1701 Wisconsin St #3 | DOWN SELVING STURTEVANT WI | 5-11-24 |
| 1. Mull of | MARKS FRANK | 1681 Wiscousin Sf#5 | O Town Hard Starts vant W.2 | 5-11-24 |
| 8. Set pla | Beth Spear | 1661 Wisc St. #7 | Town SturtevautWT och | 5-11-24 |
| 9. 1962 | KRIS HERROL | 3201 BUXINGHAM RD | UVIllage STURTENANT, UI | 5-11-24 |
| 10. | Jim KAMI45/11 | 3308 Buckingh | Utiliage Sturtquant W | 5-11-26 |
| i,)osias | rdu W certify: I i | reside atCertification of Circulator 376 47 th | | 32946 |
| 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 V by the officionalder named in this petition. I know that each person signe 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 ai ed the paper with full knowledge of its content on the date in | nd personally obtained each of dicated opposite his or her |
| 5 · 1 / · 2 < (date) | | of circulator) | | Page No. 917 |
| | | Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | -8005 web: http://clections.wi.gov email: elections@wi.gov | |

| TO: The Wisconsin Election Commission | We, the undersigned qualified elect | ors of the Assembly District 63 | C . CC1-1-1-1 |
|---|---|---|--------------------------------|
| (official with whom nomination 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 | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| (name of officeholder to be recalled and office) | TO THE SECOND PROJECT | | |
| | STATEMENT OF REASON FOR RECALL | No restaurant of season is required to initiate the recall of | state, conpressional. |
| (The reason for recall must be stated on petitions for city, village, town, and school district officials. The | ne reason must be related to the official responsibilities of the officeholder | No statement of reason is required to initiale the recuit of | siare, cong. com |
| legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support of the Chinese Communist Party (CCP), acceptance of | | | |
| | | | |
| lack of committment to election integrity, blocking lower prescription drug costs, and flagrant disrespect for | | | |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| | STREET & NUMBER OF RURAL ROUTE | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF SIGNING |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Town | D.G |
| 1 8 // 1000 | | □ Village | |
| Jeffey dimas | | □ Town | T1 4/4 17 - 58 |
| 2. A TO Floor dimers | 1909/ 86th Street | Uvillage Mell (to) | 3/10/2029 |
| 2) lffery dimas | 1011 - 17 | ACCITY TOUTH | |
| 3. 10 a AL C days | 1 2 2 2 | Ovtown Ovillage Cil Halon Control | 5-11-2004 |
| " Alicia Cardinas | 3116 S. Kennedy DR | Acity Sturtevart. | 5-11-2024 |
| 1 1 1 1 1 1 | CILITATION 1 | Town As I as I as I | 63197 |
| 1. NEholas Vandryks | 86/6 Bucking ram dr | acity S DI CVALL | 5 11-2034 |
| 5. 00 9% | 11/1 0 10 1 0 | Ullage Ch. Ctom | C3 17 |
| Jonathan Codez | 1808 Buching ham Dr | dicity 5100 | 11-10-24 |
| I writely | Coll D. Bucking hand | Town Strillage | 200 |
| 6 Tribble Of The Short Center n. | DXICO DY CICH Shock | a city That Can | 5971 |
| - Simonsen, | Kennshington | Town Ovillage Office A | 5-11211 |
| JULE SINO 1 SON | 543219 th/s/w/ tea >012 | city 5 1012 July | 0-1129 |
| | () (8) | Town Syllage 101 Dlamson | 9-11-2 |
| 8 Heba 171. | 4713 word Rd | a city PIT TO ICE STATES | 3 / |
| | 5 | □ Town | - 15 |
| EM AN Ali | 4718 Wood Rd | ocity Mt P easont | 5-11-29 |
| | | Town | 2 1 711 |
| 10. 12. Ansey Act | CITIS WIND ICS | Octy PASAN | > - 11 - 09 |
| | Certification of Circulator 876 474 | 2 0 1 | 7796L |
| I, OSIAS Anduja certify | I reside at | Mu 1000 December | 3 1 9 3 |
| | | (circulator's residence - include number, street, and municipality) | and personally obtained each o |
| I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I the signatures on this paper. I know that the signers are electors of the jurisdiction or district represent | were a resident of this state, would not be disqualified from voting under | ed the paper with full knowledge of its content on the date i | ndicated opposite his or her |
| the signatures on this paper. I know that the signers are electors of the jurisdiction or district represent name. I know their respective residences given. I support this recall petition. I am aware that falsive | ng this certification is punishable under § 12.13(3)(a), Wis. Stats. | | |
| - 1 0 (| | | Page No. 918 |
| (date) (sign | ature 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 608-26 | 6-8005 web: http://clections.wi.gov email: elections@wi.gov | |

| | | RECALL PETITION | Assembly District 63 | |
|--|---|---|---|--------------------------------|
| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elect | ors of the Assembly District 65 (jurisdiction or distri | ct of officeholder) |
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 of | |
| | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| | S | TATEMENT OF REASON FOR RECADE | No statement of reason is required to initiate the recall o | f state, congressional, |
| (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. | | |
| legislative, judicial, or county officials.) | of the Chinese Communist Party (CCP), acceptance of t | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Robin vos snould be recalled for his facil support | of the offices community and the send disconnect for | his own constituents by calling them "whack-jobs, morons, and idlots." | | |
| 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 idlots." | OF DESIDENCE MIS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | MUNICIPALITY OF RESIDENCE | DATE OF |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | | | □ Town | - 17 2274 |
| 1 0 00 | Sally LARSON | 1096 Hilden Creek LANT | Ochy Bur Ington | 5-13-2024 |
| Tall puson | Jai / LAKSON | 101611100010.0 | Town | 5 10 000 |
| 2. | Barrel Philohel | 124 Bayridge cont | Ochy Swanta | 5-13-2074 |
| 5/ | Branch tentabel | Tay Doughton- Co | D Town | = 10 0101 |
| 3. Korálinán kolon | Las Knoting Schnike | V 1105 10 10 thrown St | Ochy Burlington Wi | 5-13-2024 |
| MUNICION | THE STORY STUDE | Edda Jane | Town | F 12 011 |
| 4. M 1 0 101 | LU Margiovini | 1 Edgewood | O City Syr 109th | 5-15-24 |
| The Contraction of the Contracti | (A) (Som | (ny) | Town | F 12 211 |
| 5. In make lube | I Disa Friance | 1216 Smain X. | D City | 3-12-24 |
| " VIIII DIN NAK U | 102 MINITION 100 | 117 811 WILL OIL | Town Da () | 61274 |
| 6. 11 NOBA | Domo Makey | I WA MANAMAN IN | City DW NO CONTROL | 1-13-24 |
| 1/1/1000 | Jance Mary | WITT PREMOPOS TY | □ Town | |
| 7 / | V | | □ Village □ City | |
| - | | | □ Town | |
| 8 | | | ☐ Village ☐ City | |
| 9 | | | □ Town | |
| 9 | | | D City | |
| | | | U Town | No. |
| 10 | | | □ Village □ City | |
| 10 | | 1 1 1 1 | 1/ 1 1/ | 6-2011 |
| | 11- | Certification of Circulator | 7th Au Wo Geach | FC 32946 |
| I. 1051AC | mdin w certify: | I reside at | (circulator's residence - include number, street, and municipality) | and narronally obtained each o |
| (name 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 unde | r Wis. Stat. § 6.03. I personally circulated this recall petition | indicated opposite his or her |
| the signatures on this paper. I know that the sign | ers are electors of the jurisdiction or district represente | were a resident of this state, would not be disqualified from voting unde 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. | then the haper with this knowledge of its content of the date | |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | ig this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 919 |
| 5:13 7024 | | | | |
| (date) | (signi | nure of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | 266-8005 web: http://clections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is requ | uired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by t | BIG THOUGHAIN ENGLAND COMMISSION TO THE THOUGHAIN ENGLANDS | | |
| | | | | |

| TO: The Wisconsin Election Commission | | We the undersigned and I'm 1.1 | 0.1 | |
|---|--|---|---|--------------------------------|
| (official with whom nominat | ion papers or declaration of candidacy for the office is filed) | | -21 H = 11 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | |
| petition for the recall of | Robin Vos | G | (jurisdiction or dist | trict of officeholder) |
| | (name of officeholder to be recalled and office). | rom office pursuant to Article XIII, Secti | on 12 of the Wisconsin Constitution and §.9.10 o | f the Wisconsin Statutes. |
| | | STATEMENT OF DEASON FOR DECALL | | ** |
| 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 officeholde | No statement of season is sensited to initiate at | A |
| legislative, judicial, or county officials.) | of the Old and O | The state of the officerior | 1 No sidement of reason is required to initiate the recall of | of state, congressional, |
| Tobili vos siloulo de recalled for fils tacit support | of 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 | lower prescription drug costs, and flagrant disrespect for | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| | | | | |
| SIGNATURES OF ELECTORS | DELIGITION OSES, WHEN DIFFERENT THAN I | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | AME OF THE MUNICIPALITY OF RESIDENCE MUS | ST ALWAYS BE LISTED. |
| A | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no | MUNICIPALITY OF RESIDENCE | DATE OF |
| 1. X // | 1 1 1 1 | | Indicate Town, City, or Village | SIGNING |
| James w Schrod | - JAMES NS-HROE JAK | 1507-92Nd ST. #/9 | UVillage STARE TAN | N 111 711 |
| 2. 1/1-1/1 | 0 1 | 1201 11 311 11 | 1 | 5-14-27 |
| TO VIC | Greg Riba | 33922 Hillcrest Dr. | Dillage Burlington | E-14-74 |
| 3. | | | 1 3 | 5-14-24 |
| , | Billy William | 23 east market 24 | Town Dillage | - / |
| , , , | Din | 2 3 tasi market st. | city SUCLIANTUA | 5-14-24 |
| 4. | Ivan Ibarra | 9201 Florence dr. | □ Town □ Village | *, |
| J.V. | 700070 | 9201 Florence dr | City Stortedan L | 5-14-24 |
| 5. | The said of the Property of th | 0001 201 /4 | □ Town | N |
| Swing Many | I mothy Campenn | 2021 90th Strengt | Utilage 9+ 01+CVant | 5-14-24 |
| 6. | | | □ Town | 0 1 1 1 1 |
| | | | □ Village □ City | |
| 7. | | | □ Town | |
| 107 2 30 | | | -D-Village | |
| 8. | | | □ City | |
| See Control | | | □ Village | |
| 9 | | | □ City | |
| | | | - Village | |
| 10 | | | □ City | |
| 10. | | | □ Town □ Village | |
| | Λ Ι | | - G-Gity | |
| 185195 | AMIN Certify Le | Certification of Circulator | LA A Via Bord Co | |
| (name of circulator) | - Certify, 11 | 0 1 0 | T' The Wir (seach fe) | 32966 |
| further certify I am either a qualified elector of W | Visconsin, or a U.S. citizen, age 18 or older who, if I we | re a resident of this state, would not be disqualified from voting under W | (circulator's residence - include number, street, and municipality) | |
| e signatures on this paper. I know that the signer | s are electors of the jurisdiction or district represented by | te a resident of this state, would not be disqualified from voting under W by the officeholder named in this petition. I know that each person signe his critification is numishable under 6.12.11(3)(s). Win State | the paper with full knowledge of its content on the data in | nd personally obtained each of |
| anie. I know their respective residences given. I | support this recall petition. I am aware that falsifying 1 | his certification is punishable under § 12.13(3)(a), Wis. Stats. | paper man tan knowledge of its content on the date the | uicated opposite his or her |
| 57 T. LT | | | | Page No. 920 |
| (date) | Leignature Leignature | of circulator) | | 920 |
| the intornation on this form is require | out by wis Stats 99, 8 40 and 9 10. This form is prescribed by the \ | Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266- | 8005 web: http://clections.wi.gov email: elections@wi.gov | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elect | tors of the | e Assembly District 63 | |
|--|--|--|-------------------------------|--|--|
| (official with whom nomination | 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 tl | he Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office) | OT ATEMENT OF DE ACON FOR DECAMA | | | |
| (The reason for recall must be stated on petitions | 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 | N | | A |
| legislative, judicial, or county officials.) | for enty, viriage, town, and school district officials, The | reason must be related to the official responsionnes of the officendider | No staten | nent of reason is requirea to initiate the recall o | f state, congressional, |
| Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of 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 MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF T | HE 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. MUNO | N. ARNO | 508 8. Jefferson Burlingto | Town Uillage City | Burlington. WI. | 5/12/21 |
| 2. Orige | Emily Allyn | 1222 main St UG | ☐ Town☐ Village☐ City | UG (unione) | 5/12/24 |
| 3. HPan | Jeff pease | 1222 maint St UG | ☐ Town☐ Village☐ City | UG (arrole) | 5/12/24 |
| 4 Harley Foldy | nailey forcly | 1033 moun st upper rear | ▼ Town Uillage City | union grove | 5.12.24 |
| 5. Zac Abramson | Zo-c Awamgon | 1033 mainst, upper/lan | ☐ Village ☐ City | union grove | 05.12.24 |
| 6. Car 7/1 | Aiex Zavaleta | FA Gyreva Street | ☐ Town☐ Village☐ City | Rocine | 5-12-24 |
| 7 MW BU | Mark Farrell | 2110 goth Street | ☐ Town ☐ Village ☐ City | Sturtevant | 5-12-24 |
| 8 Muchant | Michael Lewis | 183/ Geneva st | □ Town □ Village □ City | Pacine | 5-12-0¢ |
| 9 Vicki Way | Vicki Wall | 3047 86th 5+204 | ☐ Town☐ Village☐ City | Sturtevant | 5-12-24 |
| 10. | | | ☐ Town ☐ Village | | |
| L | | | □ City | | |
| I. Old | Certify: I | reside at Certification of Circulator | | CM 72010 | |
| 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 V by the officeholder named in this petition. I know that each person signe | Vis. Stat. 8 | s residence - include number, street, and multicipality) 6.03. I personally circulated this recall petition as with full knowledge of its content on the date in | nd personally obtained each o 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. | | | |
| 2 00 | 1 Ver | c of cyculator) | | _ | Page No. 921 |
| EL-170 (Rev 2019-09) The information on this form is require | | Wireconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | -8005 web: 1 | http://elections.wi.gov email: elections@wi.gov | |

| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elect | ors of the Assembly District 63 | |
|--|--|---|--|---|
| (official with whom nomination | 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, Sectio | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| 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, rips from the CCP, failure to protect Wisconsin farmland from the CCP, | No statement of reason is required to initiate the recall of | f state, congressional, |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots," | | |
| | | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF DESIDENCE MIS | ET AL WAVE 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. J.D. Part 1 | T.D. heterson | 2047 Centing MI LANG | Utilage M+ NPacant | 5/13/2224 |
| 2 /aut Il /offer | PAUL MCMALLOW | \$6126 CARRIAGE HILLS DR | Othy Int Pleaseur | 5/13/24 |
| 3 Electron | Esther Malacain | 2117601290 | Othy Mt Pleasant | 5/13/24 |
| 4. apry dan loch | Angela Giles | 2117 Gala Dr | Prillage M+ Bleasan+ | 5/13/24 |
| 5. May (MM) (M) | VAN I Malbertock | 2650 Rollmy Fields Dr | Utiliage Mt Reusant | 51/3/24 |
| 6. Any Unlary | Aaron McKinney | 1660 Wesd Main Circle | Utilage De Rere | 5/13/24 |
| 7. 1-2m2m | DAVID By, Bui | GUA Herton An tour | O'City My Pagent | SISPY |
| 8. D. A Mille | DAO ID DICHARDE | 6529 Anthre Are | Utiliage Mt. Pleas Ant | 5/13/2024 |
| Winnie WiChristoff | er Glanie Dehri Stoplan | 4529 Heritage Ave | Utiliage Aff Person | 5/13/2024 |
| 10. | Sommer Jackson | 2132 Spring Meadow In | Ullage M. + Pleasant | 5/13/2024 |
| 1, | PI JUSD COS, certify: I | Certification of Circulator reside at | RAL TODIO | |
| the signatures on this paper. I know that the signer | s 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 signs | (circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition a d the paper with full knowledge of its content on the date i | and personally obtained each on dicated opposite his or her |
| 5-13-7 | 4 Vai | this certification is punishable under § 12.13(3)(a), Wis. Stats. | ħ | Page No. 922 |
| (date) EL-170 (Rev 2019-09) The information on this form is require | | re of griculator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | 5-8005 web: http://clections.wi.gov email.elections@wi.gov , 2 | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified of | electors of the Assembly District 63 | |
|--|---|---|--|-------------------------------|
| | ation papers or declaration of candidacy for the office is filed) | | (jurisdiction or dis | trict of officeholder) |
| petition for the recall of | Robin Vos (name of officeholder to be recalled and office) | | ection 12 of the Wisconsin Constitution and §.9.10 of | of the Wisconsin Statutes. |
| | | STATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on petition | ns for city, village, town, and school district officials, Th | 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 tacit suppor | rt of the Chinese Communist Party (CCP), acceptance of | trips from the CCP, failure to protect Wisconsin farmland from the CCI | 7. | |
| | | r his own constiuents by calling them "whack-jobs, morons, and idiots. | | |
| THE MUNICIPALITY USED FOR MA | AILING PURPOSES, WHEN DIFFERENT THAN N | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. TH | E NAME OF THE MUNICIPALITY OF RESIDENCE MU | IST 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. Confleque | Angel Arrivo | 1800 indian hills drive | Village MANA PRESENT | 5/13/29 |
| 2 | | | □ Town | |
| 2. | | | □ Village □ City | |
| | | | □ Town | |
| 3 | | | □ Village | |
| | | | □ City | |
| 4 | | | □ Town | |
| | | | □ City | |
| - | | | ☐ Town | |
| 5. | | | ☐ Village | |
| | | | □ Town | |
| 6, | | | | |
| | | | □ City | |
| 7. | | | U Town □ Village | + |
| | | | D-Gity D-Gity | _ |
| | | | □ Town | |
| 8. | | | □ City | |
| | | | □ Town | |
| 9. | | | _O.Villege | |
| | | | □ City | |
| 10. | | | U Town □ Village | |
| 1.00 | | | □ City | |
| I, | of Wisconsin, or a U.S. citizen, age 18 or older who, if I. | reside at | (circulator's residence - include number, street, and municipality) nder Wis, Stat. § 6,03. I personally circulated this recall petition | and personally obtained each |
| the signatures on this paper. I know that the sig | ners are electors of the jurisdiction or district represente | 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 |
| 5/3/7 | V XII | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 923 |
| (date) LL V (edate) LL V (date) LL V (edate) | | ure of circulator) ie Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 6 | 08-266-8005 web: http://elections.wi.gov email: elections@wi.gov | 1 |

| | | We, the undersigned qualified elected | ors of the Assembly District 63 | |
|--|--|---|--|--|
| TO: The Wisconsin Election Commission | | | (G) is a second of the second | ct of officeholder) |
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | A C 1 VIII Continu | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | 1 12 of the Wisconsin Constitution | |
| • | (name of officeholder to be recalled and office). | OF DE CON FOR DECALI | | |
| | S | STATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall of | f state, congressional, |
| (The reason for recall must be stated on petitions | for city, village, town, and school district officials. The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder. | | |
| legislative, judicial, or county officials.) | - CONTRACTOR ASSESSMENT OF I | ring from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Robin Vos should be recalled for his tacit support | 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 | lower prescription drug costs, and flagrant disrespect for | his own constluents by calling them "whack-jobs, morons, and idiots." | | THE PERSONNEL |
| | THE PARTY OF THE ARIAN | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MA | LING PURPOSES, WHEN DIFFERENT THAN M | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | illulcate rown, city, or vinage | |
| | | 53,62 | ☐ Town | 6/12/011 |
| 1. 14. 011 | CU Palabaner | 1631 Main Street Union Grove, WI | acity union Grove | 0/1429 |
| The Homen | Estran Doekenluck | 1051 1011 011001 | □ Town | 6/10/101 |
| 2. 1 -1 55 | Vi 1 wal Baila | 2919 Circle Dr. Burlington WI | Society Burlington | 2/12/24 |
| I required their | of Jeremian Dang | 2917 Circle Dr. Willingian WD | Town | clipina |
| The state of the s | The Contraction | 31531 Bear Army Dr. Apr 101 Burlington | BUTTINGTON | 5/12/24 |
| 3. Summer the Botter | 1 Samantha Bertrang | 31531 Bear Arbor Dr. Apt 101 Burnington | Town | |
| Control of the contro | 1 1 | IND Fleggar | U Village | 15/12/24 |
| 4. | 1) water (morting | 6345 FMMENTSEN 150 33466 | a city MT Pleasant | 1 7 7 |
| USTIM | JUSTINI CATOCAT | 53/77 | O Town | 15/18/24 |
| 5. 20 On 1/11. | MIRIAM &- CORDNA | 1920 90th 87. Stuite Vant WI | a-village SturteVart | 3/10/07 |
| 11 mull UCC | WIRIAW 4 COT 5. CT | | Town C C C A LO 10 | 15/10/14. |
| 6. A a C. | Andrew Came | \$1 1905 9564 SXUTION | a City Sprortewant | 1 1/1/ |
| mg cur | Thorong Carry | 1 Darwick C | □ Town | |
| 7 | | 114/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1 | City City | DI MY |
| 1/2/1/ | Kell I Colore | 111 00000000 | Town O | - 1 |
| No No Police | 1001 9.6 | 903 Sato St Sills | To village COM O | 3/12/19 |
| 8 Characteriza | CASO NOVE SUCUROA | 100 ACALO OL 23143 | Town 100 Place 21 | 11/100 |
| Charles of acres | 20-01-10-C | 1/2016+21 St USV 15 | village VIII PSENT | 14/20 |
| 9. 61 DV 60 46 | 1 Van Masort L.) | 1201214. | □ City | V 12 122 |
| FICA | 1 2 2 | 1000 | Village WA, Placant | 7/17/179 |
| 10. Man 11 | The Spelker | TOSTY FIBELF OC. | City // (CAC) | 11/1901 |
| 7///6/ | 1 Van Van Cr | Gutification of Circulator | | |
| 1,000 | 2000 | Certification of Circulator | SI LR AD 72210 | |
| I. Catherine | JUSTICE , certify: | reside at | 1 1 1 | - and parsonally obtained each |
| (name of circulator) | SWinnerin or all Scitizen age 18 or older who if I | were a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person significant | r Wis, Stat. § 6.03. I personally circulated this recall petition | indicated opposite his or her |
| I further certify I am either a qualified elector o | responsing of a U.S. chizell, age 16 of older who, in the | 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 this certification is punishable under § 12.13(3)(a), Wis. Stats. | ned the paper with full knowledge of its content of the date | |
| the signatures on this paper. I know that the signatures of the signature | I support this recall petition. I am aware that falsifying | ng this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 924 |
| | Du Attan | - Chita | | Ų <u></u> |
| MSY ISON TO | (signa | ature of circulator) | occ 2005 hugh, http://elections.wi.upv email: elections@wi.gov | The state of the s |
| (date) | nuired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by | ature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608- | 500-9003 IMED. INTILITED TO THE PARTY OF THE | |

| | | We, the undersigned qualified elected | ors of the Assembly District 63 | |
|--|---|--|--|----------------------------------|
| TO: The Wisconsin Election Commission | | | (misdetion of dis | trict of officeholder) |
| (official with whom nomination | papers or declaration of candidacy for the office is filed) | S an A L' 1 VIII Cartin | n 12 of the Wisconsin Constitution and §.9.10 of | of the Wisconsin Statutes. |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | ii 12 of the wisconsin Constitution and give o | |
| petition for the recan of | (name of officeholder to be recalled and office) | TO THE PARTY OF TH | | |
| | | TATEMENT OF REASON FOR RECALL | a the state of the second | of state congressional |
| (The second result has stated on petitions for | or 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 recuir | of state, congression, |
| legislative, judicial, or county officials.) | or orey, virtugo, to mil, and a control | ************************************** | | |
| Pobin Voe should be recalled for his facit support of | the Chinese Communist Party (CCP), acceptance of tri | ps from the CCP, failure to protect Wisconsin farmland from the CCP, | | ————// |
| Hobiii Vos silodid de recalled for me taox eappert o | | ric own constituents by calling them "whack-jobs, morons, and idiots." | | |
| 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 idiots." | | |
| | WILLIAM MICEEDENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MI | JST ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAIL | ING PURPOSES, WHEN DIFFERENT THAN M | 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 | | OLD THE DATE OF THE PARTY OF TH | Town / O C A | TIDDO |
| . 1/1/200 | 1/1/05/00/10/1 | 1/3/ Control of the second | Q Village //////// | 15/16/27 |
| | MA COLOR | -100 INIVANCI | a city | |
| 19/10 | | 6150 0 1 1 1 | Town Willage | 1 /1 7/011 |
| 2. 611 | a 11 P.) | X/28 Darothy Court | Ochy Mount Plansant | 5/19/24 |
| ton flow | Ethan Rush | 0130 700 17 | □ Town | 1 |
| | | | _□.Village | |
| 3. | | | □ City | |
| | | | □ Town | |
| 4 | | | ☐ Village | |
| | | | □ Town | |
| | | | U Village | |
| 5. ~ | | | City | |
| | | | □ Town | |
| 6. | | | ☐ Village ☐ City | |
| 0 | | | □ Town | |
| | | | □ Village | |
| 7. | | | □ City | |
| | | | Town | |
| 8 | | | | |
| 0. | | | □ Town | |
| | | | □ Village | |
| 9. | | | - Gity | |
| -AV | | | Town | |
| 10. | | | □ Village | |
| 10, | | | City | |
| | | Certification of Circulator | | |
| Callanaia | e JUSTICE certify: I | reside at 16970 Paines Rol | LR AR 1660 | |
| i,Catvierivi | e Joshic , certify. I | reside at | (circulator's residence - include number, street, and municipality) | |
| (name of circulator) | Vice-agin or a U.S. gitizen, age 18 or older who if I v | vere a resident of this state, would not be disqualified from voting under | Wis. Stat. § 6.03. I personally circulated this recall petition | on and personally obtained each |
| I further certify I am either a qualified elector of V | wisconsin, or a O.S. chizen, age 16 of order who, in 1 | 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 this certification is wing hable under § 12.13(3)(a). Wis, Stats. | ned the paper with full knowledge of its content on the da | te indicated opposite his of her |
| the signatures on this paper. I know that the signe | I support this recall petition. I am aware that falsifying | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Describe OOF |
| | 1 Support this recan petition. I am aware that the | (distr | | Page No. 925 |
| May 12 700 | 1 Path | ga ywon | | |
| | (Signati | fire of circulator) The of circulator) The discrete of the circulator of the circu | 66-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is requi | red by Wis Stats §§ 8 40 and 9 10. This form Leprescribed by th | re of circulator) e Wisconsin Elections Commission P.O. Box 7984, Madison, W1 53707-7984 608-2 | 2.11 (1.12 | |
| | | | | |

| | | RECALLITER | Cul Assembly District 63 | |
|--|---|--|--|---|
| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elect | fors of the Assembly District os (jurisdiction or distric | et of officeholder) |
| (official with whom nomination papers or de | claration of candidacy for the office is filed) | The state of the s | on 12 of the Wisconsin Constitution and §.9.10 of | |
| | obin Vos | from office pursuant to Article XIII, Section | on 12 of the wisconsili Constitution and §.5.10 of | |
| (name o | of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| | 5. | 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 Chinesi | e Communist Party (CCP), acceptance of tri | ps from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| to the second through the election integrity, blocking lower prescrip | ation drug costs, and flagrant disrespect for h | nis own constiuents by calling them "whack-jobs, morons, and idiots." | | /. |
| lack of committeen to election integrity, blocking lower process. | and the same | THE N. | AME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAILING PURI | POSES, WHEN DIFFERENT THAN MI | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | MUNICIPALITY OF RESIDENCE | DATE OF |
| | RINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 10 00 1 | 1111 0 | 111 44 (1410 | Town Could be the Could be | 5/11/24 |
| 1. 1/1/11/01/11/11/11 | ax perec | Ill on ave | a city U 10001 = G1 = 0 | 0/11/03 |
| Wall by the same of the same o | 7 0 | 0.410.0 | Town B-Village 12:0:0:0 | 5/11/24 |
| 2. averson James And | algiah Guardiola | 1111 8th Ave | City OVIIOVI GV 800 | 911174 |
| 1. 162 |) 0 1 | 41200 CU D1 | Town (SINION (SINION) | 05/11/2V |
| 13. ALAUD Hav | rnah bould | 14 20 both b1 | Octy Con | 00/4/01 |
| | 1/0 | 3609 10th ave | Willage 1901 20 | 15-11-24 |
| 4. (M Thing Dai | nel bouwna | 3609 10th ave | Town | |
| 5. Red Solar Par | 1 San Sovie | 722 Vine 5+ | Ocity Union Grave | 5-11-24 |
| | 11/2 Mordan | 722 1/20 St | Town Village In I Am (500) | 5/11/24 |
| 6. Contilled Dee | WICHS DULL | 722 Vine St | Ocity WITOTOTE | 011111111111111111111111111111111111111 |
| 7. 110 M | Me Vander. 1/2 | 1854 Cheshire Vr. | Ocity / Inton Or. Ve | 5//1/29 |
| 1/00 | The sought will | 10-1 (16)14. | □ Town | - |
| 8. | | | ☐ Village | |
| | | | □ Town | |
| 0 | | | □ Village | |
| | | | ☐ City | |
| 10 | | | | |
| 10. | | | □ City | |
| | | Certification of Circulator | 1 B ARCIVILLE AR | 72501 |
| Joshua toss | certify: I | reside at 25 Rose wood Ro | A COURT of the street and municipality | |
| (name of signalator) | III sitiran aga 19 ar alder who iEbu | vere a resident of this state, would not be disqualified from voting unde | Try Court C C 02 I personally circulated this recall petition | and personally obtained each of |
| I further certify I am either a qualified elector of Wisconsin, of | ors 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 this certification is punishable under § 12.13(3)(a), Wis. Stats. | gned the paper with full knowledge of its content on the date | ndicated opposite his of her |
| name. I know their respective residences given. I support th | is recall petition. I am awar that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 926 |
| 6-11-24 | | 20 | | 020 |
|)~((datc) | (signatu | ure of circulator) | 266-8005 lweb: http://clections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is required by Wis St | ats §§ 8.40 and 9.10. The form is prescribed by the | e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608- | | |

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

| I O: The Wisconsin Election Commission | | we, the undersigned quantiled elec- | IOIS OF THE PROCESSORY DISCIPLY OF | |
|---|--|--|---|-------------------------------|
| | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | ct of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| • | (name of officeholder to be recalled and office) | THE ARTHUR OF DE AGON FOR DEGALE | | |
| | | STATEMENT OF REASON FOR RECALL | No statement of season is sequired to juitinte the second of | fetata congressional |
| (The reason for recall must be stated on petitions legislative, judicial, or county officials.) | for city, village, fown, 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, |
| Robin Vos 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, | | |
| lack of 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." | | |
| THE 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. |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATE OF |
| | 100 01 1 | Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| 1 Left Isla | Jeff Glad | 32854 Dohner Dr | Willage Burlington, WI | 5/13/20- |
| 2. The fat | Charles Lausson | 8335 Nhara DR | Village Rue (Jafan 11) | 58/20 |
| 3. HIT THE | 50ffrey Stelter | 84/1 chara or | Village BUINGTOA WI | 5/13/2020 |
| 4 Olan Calhi | DIANA CAILINS | 848 Harkee Dr | O VIII Sohners Laley | 5/13/04 |
| 5. Bannath | Benjamin 5 Rober | 32889 Jun 1908, 18 | Sel Town Dillinge Byllon 1 am Lit | 5/13/24 |
| 6. Knowhelan | Lya Kalay | 8550 Steele St | Village BUTINELTONIT | 5/13/24 |
| 7. Red Pelly | Red /ellizzari | 32904 Bay view Dr | Village Burlington UF | 5/13/24 |
| 8 | KnystalRizher | 8551 HORIZON DV | Olity Burking Con WI | 5/13/24 |
| 9. | Pot Richen | 8551 HOURON DV | Willage Bulling fon WI | 5/13/24 |
| 10. | Travis Kirkland | 33009 Maple Gove Dr. | O Village Burkington WI | 05/13/2024 |
| 0 1 | Eller certify I | Certification of Circulator | 211 - 10 | |
| I, (00 h | certify: I | reside at 1252 Caleb 100 | Bible arous 16 62 | 857 |
| I further certify I am either a qualified elector of | Wisconsin or a LLS citizen age 18 or older who if I w | vere a resident of this state, would not be disqualified from voting under | (circulator's residence - include number, street, and municipality) Wis. Stat. 8 6.03. I personally circulated this recall petition a | nd 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 sign | ed the paper with full knowledge of its content on the date ir | 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. | | |
| 5//3/24 | | 2 | | Page No. 927 |
| (date) / (FL = 170 (Rev 2019=09)) The information on this form is required. | red by Wis Stats 88, 8.40 and 9.10. This form is prescribed by the | tre of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | 6-8005 web; http://elections.wi.gov email: elections@wi.gov | 11 July |
| 22 110 (New 2017-07) The intothiguon on this form is requir | 100 07 1110 Didde 88 of 10 min Sales Time form to presented by the | The second state of the se | | |

We, the undersigned qualified electors of the Assembly District 63

(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)

| petition for the recall of | Robin Vos | from office pursuant to Article XIII, S | Section 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
|--|---|---|---|----------------------------|
| | (name of officeholder to be recalled and office) | | 3, | |
| e. | | STATEMENT OF REASON FOR RECALL | | |
| legislative, judicial, or county officials.) | | reason must be related to the official responsibilities of the office rips from the CCP, failure to protect Wisconsin farmland from the CC | holder. <i>No statement of reason is required to initiate the recall of</i> CP, | 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 | s." | |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE | HE NAME OF THE MUNICIPALITY OF RESIDENCE MUST | 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. Ellen R.D.eyer 2. | Ellen R Geyer | 7041 mariner Dr | O TOWN O'VIllage OCity Mt. Pleasant | 5/12/2014 |
| 2 | | | ☐ Town | 1 7 |
| \$55 W | | | □ City | |
| 3 | | | □ Town | |
| | | | □ Village | |
| 4 | | | □ Town | |
| 4. | | | -Q-Village | |
| | | | City City | |
| 5. | | | ☐ Town | |
| * | | | □ City | |
| 6. | | | □ Town | |
| | | | □ City | |
| | | | □ Town | |
| 7. | | | □ Village | |
| | #/ | | _ □ City | |
| 8 | | | □ Town □ Village | |
| | | | City | |
| 9. | | | □ Town | |
| * | | | ☐ Village | |
| | | | -D-City | |
| 10. | | | □ Town □ Village | |
| | | | ☐ City | |
| | ¥ | Certification of Circulator | - Miles | |
| Joseph Kosmich | certify: I | | Vista, Ca 91910 | |
| (name or circulator) [further certify I am either a qualified elector of \ | Visconsin or a LLS citizen age 18 or older who if Lw | are a resident of this state, would not be disqualified from which | (circulator's residence - include number, street, and municipality) nder Wis. Stat. § 6.03. I personally circulated this recall petition and | |
| 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 | nder Wis. Stat. § 6.03. I personally circulated this recall petition and is signed the paper with full knowledge of its content on the date ind | icated opposite his or her |
| name. I know their respective residences given. | support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | |
| 5/12/2024 | - JK | | | Page No. 928 |
| (date) (d | | e of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 6 | 08-266-8005 web: http://elections.wi.gov email, elections@wi.gov | |
| | | | | |

| | | RECALLIBITION | Accomply District 63 | |
|--|--|--|--|-------------------------|
| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elector | ors of the Assembly District os (jurisdiction or distri | ct of officeholder) |
| (official with whom nominati | on papers or declaration of candidacy for the office is filed) | | | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin States |
| | (name of officeholder to be recalled and office). ${f S}$ | TATEMENT OF REASON FOR RECALL | No etatement of reason is required to initiate the recall o | f state, congressional, |
| (The reason for recall must be stated on petitions | 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 tr | ips from the CCP, fallure to protect Wisconsin farmland from the CCP, | | |
| lack of commitment to election integrity, blocking | lower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | ACCORAGE MUNICIPALITY OF DESIDENCE MUS | ST ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE | DATE OF |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 1. Limbiliare | Kimulison | 78W Greendale Ave | Divillage Burlington | 5-13-2027 |
| 2. Carol Lomater | Caral Franstein | 7320 Fish Hatcherall | O Village Burlington | 5-13-24 |
| 3. Ah / for | JOAN HOUR | 7992 KNABSHORE | o city BUR (Noton | 5-13-24 |
| 4. YLL: | Hobie Larson | 34300 Havey Lane | O Town Village Burling For | 5-13-24 |
| 5. Du Ome J. Jem | MAN DADIENE F. LEHMON | 1 34305 FULTON | Ording BURWYON | 5-13-24 |
| 6. | Fara Marsolek | 33719 LUNA LA | or Town or Village Sur Lungton | 5/13/24 |
| 7 | 111. | 3 | □ Town □ Village □ City | |
| 817 () | iles Ver miekeride | 34213 Makingood Divine | Drown Wilage Birling ton | 5/3/24 |
| statem I was | Heather Mickouch | 33515 Farviow Ct | Prown Burlington | 5/13/24 |
| yourash - | AMI NUSTOI | 7735 Ever green Fernance | DTOWN DVIllage Burlington | 5/13/2024 |
| Uneller Luly | ANDREW Isenberg | Certification of Circulator | V S | |
| Joseph W | bymick, certify: | I reside at 468 Karra Ct. Chulan | to the second and municipality) | |
| (name of circulator) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the certification of | | | | |
| name. I know their respective residences given | I support this recall petition. I am aware that falsifyin | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 929 |
| 5/13/2024 | (signal | ture of circulator) | 56-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev. 2019-09) The information on this form is req | uired by Wis. Stats: §§. 8.40 and 9.10. This form is prescribed by the | ture of circulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | 12.0007 #11.000 ############################### | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec | stors of the Assembly District 63 | |
|--|---|--|---|---------------------------------|
| | ion papers or declaration of candidacy for the office is filed) | | | 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 | |
| | (name of officeholder to be recalled and office) | | 3,7,1 | o or the wisconsin statutes |
| (The reason for recall must be stated on petitions | 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 | No statement of a second | |
| legislative, judicial, or county officials.) | | responsibilities of the officerolder | No statement of reason is required to initiate the reco | all of state, congressional, |
| | | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE A | MUST AL WAVE 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 | DATE OF |
| 1/ | 1 27 0 1 | Rula address must also include box of fire no. | Indicate Town, City, or Village | SIGNING |
| 1 final | Monike Brown | 1843 \$ 00sevel + Ave +8 | O Village Lacine | 5/11/21 |
| 2. Il MR Pout | 1/ 166 1 15 20 | SCA Die 1 1 1 1 1 1 1 | □ Town | -1117 |
| 1 2 2000 | Venus Vamison | 350 Maistran All | TORY TORES | 5/14/2 |
| 3 ANG PROVER | How Dear lovel | 500 Tolular nove | Town Village P C 11/19 | E/11/12 |
| 4 . 10 | TIDIA DO TO | son ragion we | □ City VCCC UV | 2/11 |
| Majorian | Tayoura wall | 1326 Ene St | D Village Downes | 5/11/19 |
| 5. | | le Al | □ Town D | 11/2 |
| 1000 | O in Clowley | & Meant of Colors | Octy Williage | 5/11/24 |
| & D. KOCKELL | Delkines Kash | 2007 WAShington Are # | Strown Soliton | 5/11/20 |
| 7- Quanto atimba | On la latilika | 122 121 1 | □ Town | 11/20 |
| Storte M rectamm | Brooke Williemma | 133 13th Ave | ocity Union Grove | 5/1/2024 |
| 8. Mur Tu | Mutt Teater | 1307 Highriew Ave | □ Town □ Village | T 11 211 |
| | 1 uti | 1307 Mighnew AVC | Octive Union Grave | 5-11-24 |
| * | | | -U-Village | |
| 10. | | | □ City □ Town | |
| | | | ☐ Village | |
| Call Cal | 2 C | Certification of Circulator | = 11 1 1 | |
| (name of circulator) | .ecrtify: I r | reside at 15005 No. 1601 37 # 17 d | 03) cattsdal AZ SS | 460 |
| I further certify I am either a qualified elector of V | Visconsin, or a U.S. citizen, age 18 or older who, if I we | ere a resident of this state, would not be disqualified from voting under W | (circulator's residence - include number, street, and municipality) | |
| name. I know their respective residences given | rs are electors of the jurisdiction or district represented by | by the officeholder named in this petition. I know that each person signer this certification is punishable under § 12,13(3)(a), Wis, Stats. | d the paper with full knowledge of its content on the date | e indicated opposite his or her |
| 3/11/2024 | support and recall permission in the transferring to | tins certification is punishable under § 12.13(3)(a), Wis. Stats. | | C |
| (date) | (signature | of Circulator) | | Page No. 930 |
| L-170 (Rev 2019-09) The information on this form is requir | ed by Wis, Stats, §§, 8,40 and 9,10. This form is prescribed by the V | Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266- | 8005 web: http://elections.wi.gov email: elections@wi.gov | L. |



| TO: The Wisconsin Election Commission | | , We, the undersigned qualified elec | tors of the Assembly District 63 | |
|---|--|---|---|--------------------------------|
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | ct of officeholder) |
| 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) | | V | |
| | | TATEMENT OF REASON FOR RECALL | | |
| The reason for recall must be stated on petitions flegislative, 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, |
| | of the Chinese Communist Party (CCP), acceptance of t | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | his own constituents by calling them "whack-jobs, morons, and idlots." | | |
| THE MUNICIPALITY USED FOR MAII | LING PURPOSES. WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED |
| 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 |
| 1. Bel by | Brimler Stussy | 1459 Groves Ln. | Sillage Union Grave | 5/12/24 |
| 2 / 2 2 2 1 1 2 1 1 1 1 2 1 1 1 1 1 1 1 | Take Estack | 440 13th Ave | Distribution Grove | 5/12/24 |
| 3. | Jack Hettminn. | 1311 jodeville Dre | G-Village City Car City Cor Cor Cor Cor Cor Cor Cor Co | 5-12-24 |
| 4. Bokn Mooched | John Moorehead | 361 Mill Ave | Ocity 4nion Grove | 5-12-24 |
| 5. Lunga Upl | Unda Drik | 3623 Anor 28 | Uvillage City | 5.12.24 |
| mutostr och | CHRISTOPHER DELL | -3623 ARBOR AD | Uvillage WATEL FORM | 5,124 |
| 7. | | | ☐ Town | |
| • | | χ | □ City | |
| 8. | | | ☐ Town | |
| | | | □ City | |
| 9. | | | Town | |
| | | | □ Village | |
| 10 | | | □ Town | |
| 10. | | | □ Village | |
| 0 11 | 1 | Certification of Circulator () | - // / / / / / / / / / / / / / / / / / | |
| , (name of circulator) | certify: I | | 703 Sco Hobile 17285 | 260 |
| further certify I am either a qualified elector of W | Visconsin, or a U.S. citizen, age 18 or older who, if | 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, 1 personally circulated this recall petition ar | nd personally obtained each of |
| ne signatures on this paper. I know that the signer, is a signer of the signer. I know their respective residences given. I | s are electors of the jurisdiction or district represented | the officeholder named in this petition. I know that each person signification 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 |
| Maz of Car | 24 Companie | e of circulator) | | Page No. 931 |
| -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 | s-8005 web: http://elections.wi.gov email: elections@wi.gov | 3 <u>1 - J</u> |

| | | RECALL PETITION We, the undersigned qualified elec | tors of the Assembly District 63 (jurisdiction or dis | strict of officeholder) |
|--|---|---|--|------------------------------------|
| O: The Wisconsin Election Commission | 7 . 71. 1 | | on 12 of the Wisconsin Constitution and §.9.10 | of the Wisconsin Statutes. |
| O: The Wisconsin Election Commission i | papers or declaration of candidacy for the office is filed) | from office pursuant to Article XIII, Section | on 12 of the wisconstitution | |
| (Official wild wholl formalist | Robin Vos | Hom ones p | | |
| etition for the recall of | (name of officeholder to be recalled and office). | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder reason the CCP, failure to protect Wisconsin farmland from the CCP. | $\mathfrak c$. No statement of reason is required to initiate the recal | ll of state, congressional, |
| The reason for recall must be stated on petitions for | r city, village, town, and school district officials. The | rips from the CCP, failure to protect Wisconsin farmland from the CCP, his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| egislative, judicial, or county officials.) | the Chinese Communist Party (CCP), acceptance of tr | rips from the CCP, railing to process." | | |
| Robin Vos should be recalled for his tacit support of | the Chimoso Control and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | THE STREET OF RESIDENCE M | IUST ALWAYS BE LISTED. |
| ask of commitment to election integrity, blocking lov | wer prescription drug costs, and nagram disresp | THE NOT SUFFICIENT. THE N | NAME OF THE MUNICIPALITY OF RESIDENCE | DATE OF |
| CK OF COMMINATION OF | THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SELECTION OF RESIDENCE, IS NOT SELECTION. | MUNICIPALITY OF RESIDENT | SIGNING |
| THE MUNICIPALITY USED FOR MAIL | ING PURPOSES, WHEN DITT | STREET & NUMBER OF RELIGIOUS OF Fire no. | Indicate 10th, 0157 | |
| THE MONTH ECTORS | PRINTED NAME OF ELECTORS | Rural address flidst also flictude | DTown C | 12 MAY 2024 |
| SIGNATURES OF ELECTORS | | - Box 10 1 1 Dates org | City Victoria | , 1 |
| - L | $\rightarrow 0$ | 29098 N. Lake Dr. 23.53.89 | D Town | 19 1101 202 4 |
| Thorsand | 12 marsons | | Dillage Bullin Coor | 12 May 2024 |
| John 1 . W. Jars | 16001 | 1721 (MOSSINAY PH) | Ocity During | 120 |
| 2 0 1/0 - 18318311 | 27 60 | 3204 CROSSWAY PD | Town | Milling |
| BOB KRIEN | 19011 | 118 mill Ave | Uvillage UNFON Grave | 6.1000 |
| 1000 | | 118 mill Ano | | () |
| 3 1 () | I do Wha beel | TIG MITT MOS | □ Town | |
| - Dun Lautenhous | to that | | ☐ Village | |
| 1-20:-11 | 0 1 11 | | □ Town | |
| 4. | | | - U village | |
| | | | City City | |
| | | | □ Town | |
| 5, | | | C1 Village | |
| | | | □ City | |
| 6 | | | ☐ Town | |
| · a: | | | D City | |
| | | | Town | |
| 7. | | | - Q-Village | |
| | | | City City | |
| 0 | | | □ Town | |
| 8. | | | C) City | |
| | | | U Town | |
| 9 | | | U Village | |
| | | | City | 0-0 |
| | | | 1 = 2 0 C \ = 1 0 1 | 17 2 301 |
| 10. | | Contification of Circulator | 4 1741 7 JUSTS4W41 | TCOSE C |
| | 100 | Gertification of Circulator | (circulator's residence - include number, street, and municipality | y) |
| (' .) (| and He (' certif | fy: I reside at | (circulators residence and a circulated this recall p | etition and personally obtained es |
| 150111 | 30.00 | state would not be disqualified from voting | ander Wis State 9 0.05 I person ledge of its content on the | ne date indicated opposite ma or i |
| (name of circulator) | or a U.S. citizen, age 18 or older who | were a resident of this state, would not like new that each person | on signed the paper with run kilo | - vi 000 |
| I further certify I am either a qualified elector of | of Wisconsin, of a U.S. citizen of district representation or district representation | hied by the officeholder named in this periods the officeholder named in this periods at 12 (3)(a), Wis. Stats. | | Page No. 932 |
| the signatures on this paper. I know that the sig | gners are electors of the julison of amaward that falsi | flying this certification is punishable under § 12.11 | | Li company |
| name. I know their respective residences give | n. I support this recall periods. | fy: I reside at if were a resident of this state, would not be disqualified from voting the officeholder named in this petition. I know that each personal principle in the certification is punishable under § 12.13(3)(a), Wis. Stats. | | 1177 |
| 100000 | D'AT VILLE | signature of circulator) I by the Wisconsin Elections Commission P.O. Box 7984, Madison, W1 53707-7984 | 1608-266-8005 web: http://elections.wi.gov email: elections@wi.gov | v |
| 11/100/101,01 | | New the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 | 1000 | |
| (date) | equired by Wis Stats §§ 8.40 and 9.10. This form is prescribed | 1 by the Wisconsin Alexander | | |
| FI -170 (Rev 2019-09) The information on this form is re | odanos of | | | - |

RECALL PETITION 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) |
|--|--|--|---|------------------------------|
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| petition for the recall of | (name of officeholder to be recalled and office) | | - | |
| | S | TATEMENT OF REASON FOR RECALL | | *12770-87571 |
| | for city, village, town, and school district officials. The | reason must be related to the official responsibilities of the officeholder | . No statement of reason is required to initiate the recall o | f state, congressional, |
| legislative, judicial, or county officials.) | of the Chinese Communist Barty (CCD), accentance of the | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | | | |
| lack of 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." | | |
| THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY 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 SIGNING |
| Storing Street Street | 1 | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 1. Mal Somethe | Care Greater | 1 7 12 | Uvillage // // // // // | A118/2004 |
| Vila Della | 120KO DZCERFOT | 600 12 Ace | acity MOION CROCK | 1) 11 0/2027 |
| 2 // // // // // // // // // // // // // | 10000 11-0-000 | 1 - 17 1741 Pare | Town Village /) NAME | 2/12 /may |
| nene Sterr | a INENE DECEPPA | 1000 KG 000 | City Charles March | 7 6 5 /2029 |
| 3 1 1 1 1 1 1 | | | □ Town □ Village | -1 / 1 |
| Lavone (unho | Lavonne CINKO | 10/2 Slate St. # 106E | City Knew Stone | 5/13/24 |
| 1000 | | | □ Town □ Village | -7 |
| " Parel links | PAUL CINKO | 1012 State ST. # 106E | City Mean Frame | 5/13/24 |
| 5 N S D . | | | Town Village | 61.1311 |
| James Joes | Jean Lois | 1204 Jean St. | a City Wellen Drovel | 5/13/df |
| | 1 1/ | | U Town | 12/2 |
| TA I | Jeft Saund 18 | 1215 Elizabeth 5 | City Unon Grove | 5/13/24 |
| 7 459 1 | 00 10 | In I A D A R i D | □ Town □ Village | F13111 |
| liae In 1 these | 11 bit ilum Stocke | 1/3/ Walnut Fd ds. | city / Minage | 5/2/07 |
| | | | □ Town | 7 |
| 8, - | V | | ☐ Village | |
| | | | □ Town | |
| 9. | | | □ Village □ City | |
| | | | □ Town | |
| 10. | | | ☐ Village | |
| | | 6 | C TI A A | 1.050.0 |
| (or il C-000 |) | Certification of Girqulator | 202 SCATTURO F | 70540 |
| I, (name of circulator) | certify: I | (410 | (circulator's residence - include number, street, and municipality) | 70000 |
| I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 opolder 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 vistrict represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I an aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. | | | | |
| the signatures on this paper. I know that the signe | ers are electors of the jurisdiction or district represented | by the officeholder named in this petition. I know that each person sign | ned the paper with full knowledge of its content on the date i | ndicated opposite his or her |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 933 |
| 3 3 0 | M Mull | Will | | 1 age 100 933 |
| (date) | (signatur | re of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | 56-8005 lugh: http://elections.wi.uov.lemail.elections@wi.gov | |
| EL-170 (Kev.2019-09) The information on this form is require | red by wis Stats \$5 8 40 and 9 10. This form is prescribed by the | : Wisconsin Elections Commission P.O. Box 7984, Madison, W1 33707-7984 608-20 | 30-5003 [wco. map meleculatis wi gan citian, electronists wi gov | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elect | fors of the Assembly District 65 | t of officeholder) |
|--|--|--|---|---------------------------------|
| (official with whom nomina | tion papers or declaration of candidacy for the office is filed) | 5 | 9. | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | ille Wisconsin Statutes. |
| • | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| | S | 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.) | t of the Chinese Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Trophi vos dilona se recumente la constante de | a lower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| lack of commitment to election integrity, blocking | g lower prescription drug costs, and lagram discospective | Two M | AND OF THE MUNICIPALITY OF DESIDENCE MUS | Γ ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MA | AILING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | MUNICIPALITY OF RESIDENCE | DATE OF |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| 1 AZ | Shok! Haider | 37,9 92rd flace | Town Textyllage City Str teverA | 5=14-24 |
| | 7704 | 3)0(7) | D_Town | C 11. 711 |
| 2 1 1 | Jassica Kreuser | 9018 Horence Drive | acity Sturtevant | 5-14-29 |
| 100 | Jessica Kraser | | □ Town / / | + 111 711 |
| 3. \(\sigma\) | 1 Variable | 921/2 Florence Drue | Ocity Stutevant | 15-14-24 |
| Kars | James Younds | 12/0 1 10/5 MC 0/15 | □ Town C1 | - 11 011 |
| 4. COVIDA | Destiny Obner | 9010 MOVENO DAINE | o village SMVHVANF | 5-14-19 |
| | 13 01 000 - | DIDE SIDE ON CH | Olling MONT Peasant | 1 C - 14 - 24 |
| 5. Bentotte | Dermon Hears | 1425 010 SMING ST | Town | 07 |
| 6. | 824 4-11VI | 1934 haine Ave | □ Village □ City | 3-1-4-24 |
| 1/1/1/20 | 1 | | □ Town □ Village | ~ 111-716 |
| 7. 25 T. | Job Torry | 2680 4/2 mile 75 | Di City CLU | 7-14-14 |
| at min | 400 10000 | 7.50 | □ Town □ Village | 5-14 20 |
| 8. | Marmo Jos Jana | 1501 Buchanan | a city Page | 314-29 |
| 10 | 1 (00) | = = 02ND D1 .0 | O Town | 5-14-01 |
| 9-3-1-12 [Dad | SUSAN CLOT | 3103 92" PLare | acity 5100 CVXNN1 | UTTG |
| and the second | | - C N | Village St * | 1 t -111 74 |
| 10. Hinne White | Ginny White | 3669 92nd Place | City (wevant | 10-14-21 |
| 1/3 | at Name | Certification of Circulator (CL) | L22020 - Hele DAD | 052600 |
| Tul (3 | OCC, certify: I | reside at 15 10 100 STU/I | (circulator's residence - include number, street, and municipality) | 0 m |
| (name of circulator) | | to the transfer and the | Win Stat 8 6 03 I personally circulated this recall petition | and personally obtained each of |
| | | | ned the paper with full knowledge of its content on the date | ndicated opposite his or her |
| the signatures on this paper. I know that the signatures of the signatures of the signature is signatured in the signature of | n. I support this recall petition. I am aware that falsitying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. O24 |
| E-11 24 | i Yul Hi | aVo C | | Page No. 934 |
| 3 4 0 | | | | |

(signature of circulator)

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

The Wisconsin Election Commission

We, the undersigned qualified electors of the Assembly District 63

| (official with whom nominate | on papers or declaration of candidacy for the office is filed |) | gurisdiction or o | listrict of officeholder) | |
|---|---|--|--|-----------------------------------|--|
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, S | from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statute | | |
| | (name of officeholder to be recalled and office) | • | · · | | |
| | | STATEMENT OF REASON FOR RECALL | | | |
| (The reason for recall must be stated on netitions | for city village town and school district officials | The reason must be related to the official responsibilities of the officel | holder. No statement of reason is required to initiate the reca | Il of state, congressional. | |
| legislative, judicial, or county officials.) | tor erry, virtuge, to viri, and seriou district errorars | The remon most be related to the official responsibilities of the officer | notices, 100 distributed by reason is required to initiate the recu | in by state, cong. constant, | |
| | of the Chinese Communist Party (CCP), acceptance | of trips from the CCP, failure to protect Wisconsin farmland from the CC | CP | | |
| Trobin voc chodia be recailed for this tack support | or the entress communical any (early, geosphane) | or appearant are corr, railare to protect vibourious tarmiana from the co | 71 1 | | |
| lack of committment to election integrity, blocking I | lower prescription drug costs, and flagrant disrespec | t for his own constiuents by calling them "whack-jobs, morons, and idiots | s," | | |
| | | | | | |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN | N MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. TH | HE NAME OF THE MUNICIPALITY OF RESIDENCE M | UST ALWAYS BE LISTED. | |
| | PROPERTY VALUE OF STREET | 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///// | | C A 8 1 - 1 | Town Coby later 1 | CHILL. | |
| 1.0 | Kerin Galapishe | 18900 (on Un | UVillage VVIII | 7/17/24 | |
| 190 | 14011 6 01 1/11 | 0 | City | / / / | |
| | | | □ Town | 6 | |
| 2. | | | | | |
| | | | ☐ City | | |
| 3. | | | □ Village | | |
| * | | | □ City | | |
| | | | □ Town | | |
| 4. | | | ☐ Village | | |
| | | | □ City | | |
| 5 | | | □ Town | | |
| 3, | | | - O Village | | |
| | | | ☐ City ☐ Town | | |
| 6 | | | G VIII de | | |
| | | | □ City | | |
| _ | | | -O Town | | |
| 7. | | | □ Village | | |
| | | | ☐ City | | |
| 8. | | | □ Town | | |
| ° | | | ☐ City | | |
| -5,4 | | | □ Town | | |
| 9. | | | U Village | | |
| × | | | □ City | | |
| 10. | | | □ Town | | |
| 10, | | | -D-Village | | |
| | | | □ City | | |
| 0 1010 | | Certification of Circulator | +Unit 2203 Sutsdalpr | 1-450 | |
| I GUIGARC | certif | y: I reside at 1.30 4.3 N 100 100 | HUNCH 220 Y SCOBCLAUPY | COSTA | |
| (name of circulator) | | V | (circulator's residence - include number, street, and municipality) | 8 | |
| I further certify I am either a qualified elector of \ | Wisconsin, or a U.S. citizen, age 18 or older who, if | were a resident of this state, would not be disqualified from voting u | inder Wis. Stat. § 6.03. I personally circulated this recall petition | on and personally obtained each o | |
| the signatures on this paper. I know that the signe | rs are electors of the jurisdiction or district represen | itelf by the officeholder named in this petition. I know that each person | n 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 lateit | ing this certification is punishable under § 12.13(3)(a), Wis. Stats. | | | |
| 7114120AC | (U) (1) | DALO() / | | Page No. 935 | |
| - 1,1009 | | | | 9 333 | |
| FI -170 (Rev 2019-09) The information on this form is require | | nature of circulator) v the Wisconsin Elections Commission P.O. Box 7984, Madison, WI, 53707-7984 6 | 508-266-8005 lyeb: lyth //elections with the lections@without | | |

The Wisconsin Election Commission

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

| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | ct of officeholder) | |
|---|--|---|---|------------------------------|--|
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Sectio | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. | |
| • | (name of officeholder to be recalled and office) | TARREST OF BEACON FOR BECALL | | | |
| (The reason for recall must be stated on potitions | | TATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall of | f state congressional. | |
| legislative, judicial, or county officials.) | (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, | | | | |
| Robin Vos should be recalled for his tacit support | 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 I | lower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots," | | <u></u> | |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATE OF | |
| SIGNATORES OF ELECTORS | TRIVIED NAME OF BESCHOOL | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING | |
| 1. Shall of ener | Shoila K. Riegs | 10 14 1 EASANT PLASE 9340 | City MT PLEASANT WISCONSI | 5-14-2024 | |
| 2 Kel Draver | Cherry Draks | 500 Kincs/ Ville | o Village City Ca 50h | 5-14-24 | |
| 3/ Heard Jung | W: Kard A Jung | 1440FOXTail Dr102 | O'Village MT Pleasant Wise | 5-14-24 | |
| 4. Mary Late | Mary Lake | 6437 Wembly In. | Ullage Mt Pleasant | 5-14-24 | |
| 5. 6hila- | BEN LAKE | CH37 WEMBLY IN. | Ullage City MT: 1 872 LT | 5-14-14 | |
| 6. Vergue & Bruce | Jaconta Lapos | 1246 N Svanys/ope Dr | Ullage 7- Plecis of | 5-14-24 | |
| 1. Thama Sauces | VIRGINIA SOURCE | 1420 N SUNNYSlope D | O'Village Mt Peasaint | 5-14-24 | |
| 8 Sam Il | Down Gorman | 10408 weembly LW | Urllage Mt Pleasant | 5-14-24 | |
| Man A | NAM Kackla | 6416 Wently LN | Ullage M+ Reasout, W/ | 5-14-24 | |
| 18 Edwalt TW | Elisabet Kochy | 6416 Wembly LN | Ullage HT Pleasant UT | 5-14:24 | |
| W. V. 1 | (- 0 - 1 - 1 | Certification of Circulator | T FOUNT | | |
| I, Mike Kichner (name of circulator) | , certify: I | reside at 1017 RIVA Ridge Raci | (circulator's residence - include number, street, and municipality) | | |
| I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of | | | | | |
| the signatures on this paper. I know that the signe | ers are electors of the jurisdiction or 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 in | idicated opposite his or her | |
| name. I know their respective residences given. | 1 support this recall petition. I am aware that faisilying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 936 | |
| (date) | | e of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | 5 9005 hugh: http://doctions.vv.uev.lemail.elections@us.cov | | |
| ELL-1/U (KeV 2019-09) The information on this form is required. | red by wis black 99 6 40 and 9 10. This form is prescribed by the | Wisconstit Electronis Continussion F.O. Box. 7964, Wisduson, Wi. 33707-7984 008-200 | 3-000 pres. Hith resident and the citizen, electronists wit gov | | |

| | | RECALL FEITHON | C.1 Assembly District 63 | |
|--|--|---|---|--------------------------------|
| To Missessia Floation Commission | | We, the undersigned qualified elected | ors of the Assembly District 65 (jurisdiction or distric | ct of officeholder) |
| TO: The Wisconsin Election Commission | on papers or declaration of candidacy for the office is filed) | | | the Wisconsin Statutes. |
| | Robin Vos | from office pursuant to Article XIII, Section | 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Camp |
| petition for the recall of | (name of officeholder to be recalled and office) | | | |
| | S | TATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall of | f state, congressional, |
| (TI for recall must be stated on petitions | for city village, town, and school district officials. The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder, | 140 Statement of reason is required to the | |
| legislative, judicial, or county officials.) | 201 2015, 111112-1, 11111 | the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Robin Vos should be recalled for his tacit support of | of the Chinese Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | and flagrant digrespect for | his own constituents by calling them "whack-jobs, morons, and raises | | THE PERMITTER |
| lack of communicities seemen integrity | The second section of the s | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | SIGNING 24 |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate rown, eng, and | 3-17-01 |
| 0.00 | 200 | 11616 H.Q | Town Dillage M. Plance | 5 15 4 |
| 1. Pro1/1/ /// 2 | CAM THE | 1101) and slope It | City / // City | 2 10-34 |
| The way the | JOHN JOHN | | Town | 20/1/2014 |
| 2 // 00/1/2 | TP/1 Fralm | 113 Angun | City /// // Cify | 5/16/2021 |
| - IMPAN | Phil I way | 6517 | Town 100 1 P Dood of at | 6/17/24 |
| 3 1 St 1 Con A C A | To Coul Way Ha | LILLAN SUM Waterse DV | City Mt. 1 Labour | 01119 |
| Xumula 7 9/1VICU | 1 Jenniter Liftement | 111 0 101 Swarp 10 4 103 | Town | 2110/201 |
| (1) 100 | 1/11 2 | | City MZ. Pleasant | 5/17/24 |
| * K X of rown | KIF DNOWN | 1225 N JUNISTOPE DI | Town / 3/ | HIZLY |
| 17 9 | 1 1/4 .1 1. | 1219 N Sunnustone #103 | Willage Mt Pleasont | 211/194 |
| 5 Ja Harmodia | ek Kathrin Novak | 1219 N Sunnyslope 1163 | D Town 120 Pic MANT | Cin Inel |
| 4 40. | 1 100 | WIR DI FORMUSINE #101 | 也 Village /// / - fしたパンロレー | 3/17/27 |
| 6. PM. Sotterson | LDRI PETERSION | 1149 N. SONNYSLOTE TOT | Town 1 0/1 0/1 0 t | |
| dow, over the | VOLV / CIPICIO | 1 445 | Village Mt. Pleasent | 5/17/24 |
| 7.1/ | Vich Dunham | 6940 marinex DR # 10 2 | □ City | 1 |
| The state of the s | PITS VOU | 14141 | Town Displayer Town | 1510124 |
| 8X DEED | Wind I Waster | John Musiner Dr +100 | Digital Place | 101110), |
| | MINIC WATER IS | 45 | Town Dogs In a f | 5-17-24 |
| 9 50 dan i al han 100 | Stephenietanson | 5830 Cambridge M | a city 1 1 Securant | 0 11 51 |
| OF VEINGENISOI | deprayrenance | 0 0 0 | Town | 5-17-24 |
| 10.50 | 5 1 Dava | 5810 Cambridge In | Dicity Mt. / Leasan U | 13/(21 |
| Dlawy var | Dharon J 19V13 | O-1 | A in mim | |
| 9 1/101 | | Certification of Circulator | Racine WL SSYUL | |
| Mike Kirch | ner, certify: | I reside at 1011 KIVA A 1932 | (circulator's residence - include number, street, and municipality) | and personally obtained each o |
| (name of circulator) | Swiccopsin 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 by the officeholder named in this petition. I know that each person significant to the contract of | r Wis. Stat. § 6.03. I personally circulated this recall pertition | indicated opposite his or her |
| I further certify I am either a qualified elector of | pers are electors of the jurisdiction or district represente | were a resident of this state, would not be disqualified from voting under ad by the officeholder named in this petition. I know that each person signs, this certification is punishable under § 12.13(3)(a), Wis. Stats. | greatile paper with full knowledge of the comment of the | |
| name. I know 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. | | Page No. 937 |
| 5-17-24 | Muse Kun | | | |
| | (signa | ature of circulator) | 266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is req | juired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by | ature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | | |
| • | | | | |

| ŀ | A |
|---|----|
| 1 | // |
| v | 4 |

| | | We, the undersigned qualified elected | ors of the Assembly District 63 (jurisdiction or district | t of officeholder) |
|--|---|--|---|---------------------------------|
| TO: The Wisconsin Election Commission | o | | | (OI Officeriolder) |
| (official with whom nomination | n papers or declaration of candidacy for the office is filed) | from office pursuant to Article XIII. Section | n 12 of the Wisconsin Constitution and §.9.10 of t | he Wisconsin Statutes. |
| petition for the recall of | Robin Vos | from office pursuant to Attrope Time, | | |
| | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | и с | |
| | 5 . | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recall of | state, congressional, |
| (The reason for recall must be stated on petitions f | for city, village, town, and school district officials. The i | reason must be related to the orneral response | | |
| legislative, judicial, or county officials.) | on Objects Communict Barty (CCP), acceptance of tri | ps from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Robin Vos should be recalled for his tacit support of | of the Chinese Communist Fairly (Cor), acceptance | | | |
| lack of committment to election integrity, blocking le | ower prescription drug costs, and flagrant disrespect for h | nis own constiuents by calling them "whack-jobs, morons, and idiots." | TO LEAVE OF DESIDENCE MIST | T ALWAYS BE LISTED. |
| | DIEEEDENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE | AME OF THE MUNICIPALITY OF RESIDENCE MUSI | DATE OF |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN IN | STREET & NUMBER OR RURAL ROUTE | Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no. | Midian 7, 27 | |
| A 11. | | | □ Town □ Village | |
| 1 Called Ho | Colotto Love or | | □ City | |
| | will the think the | | Town Color | 5/12/24 |
| 2 12 4 12 | 1 alatta Vacan Ilu- | 5640- Cambridge In \$7 | acity MI. Pleasant | 011(1007 |
| "Colette Kreuter | (10 lette Null Al | SO TO COMPONDED FOR | Town | |
| 70/ | | att su | DEASANT | 5-17-24 |
| 3. VX | BRUCE KRAZUTER | 5640 CAMBRIDGELN | Ocity M DESASSANT | |
| | | #1/ | Village Mt XIJaseng | 13-17-1 |
| 4. A Ch n D- | 1 (12 D 16/58) | 5605 Cambries (N'4 | a city | |
| geith Muss | Civia per Civia | | Town Village | 15 271- 74 |
| 50 pina | 0 10 | less Combrig Ul | O City MI Mengal | 0 = 7. |
| Variat . | 1 Javi 9 Verg | 0300 | Town MAA DIROCUA | 15 17-20 |
| () 22 O . 1- | Kutin Balant | 501 Cambridgeliv#2 | D City W P ROSewer | 3-1109 |
| o Lostre 121 | JUST ITE IST VILLA | 10 201 Coch 200 Coll 201 | D Town - 20 | 5/0-10 |
| | REAMARD | FORTZOALDAIDOE S | Village Jan I. F. Down 18 | 4011114 |
| 7. Qt 0 | Bush SAKKINS | N5827CAMBRIDGES | City OCE COLORS | 5 20 |
| ZUDRONO 171 | De la companya della companya della companya de la companya della | TOUS ON NELSON 75 | some 11 Don hout | 5-11/-27 |
| 8. 10 atting & Mark | WICHAUTED FMMOD | NSS 43 CHARISPIDGE CAS | As any MI C CONSUME | 1 2 |
| (X overland Mich | go Challon proton | | Village VIS ALCOROT | 1517211 |
| 9 18 1 | PALSU BURRES | 1 5345 Compined the | O City ON A CONTRACT | 217-24 |
| L onst DEEES | TATSY | CV 13 ORINGS (BY | Town 1 Down | |
| 10 () () () | · Sach | 1 THIT BURINTE WAS | City MUNTER | WILL GOLD |
| 10. WY SAN | 16W1 (2011) | 11019190110 | | |
| Nej III | 7 | Certification of Circulator | JAN 10 10 5340 | 2 |
| Milla Viral | certify: | I reside at 10/7 Riva A rage | (circulator's residence - include number, street, and municipality) | |
| (name of circulator) | | 100 | 11 -ileted this recall petition | and personally obtained each of |
| I 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 under d by the officeholder named in this petition. I know that each person signs this certification is punishable under § 12.13(3)(a), Wis. Stats. | gned the paper with full knowledge of its content on the date | indicated opposite its of her |
| the signatures on this paper. I know that the sign | ners are electors of the jurisdiction or district represente | ng this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 938 |
| name. I know their respective residences given | I support this recall petition. I am aware mariastry | / / / | | |
| C-17-74 | Muke W | 11 Million | W 12 m 1 m 2 m | |
| (date) | (Signal | ture of circulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608- | -266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is req | juired by Wis Stats §§ 8 40 and 9 10 This form is prescribed by t | 100 | | |
| | | | | |

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

The Wisconsin Election Commission

| (official with whom nomination papers or declaration of candidacy for the office is filed) | | Umisalction of distric | |
|--|---|---|-------------------------------|
| petition for the recall of Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| (name of officeholder to be recalled and office) | | | |
| · | STATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on petitions for city, village, town, and school district officials, T | the reason must be related to the official responsibilities of the officeholder | To 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 o | 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 f | for his own constluents by calling them "whack-jobs, morons, and idiots," | | |
| | THE N | AME OF THE MUNICIPALITY OF DECIDENCE MUST | TALWAYS DELISTED |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N. | AME OF THE MUNICIPALITY OF RESIDENCE MOST | DATE OF |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | SIGNING |
| SIGNATURES OF ELECTORS | Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGITING |
| . 10 | 7 (405 | UTown | 161 = 11-12 |
| Mario Gach | THE GIVENITE INCH | City MA WIROSOM MA DS | (0, 1) |
| may coo I I I I I I I I I I I I I I I I I I | FIU MOUTE NOW | Town | |
| 2 1 1 | <u> </u> | - U VIIIage | |
| | | ☐ City | |
| | | □ Town | |
| 3, | | □ Village | |
| | | Town | |
| 4 | | □ Village | |
| * | | □ City | |
| | | -G-Town | |
| 5. | | □ Village | |
| | | □ City | |
| | | □ Town □ Village | |
| 0. | | □ City | |
| | | □ Town | |
| 7. | | ☐ Village | |
| * * *** | | □ City | |
| | | ☐ Town | |
| 8. | | □ Village □ City | |
| | | Town | |
| 9 | | □ Village | |
| 10 (90) | | □ City | |
| | | Q Town | |
| 10, | | □ Village | |
| | | - O City | |
| Division of the second | Certification of Circulator | A 17 7311 | ~ |
| I, Whe bive nev certify | : I reside at 1017 Riva Ridge | Racine WI 5341 | 12 |
| | | (circulator's residence - include number, street, and municipality) | |
| I for the control I me with the appoint of Wiggers in or a LI Spatiary age 18 or older who if I | I were a resident of this state, would not be disqualified from voting under | Wis. Stat. § 6.03. I personally circulated this recall petition as | nd personally obtained each o |
| the signatures on this paper. I know that the signers are electors of the jurisdiction or district represent | 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 in | dicated opposite his or her |
| name. I know their respective residences given. I support this recall petition. I am aware that falsifying | ing this certification is punishable under § 12,13(3)(a), Wis, Stats, | | |
| 701 701 701 701 701 | | | Page No. 939 |
| 5-17-24 Make King | schr | | |
| (datc) | nature of effectiator) | | |

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



| | | RECALL PETITION | C. L. Accombly District 63 | |
|---|---|---|---|-----------------------------------|
| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elected | ors of the Assembly District 65 (jurisdiction or distr | ict of officeholder) |
| (official with whom nomination | n papers or declaration of candidacy for the office is filed) | A C 1 VIII Continu | 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | 1 12 of the wisconsin Constitution and gives | |
| • | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| | S | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder, | No statement of reason is required to initiate the recall of | f state, congressional, |
| (The reason for recall must be stated on petitions f | for city, village, town, and school district officials. The | reason must be related to the official responsitional | | |
| legislative, judicial, or county officials.) Robin Vos should be recalled for his facit SUDDOR 0 | of the Chinese Communist Party (CCP), acceptance of tri | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | * |
| | awar proportion drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and lulots. | | OT ALWAYS DE LISTED |
| | ANG PURPOSES WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | DATE OF |
| THE MUNICIPALITY USED FOR MAII | LING PURPOSES, WHEN DIFFERENT THRU | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no. | Town | 18 2 6 |
| 1/2 0 UPA / 2/22 | LAURA MWOLIN | 855 Carnon Unitisol | Sivillage MT Planskul | May the, 21 |
| 2. | A 61 1111/6 | 7407 Commide Way # 1403 | D Village MT Pleasent | May 18, 24 |
| " of then I like | 1054 h (1.110) | 0-0 P 1M-1 1 1# | Town Of Planes | May 18,24 |
| 3. IIM JANKA | VIM PANKA | 868 BOULLEV MAIL 301 | City /// /ASAW1 | 10,00 |
| 4.5 - 2 - | Samantha Jukic | 30130 woodlawn Drive | O'llage Burling ton | 190918,29 |
| 5. 1011 1 | March Late | 7449 ald Sam & | Ullage M preserve | 5/18/27 |
| 6 2 21 | my ou | 1/20 Timmer LN. | Otive Mt. Phasant | 3/18/2 |
| Terry Berlen | Terri Bealden | 1 Tanack IA | Town Village A TCASA | NY5 3/18/24 |
| 1. Kine | KOUD KING | 110110000000000000000000000000000000000 | Town | 10 5/10 love |
| 8. | They History | 1 10 Tim wer LA | City / Cuselit | 3/18/24 |
| 2 1000 | 116 | III Timmer LA | O Town O Village O City MT Pleasant | 18/24 |
| 19m 1-6 | Joh Vellough | 1111 - 2 - 2 - 1 - 1 - 2 | UTown | 08/12/21 |
| 10. C. W. W. 1/6 | kany willims | III Timmer (a) | City | D. 116 |
| | , | Certification of Circulator Pider | Racine WI 53402 | > |
| 1. Mike Kirchnei | , certify: | I reside at 1011 Riva Nag | (circulator's residence - include number, street, and municipality) | n and personally obtained each of |
| (name 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 d by the officeholder named in this petition. I know that each person sig | Wis Stat. § 6.03. I personally circulated this recall period the paper with full knowledge of its content on the date | e indicated opposite his or her |
| the signatures on this paper. I know that the sign | ers 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 sig to this certification is punishable under § 12.13(3)(a), Wis. Stats. | ned the babet with fair knowledge of its committee and | |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifyin | g his certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 940 |
| 2-18-12 | mike- KIM | de so | | |

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

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elect | ors of the Assembly District 63 (jurisdiction or district | et of officeholder) |
|---|---|--|---|---------------------------------|
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 of | ille Wisconsin Statutes. |
| | (name of officeholder to be recalled and office) | TATEMENT OF DEASON FOR DECALL | | |
| | S | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recall of | state, congressional, |
| (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 official | | |
| legislative, judicial, or county officials.) | of the Chinese Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Non-Your Street As election integrity, blooking I | ower prescription durin costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| lack of commitment to election integrity, blocking | ower prescription and occus, and mag- | AC NOT CHEEK THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | Γ ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | 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 |
| 111. | | | Town 11 O | Il 19/2011 |
| II. A D . AM GAM | Lhungh W GJF | 8202 Old Sons St | Gity Mt. Masah | 9/11/2029 |
| SATURATO PICOND | TUMMINI A TICOUTS | 00000 | □ Town | 1 -1 - 1 |
| 2. 1 K L + V | . Nova K. Kusters | 1443 Ramana Dr | Boly Mt. Pleasant | 2116 5050 |
| 1000 N. Mister | 2 Word a. Marie | To the Month | Town Village A A DICOSO A + | 6/10/201 |
| 3. Kouhallank | Kayn 111 Dant | 1319 N. SUMPOSUL Dr. | a city M+ Measonta | 9/19/200 |
| 1 Just an alan | romquagin | 1511 Te-Games C | □ Town □ Village | 511017 1 |
| 4. 11. | Doct heath | 1111 S. Summerset Ur. | city Kache | 3/19/2029 |
| Maskin for | C DICION CUIA | | Oline MOUPERT | 5-11-2004 |
| 5. El Dum | 500T BOX | 1100 SUMPARTSET | 200 | 0-11-200 |
| | 1 111 | = C. MISH DD | Town N+ DICa Sat | 15 19-7.4 |
| 6 French L | 11. dd 9 1022 | 199 SUMOUSE VIC | Ocity / / C | -/// 01 |
| 10.21 | 7000 | | U Town | 5/19/24 |
| 7. What 12 /1001 | Dakota Fleeger | 31 symmerset di | city IVIT Pleasant | 0///27 |
| Segman Langer | - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1.6 | Utiliage Mt Flagsof | SIAIDH |
| 1 mana Zanka 13 | Jodi Landowski | 40 Summer set Do | O City | VIIIS |
| a de la constant | 0 0 (100) | 1246 C DC | UVIIIage MY Dlack Court | 15/19/24 |
| 9 Ben Geral | Ben Goetz | 10 T 7 DUMMER SU DI | Town Aa ai | 1 1 1 |
| 1001 011 | 12 311. | 1223 - 5 | UVillage IVI+ Plant | 5/19/24 |
| WHO POTTU | 177 16412 | 11222 J SOMMERGET DK | acity 11/ //EASAVI | 17///2/ |
| 1 1/1 | | Certification of Circulator | POCINE WIE 53407 | |
| 1. Mike-Kirch | nner certify: | I reside at 101/ Rivar Arage | (circulator's residence - include number, street, and municipality) | |
| (name of circulator) | Wisconsin or a LLS citizen, age 18 or older who, if I | were a resident of this state, would not be disqualified from voting under | r Wis. Stat. § 6.03. I personally circulated this recall petition | and personally obtained each of |
| | | | med the paper with full knowledge of its coment on the date | indicated opposite int or nor |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifyin | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 941 |
| 5-19-24 | mile h | eller | | |
| (date) | (signat | ture of cfreulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | 266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is requ | aired by wis Stats 99 8.40 and 9 10. This form is prescribed by a | | | |

| TO TO THE RESERVE OF THE PARTY | | We, the undersigned qualified elec- | tors of the Assembly District 63 | |
|---|---|---|---|--------------------------------|
| TO: The Wisconsin Election Commission | 1 1 1 C 1 I I I C 1 I I I I C 1 I I I I | we, the undersigned quantied elec- | (jurisdiction or distri | ct of officeholder) |
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | o co | | |
| 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) | CONTRACTOR OF DEACON FOR DECALL | | |
| | | STATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall of | state congressional. |
| | 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 thindle the recuit of | State, congressional, |
| legislative, judicial, or county officials.) | of the Chinese Communist Barby (CCB), accompance of | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | | | |
| lack of committment to election integrity, blocking l | ower prescription drug costs, and flagrant disrespect fo | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY LICED FOR MALI | LING BURBOSES WHEN DIFFEDENT THAN A | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAIN | | 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 | | | □ Town | 2021 |
| 1. _ still | JANET MACEMON | 215 S Summorset Dr | Ocity Mt Pleasant | 15-19-49 |
| Janu War | SAIGE! TO GET THE | 2(3) 80 WW COE (1 D) | Town | 5-19-24 |
| 2, 1 221 2 | e Palso | 11252 Talla and 14 | Villege NA A D Leas A + | C2406 |
| LEMONIA | Satedis | 1255 10119 7031 1-4 | Town | 5-19-2 |
| 3. 04.46 | / / / / | 1 2 2 3 11 | Village M | 5200 |
| SAOVIV | Sofeans | 11253 Tallacoss Ly | City Cocif | 30406 |
| | | | □ Town □ Village | |
| 4. | | | City | |
| | | | □ Town | |
| 5. | | | ☐ City | |
| | | | □ Town | |
| 6. | | | □ Village | |
| | | | □ City | |
| 7 | | | □ Town | |
| | | | □ City | |
| 0 | | | □ Town | |
| 8. | | | City | |
| | | | □ Town | |
| 9. | | | □ Village □ City | |
| | | | □ Town | |
| 10. | | | Village | |
| | | | □ City | |
| 11:11 1/. | t | Certification of Circulator | Daling 11/1 531 | 102 |
| I MIKE KING | hr (certify: | I reside at 1017 NVIL NIII | Machine WI 30 | 70- |
| | 11-3/3/19 | 11 . Cd : 44 . 11 . 45 - dispublified from unting under | (circulator's residence - include number, street, and municipality) Wie Stat & 6.03 I personally circulated this recall petition a | and personally obtained each o |
| I further certify I am either a qualified elector of V | Wisconsin, or a U.S. citizen, age 18 or older who, if I | were a resident of this state, would not be disqualified from voting under d by the officeholder named in this petition. I know that each person sign | ned the paper with full knowledge of its content on the date in | ndicated opposite his or her |
| the signatures on this paper. I know that the signe | rs are electors of the jurisdiction of district represented | this certification is punishable under § 12.13(3)(a), Wis Stats | the paper with ran knowledge of the content on the annual | |
| | I support this recan petition. I am aware that haistly if | Emilia continuation is punishabit and y 1213(3)(a), State | | Page No. 942 |
| 5-19-24 | | | | |
| (date) | | ure of circulator) he Wisconsin Elections Commission P.O. Box 7984, Madison, W1 53707-7984 608-20 | 56-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Kev 2019-09) The information on this form is requi | red by wis Stats 99 8 40 and 9 10. This form is prescribed by the | THE WISCONSIN ELECTIONS COMMISSION F.O. DOX 1754, Madison, 41 33101-1764 000-20 | 3 | |

| TO: | The Wisconsin Election Commission | | West | | |
|-------------|---|---|--|---|---------------------------------|
| | (official with whom nominal | tion papers or declaration of candidacy for the office is filed) | We, the undersigned qualified ele | | |
| petition | n for the recall of | Robin Vos | G | | strict of officeholder) |
| • | | (name of officeholder to be recalled and office). | rrom office pursuant to Article XIII, Sect | ion 12 of the Wisconsin Constitution and §.9.10 | of the Wisconsin Statutes. |
| | | | STATEMENT OF REASON FOR RECALL | | |
| (The rea | son 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 officehold | No statement of reason is required to initiate the | |
| Robin V | <i>ve, Juaicial, or county officials.)</i> OS Should be recalled for his tacit support | of the Chinese Communist Party (CCD) | | 1. To statement by reason is required to initiale the recall | of state, congressional, |
| Include a | ommittee and the all and a second disposition | of the chinese communist Farty (CCF), acceptance of | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| INCK OF C | ommittment to election integrity, blocking | lower prescription drug costs, and flagrant disrespect fo | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| Тн | IE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN N | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | AMP OF TWO | |
| | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE MI | |
| | | THAT IS NAME OF BEECTORS | Rural address must also include box or fire no | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF SIGNING |
| 1. | 7110 = 1 Pro 1 91 | and a second of the second of | | Town | BIGIAING |
| - | Mary Bernel & | eiss MARYBERNAL-GESS | 5727 combridge Cin. | City MT. Plean | C-31-20 |
| 2. | - house des | 1080100 (2000) | 28/2) E Nobala (1) | Town al | 02/ 3/1 |
| - | TUDS: CE | UCOSICA CERSIR | COUTE PEDDU CIV | Village Sturteuant | 15-61-69 |
| 3,:: | | 6 | 767 - 7 0000 | □ Town | |
| | | man moon | 2875E PESSIECI, | City Thy to dean L | 15-21-24 |
| 4. | BOX GAX | Des Il Schulk | | Drown a Starto la la t | 1 |
| | TOUN SENUS | hegina schulty | 8600 Citadel Ter | Odlilage Rache | 15.21.24 |
| 5 | Sarry Harala | Sandy Henrichen | 8600 (priporate DING) | Town Village A3/Qh | 5-21-24 |
| 6. | Doc Heama | 9 . (| Corporate | O Town | |
| | | Porce therman | Tras Corpior atte | Ocity Mt (2 Cle sout | 5-21-27 |
| 7. | 70_ | Meghan Schoen | True and case of | □ Town | |
| - 6 | | Transacriour | 7411 old spring st | City Mt. Pleajar4 | 5-21-24 |
| 8 | ` | | • | □ Town | |
| - | | | | ☐ Village ☐ City | |
| 9. 🖫 | · | | | □ Town □ Village | |
| | | | | ☐ City | |
| 10. | | | | □ Town | |
| | | | | ☐ City | |
| т | Milla 1/ sai | . 1001 | Certification of Circulator | N | 09W 31 M |
| 1, | /VIVE (name of cheulater) | certify: I r | | Racine WI 5 | 3402 |
| I further o | ertify I am either a qualified elector of V | Visconsin, or a U.S. citizen, age 18 or older who, if I we | ere a resident of this state, would not be disqualified from voting under to | tenediater's residence - include number, street, and municipality) | |
| the signat | ures on this paper. I know that the signer | s are electors of the jurisdiction or district represented l | ere a resident or 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 nunishable under 8.12.13(2)(a). We see the | Wis. Stat. § 6.03. I personally circulated this recall petition and the paper with full knowledge of its content on the data. | and personally obtained each of |
| name i k | now their respective residences given. I | support this recall petition. I am aware that falsifying | bis certification is punishable under § 12.13(3)(a), Wis. Stats. | and paper with rain knowledge of its content on the date if | ndicated opposite his or her |
| | 5-01-04 | White K. | ichnen | | Page No. 943 |
| L-170 (Rev | (date) 1 2019-09) The information on this form is require | (signature | of circulator) | | _ 070 |
| , 11 | | 3 3 and | of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | -8005 web: http://elections.wi.gov email elections@wi.gov | |

| | | . We, the undersigned qualified elected | ors of the Assembly District 63 | |
|---|--|---|---|---|
| TO: The Wisconsin Election Commission | | | | t of officeholder) |
| (official with whom nomination | n papers or declaration of candidacy for the office is filed) | c - Gas surguent to Article XIII Section | 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| petition for the recall of | Robin Vos | from office pursuant to Afficie Affi, seeken | | |
| • | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | Catata announcesional |
| | D and 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 reason for recall must be stated on petitions f | for city, village, town, and school district officials. The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder. | | |
| legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support of | of the Chinese Communist Party (CCP), acceptance of to | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | the days and flagrant digreenent for | his own constituents by calling them "whack-jobs, morons, and latets." | | |
| lack of committment to election integrity, blocking in | ower prescription drug obeto, and angular | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE | ME OF THE MUNICIPALITY OF RESIDENCE MUS | Γ ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUPPLIED. | MUNICIPALITY OF RESIDENCE | DATE OF SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate roun, cry, t | 4 A A |
| SIGNATURES OF ECCUTION | | -0.11 | Ovillage M+ D/ | May 2 2 |
| 1 1 2 | Span Nuive/ | 2/35 Newman Road | a city 11. Flansky | 111111111111111111111111111111111111111 |
| 16hal | Jesti Dwy | 25112 1111 | Stown M P/ | 11/2 10 1/24 |
| 2 ~ 5 | Tra Minke | 2592 Wyntield Wie. | ocity 11. Jersm 7 | 1000 |
| I A'N | 1019 10 18:30 | TOO I ALL I VIAL TEV | Grown MI Plan 2011 | NA 00 / 2 2-25 |
| 3. Marca / May VOV | LIGATOR OPGERUIL | (B) I WIND FOR WAY TO | city IT, THOTUN' | 114/ |
| TOURS COUNTRY | an and | 1 1 1 | Town Village MA+ Place Script | Ma422-24 |
| 4000 | Michello Hanson | 15719#3Cambridge LA | Octy Mt PleaSant | 11/100 / 200 |
| Thelle Hanse | M 1. (Chelle 1) allow) | 0 0 | Town | 15/22/24 |
| 5 M. 25. 1.0 | Corcas Sankal | 114310 Marina Dr Stw | city TWHEVANT | 312-11 |
| " Come share | Carrie Since | | Town Village A A cond A Long at | |
| 6. 12 11 111 | Michael Scholme | 15617 canboracional | city /Vlount placent |)1/2/1/20 |
| 0 20 | MICHAEL SCHOOL | 1 - Camping | Willage MA Place T | 1 /22/24 |
| 7. 2. 1/24 | N V P + | 4942 Indian Killette. | Dity 177 1186566 | 2/22/24 |
| my | Marketala | 111217 | Town | 7. |
| 8. | Jack Bala de Grand | | □ Village □ City | |
| 0. | 3000 3000 C | N A (| Town St As 1 + | 15/27/174 |
| 9. C. Y. W. int | 1 WILL ST | 12121 90745+1 | Ocity OTUTEVan | 12/4/01 |
| C'UGI INJORNO | and Hamo | 7 | ☐ Town | 1.E |
| 10. | 12 Jidh LUSON/Sire | | □ City | |
| 10. | 2011 1 3 3 3 | Certification of Circulator | 1200 | |
| | | | 1 UC 2000 | |
| i, John Loom | | Aota | (circulator's residence - include number, street, and municipality) | and personally obtained each o |
| (name 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 by the officeholder named in this petition. I know that each person sign this certification is punishable under § 12.13(3)(a), Wis. Stats. | ned the paper with full knowledge of its content on the date | indicated opposite his or her |
| the signatures on this paper. I know that the sign | ners are electors of the jurisdiction or district represente | ed by the officeholder named in this petition. I know that each person signature of ficeholder named in this petition. I know that each person signature is purishable under 8 12 13(3)(a). Wis. Stats. | nou me paper marianta | |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsily | ng this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 944 |
| Ma. 171 0 - 24 | 10/10/ | | | |
| (date) | (sign | ature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | 66-8005 web: http://clections.wi.gov email elections@wi.gov | |
| E1 170 (Pay 2010-00) The information on this form is red | uired by Wis Stats 99 8 40 and 9 10. This form is presented by | | | |

-VX

| TO: The Wisconsin Election Commission | | RECALL PETITION | | |
|--|--|---|--|------------------------------------|
| | ation papers or declaration of candidacy for the office is filed) | We, the undersigned qualified ele | ectors of the Assembly District 63 | |
| petition for the recall of | Robin Vos | | (iurisdiction of | or district of officeholder) |
| | (name of officeholder to be recalled and office) | from office pursuant to Article XIII, Sect | tion 12 of the Wisconsin Constitution and §.9. | 10 of the Wisconsin Statute |
| Nobilit vos siloulu de recalleu for fils tacit suppor | s for city, village, town, and school district officials. The | STATEMENT OF REASON FOR RECALL the reason must be related to the official responsibilities of the officehold 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 fo | or his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN I | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | NAME OF THE MUNICIPALITY OF RESIDENCE | MUST ALWAYS BE LISTED. |
| PRI | 10.01=0 | Rural address must also include box or fire no. | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF SIGNING |
| 1 /1 /2 | Peter R. Little | 626 Westlawn Av | Town Village RACINE | 5-22-2 |
| 2 Leite Doy | Keith Dorey | 9333 Con: fer Ct | □ Town □ Village ♣City A C | 6-12-26 |
| 3. Jul lle | LEY Schafzman | 2828 Rurkshire Jr | O Town Village City | 5-22-5 |
| 4. Buffy Devall | Buldy DUVATI | - 6736 NONTANGENTERNAUL | O Town | 7. 29.21 |
| W BOOM 5 | Morey Wells | 10419 Caty En | O Town Q Village College Colle | 5-22=2 |
| 6. LINDA ZUNGA | Linda Jungo | 1501 WRIGHT ANE #207 534 | Town Village Picity ACIVE | 5/22/24 |
| 1 Almoprie | Alicia Prozzolo | 2530 Ralling Relds | O Town O Village O City Mt. Pleasa M | 5/22/24 |
| 8. GANA | ANTHONY NSSIXCO | 7551 Rolling Fields | □ Town □ Village □ City | 3/22/TV |
| 9. | KERNIT THEOLOG | 4522 COPPLESTONE DA | D Town A Village City A Company of the Company o | Stroke |
| 10. Merky Fr | Michael Guzmay | 4019 Lasalle set | O Town O Village Racine | 5/22/21/ |
| 1, | ~ | Certification of Circulator | 1 1000 | 17/26/24 |
| (name of circulator) | , certify, i | | 11gton UC, 20002 | |
| the signatures on this paper, I know that the signer name. I know their respective residences given. I | Visconsin, or a U.S. citizen, age 18 or older who, if I was are electors of the jurisdiction or district represented a support this recall petition. I am aware that falsificing | 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. | Vis. Stat. § 6.03. I personally circulated this recall petitic detection with full knowledge of its content on the date. | on and personally obtained each of |
| My 22, 2024 | | this contribution is punishable under 8-72.13(3)(a), Wis. Stats. | | |
| L-170 (Rev 2019-09) The information on this form is require | st by Wis State 56 8 40 and 9 10 Thin 6 | of circulator) | 1 | Page No. 945 |
| The shift | 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 - | |
| Sept of the sept o | | | (| 5: |
| W. Live | | | | 75.0 |

| | | RECALL PETITION | C. A. Accomply District 63 | |
|---|--|---|--|----------------------------------|
| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elected | ors of the Assembly District 65 (jurisdiction or dist | rict of officeholder) |
| (official with whom nomination | n papers or declaration of candidacy for the office is filed) | and A. P. L. WIII Continu | n 12 of the Wisconsin Constitution and §.9.10 o | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the wisconstit Constitution and §.5.70 o | |
| | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on petitions f legislative, judicial, or county officials.) Robin Vos should be recalled for his facit support o | or 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, |
| lack of commitment to election integrity, blocking to | ower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | A STAN OF BEGINENCE MU | ICT ALWAYS DE LISTED |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MU | DATE OF |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| 1. 0 4 | Λ | 7+40+evant, W1 53177 | Drown Sturtwart | 5/11/24 |
| 2 | Tan Cango | 3048 93 rd | DVIIIage Sturterant | 5-11-24 |
| 3.7 10 | Zach Browners | 3073 9313 St | avillage Sturtetant | 5-11-24 |
| 4 Al Rose | Modison Roggino 15 | 2133 931d St | Drown Sturtevant | 5-11-24 |
| MACON DO M | lossiche 7ahn Caid | 9224 Durand Ave. | Dallage Stylevant | 5-11-24 |
| Sandra Fleischer resser | Pandra Fleischfresse | 2929 93 ⁻⁹ St. | evillage Startevant | 5-11-24 |
| 7. 10 | 5' Lephon (Nost Rall | 2917 93 rd St. | orown ovillage Sturkvant | 5-11-24 |
| 8. Reple Moran | Renee Moran | 15941 Durand Ave Lotale | Down Solvillage City ORKUILLE | 5-11-24 |
| 9. Welly Moran | Kelly MORAN | 15941 Durand Ave CoT21e | Orkvillage 40 rk ville | 5-11-24 |
| 10. Januar Shahl | Jennicer Schesvold | 15941 Durand Are Lot lebe | U Town U Village U City Towlerille | 5-11-24 |
| 400 J 2000 | 0.6 | Certification of Circulator 15377 | 1 17th St. Pheous | (Az BO) |
| I, IDIVA LOU (name of circulator) | | reside at | (circulator's residence - include number, street, and nunicipality) Wis. Stat. § 6.03. I personally circulated this recall petitio | n and personally obtained each o |
| | | | ned the paper with full knowledge of its content on the date | a maicated opposite his of her |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 946 |
| 5.11.2024 | | O CC | | |
| (date) EL-170 (Rev. 2019-09) The information on this form is requ | (signati ired by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by th | ure of circulator) ie Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | 66-8005 [web: http://elections.wi.gov email: elections@wi.gov | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec- | ctors of the Assembly District 63 | |
|--|--|--|---|--------------------------------|
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | ict of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Secti | ion 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 | reason must be related to the official responsibilities of the officeholde | हर, No statement of reason is required to initiate the recall o | f state, congressional, |
| legislative, judicial, or county officials.) | of the Chinese Communict Darty (CCD), constants of t | vice from the OOR failure to exchant this country to the OOR | | |
| Hobin vos snould be recalled for his tacit support of | if 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." | | |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | 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 |
| "Runz Durke | DENNIS DURKEL | LOPSIC UNION GROVE, W | City Vollage Volland GROVE WAR | 5-11-24 |
| 2. | Jereny Hulting | WYSS CEREK RD | Prown Village Dela 1911 WI | 5-11-24 |
| 3.4 | 1 1 1 1 1 1 1 1 | - y | □ Town | |
| 3. 6 | | | D Village | |
| 1 | | | □ City = □ Town | |
| 4 | | | UVIIIage | |
| | | | □ City | |
| 5 | | | □ Town □-Village | |
| | | | □ City | |
| 6 | | | D-Town_ | |
| 3 | | | □ Village | |
| 2 | | | □ Town | |
| | | | UVIIIage | |
| | | | □ City □ Town | |
| . 8 | | | © Village | |
| | | | □ City | |
| 9. | | | □ Town | |
| | | | □ City | 1 |
| 10 | | | □ Town | |
| | | | □ City | |
| | | | 1 d city | |
| I, Motralcun | certify: I | Certification of Circulator (5872) | N 18th St. Phoonix A | C60285 |
| | Visconsin, or a U.S. citizen, age 18 or older who. if I w | ere a resident of this state, would not be disqualified from voting under | Wis. Stat. § 6.03. I personally circulated this recall petition a | nd personally obtained each of |
| the signatures on this paper. I know that the signer | s are electors of the jurisdiction or district represented | by the officeholder named in this petition. I know that each person sign this certification is punishable under § 12.13(3)(a), Wis. Stats. | ned the paper with full knowledge of its content on the date in | dicated opposite his or her |
| 5.11.2024 | | Receive | | Page No. 947 |
| | | | | |

(date) (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 |

| To The Wissers in Floation Commission | | We, the undersigned qualified elected | ors of the | Assembly District 63 | |
|---|--|---|-------------------------------|---|--|
| TO: The Wisconsin Election Commission | on papers or declaration of candidacy for the office is filed) | | | (jurisdiction or district | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the | Wisconsin Constitution and §.9.10 of t | he Wisconsin Statutes. |
| petition for the recail of | (name of officeholder to be recalled and office) | | | | |
| | S | STATEMENT OF REASON FOR RECALL | No statamar | nt of reason is required to initiate the recall of | state, congressional, |
| (The reason for recall must be stated on petitions to | for city, village, town, and school district officials. The | reason must be related to the official responsibilities of the officeholder. | NO statemen | ii oj reuson is required to minute the recurso, | , |
| legislative, judicial, 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, | | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots." | | | |
| | | | ME OF THE | MUNICIPALITY OF RESIDENCE MUST | ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE | INIE OF THE | MUNICIPALITY OF RESIDENCE | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no. | | Indicate Town, City, or Village | SIGNING |
| 1. Lyne Colm | Lynne Carlson | 3043 93rd St Sturtevant WI | Village City | Parter Sturtevant | 5/12/24 |
| 2. lysar lul | Justin Shook | 3043 93rd St Sturtwart WI | ☐ Town ☑ Village ☐ City | Studevant | 5/12/24 |
| 3. | JUSTIN BIBIAN | 3589 93re ST STUNTENMET NI | U Town U Village U City | STURTENANO | 5/12/24 |
| 4 hech Pendy | Zach Paulson | 3140 93rd St Sturkevant | ☐ Town ☐ Village ☐ City | Sturterant | 5/12/24 |
| 5. Lelesa L. Dillud | Telesa Dillard | 9209 Corolando Stulos | □ Town /□ Village □ City | Stutowart | 5/12/24 |
| 6/ Nelsof | Conner patton | 365 offs st | □ Town □ Village □ City | Sturtevast | 5/12/29 |
| 76 ary it Hentrillon | Bany W. Hendrickson | 3020 95 th St. | □ Town □ Village C □ City | iturterant | 5/12/24 |
| 8 MOMANO STONE | YNDINET NEWS | 3029 95th St | ☐ Town ☐ Village ☐ City | Sturtavant | 5/12/24 |
| 9/1/1/1/ //nw | Josh Neven | 347 S. Fancher Rd. | ☐ Town ☐ Village ☐ City | M+ Measunt | 5/12/24 |
| Howen Boxle | Kathryn Boxlar | 9032 Boys Dr. | Town Solition | Sturtevant | 5/12/24 |
| Certification of Circulator 15872 N 18+5 St Phooning & 800 | | | | | |
| the gionatures on this paper. I know that the signe | ers are electors of the inrisdiction 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. 8 6 | residence - include number, street, and municipality) 03. I personally circulated this recall petition ar with full knowledge of its content on the date in | nd personally obtained each o dicated opposite his or her |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | g this certification is punishable under § 12 13(3)(a), Wis. Stats. | | | Page No. 948 |
| (date) | (signat | ure of circulator) | c poor hugh. This | - Waterfield the mail omeil: elections@uri gov | |

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

| TO: The Wisconsin Election Commission | | RECALL FEITHON | | |
|---|--|---|---|---|
| 7.7 | tion papers or declaration of candidacy for the office is filed) | We, the undersigned qualified elec | ctors of the Assembly District 63 | |
| petition for the recall of | Robin Vos | £ | | trict of officeholder) |
| | (name of officeholder to be recalled and office) | | on 12 of the Wisconsin Constitution and §.9.10 of | of the Wisconsin Statutes. |
| (The reason for recall must be stated on petitions legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support | s for city, village, town, and school district officials. The | STATEMENT OF REASON FOR RECALL ereason must be related to the official responsibilities of the officeholde. It is from the CCP, failure to protect Wisconsin farmland from the CCP, | r. No statement of reason is required to initiate the recall | of state, congressional, |
| 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 | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | AME OF THE WILLIAM | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | MUNICIPALITY OF RESIDENCE MU MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | ST ALWAYS BE LISTED. DATE OF SIGNING |
| MARITTA SPEAR | Marieth Spear | 9016 BOYS DRIVE | privilage STIGRT EVANT | 5-12202 |
| 2. Yell 2 | Lee Spear | 9016 Boxs Brive | Town StyrteVant | 5-12-202 |
| 3 John Brodle | Jodi Brodlo | 9208 Broaduay Sr | Orive Stutevant | 5-12-200 |
| * Judet Geller | Judith Jakeb | 9208 Broad way Dr | O Village Sture Vant | 5-12-204 |
| 5. Palp | Jamaire Hans | 9116 Broaway DR. | Ulliage Stateway | 5-12-20 |
| 6. | Heidi Muchlenber | 3025 94 m St | O'Town O'Village Stutevast | 5-12-24 |
| 7. 4 mylike the wingers | Ang the locking we | 3224 90th sk | U Town U Village City Skyrfe Veil | 5112,2024 |
| 8. Jeel Colt | Zertho CoHINGLE | ~ 934 fliconeach | Village Stunta non | 9,0,0024 |
| 9) Jantes | 12 | 934 Floring Piste | Willage Stort of the St | 5/12/14 |
| 10. Davd Ly | David lex | 9354 Florence Drive | Sturdant City Sturdant | 5/12/all |
| I, Morra Rou | certify: I r | 100 | J 18th of Pheorie | -6028 SAX |
| I further certify I am either a qualified elector of V the signatures on this paper. I know that the signer name. I know their respective residences given. I | Wisconsin, or a U.S. citizen, age 18 or older who, if I we are electors of the jurisdiction or district represented I support this recall petition. I am aware that falsifying | ere a resident of this state, would not be disqualified from voting under W by the officeholder named in this petition. I know that each person signe this certification is punishable under § 12,13(3)(a), Wis. Stats. | (circulator's residence - include number, street, and municipality) Vis. Stat. § 6.03. I personally circulated this recall petition a d the paper with full knowledge of its content on the date in | nd personally obtained each of dicated opposite his or her |
| 54/2/029 (date) | Signature | of circulator) | | Page No. 949 |
| Incide (Nev 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 | |

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

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec- | tors of the Assembly District 63 | | |
|--|--|--|---|-------------------------|--|
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or 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) | | Ü | | |
| 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, | | | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots." | | | |
| | | | | | |
| THE MUNICIPALITY USED FOR MAI | 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 | |
| 1.0 | 7 11. | A = 100 = 1 | □ Town | / (O | |
| 1) auga duduace | 1) QUIN LINGUNG | 19754 Horaca Call | City H LEVANT | 71/21:14 | |
| 2 | | 03 | □ Town | 201 | |
| 1 Hence com | EXIDAGO DOPES | 9340 Florence INC | Ocity Surverlant | 5-12-34 | |
| 3/10 5/10/11 | 1/20/100 | (1/12/0 | □ Town | | |
| INDUIC NOWINGS | 1-10000 | 144 LY XEMISAND | City COC | 5-17-24 | |
| the sales Bake | | 9212 #1 | □ Town | C+1- 101 | |
| THI MININE SELFI | Marenia Baker | 1010 Florence Dr. | ocity Terrament | 2/14/21 | |
| 5. f horal onto | 11150 010 110 | 99115 Large Na | □ Town □ Village | 5-1776 | |
| Cow Cours | Chriscochi Um | 1210/10/00 CC DI | acity S/VITEVER | 1/2/ | |
| 6. 1101 Me 1 1 1 1 1 1 | Connel Cochrum | 97(0 F10Ca nC | O Town | 5-12:01 | |
| aron en | Conver Commen | 1 do rolence 111. | Town City 11017 CV GAD | 1 (2/24) | |
| 7 Mande Coleman | Mardi Cochrum | Main Florence Iv. | U Village | 5/12/24 | |
| The Caroline | THAT THE COURT OF THE | TOTO THOUSE DI | Town O | 0110109 | |
| 8 / 2 in M. Call | Cain Cool | 9208 Florence Dr. | □ Village \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 5/12/22 | |
| | Ou Cor | TACE THE PICE DI. | Town 2 | 0/12/24 | |
| 1 innuary | Tamira distues | 9002 Florence DR | Octive Sturfe cant UT | 5/12/04 | |
| 10. | 14114100 11020-0 | Occident la | □ Town | -1 1 | |
| | \sim | 4000 HOVEMED UP | City Sturtward UL | SUPPO | |
| Certification of Circulator, = 27 x 1 2th (10) | | | | | |
| I, 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | | | |
| (circulator) (circulator) (circulator) (circulator) residence - include number, street, and municipality) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of | | | | | |
| the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this polition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her | | | | | |
| name. I know their respective residences given. I | support this recall petition. I am aware that falsifying | this cartification is punishable under § 12.13(3)(a), Wis. Stats. | | | |
| 5.12.2020 | | 1 Com | | Page No. 950 | |
| (date) | | e of circulator) | BOOK I I Emplify the Company of the | | |
| zer i o (i co i zo i z o z) i ne iniormation on una form la require | en on this cierce 38 of the min a to this found is blescuped by the | Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | -8005 [web: http://elections.wi.gov email: elections@wi.gov | | |

| TO: | The Wisconsin Election Commission | | We, the undersigned qualified elec | ctors of the Assembly District 63 | |
|-----------|--|--|---|--|--------------------------------|
| - | (official with whom nomination | on papers or declaration of candidacy for the office is filed) | o, the analysighed qualified elect | | trict 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 o | -, |
| | | (name of officeholder to be recalled and office) | STATEMENT OF DEACON FOR DECALL | | |
| (The rea | 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, | | | | |
| icgistuu | ve. maiciai, or county officials. (| | | ta No statement of reason is required to initiate the recall t | of state, congressional, |
| Robin V | os 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," | | |
| T | TE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | AME OF THE MUNICIPALITY OF DESIDENCE MU | ST ALMANO DE LIGERO |
| | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATE OF |
| | A STORES OF EDDE TORS | TRINIED NAME OF ELECTORS | Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| 1. | for Bons | James Barnes | 77 45 Big pink Longe | Town O Village O V L | 5-13-2024 |
| 1 | Juna Heart | Danetrantz | 7932 Lake Store ho, | O Village Bullsaton | 5-13-2024 |
| | hay M. Fr | Traw M. Ferguson | 8106 MonRue | or town or will by with the will be with | 35 143 20 AL |
| 4.7 | Vichelle Ferguson | Michelle Ferguson | 8106 ManRoE | Ovilage But Welon (1) | 5-13-2026 |
| Ś | town B Weeks | Steven Blever | 32919 MARLE GROVE DR | O TOWN O VIllage O City RURL(MYSTON) UST | 5/13/24 |
| 6.4 | ne | James aboden | 34 18th Ave Pot | O Village Union Grave a | 5/13/24 |
| 7. Z | Towns metodo | Lori metate | 308 18th Ave Apt 7 | □ Town □ Village □ City Create | 5/13/24 |
| 8 | | | | □ Town | |
| V2 | | | | ☐ Village | |
| 9. | | | | □ Town | |
| | | | | U Village | |
| 10. | | | | ☐ City | |
| 10. | | | | UVillage | |
| | | | | □ City | |
| ı, | Joseph Kosmick | certify: 1 | Certification of Circulator reside at Ch. Ch. Ch. | Vista, Ca 91910 | |
| I further | (name of circulator) | Vicenzaio es al IS altino en 18 a 14 de 19 | - | TO SERVICE OF THE SER | |
| the signa | tures on this paper. I know that the signer | s are electors of the jurisdiction or district represented | ere a resident of this state, would not be disqualified from voting under the | Wis. Stat. § 6.03. I personally circulated this recall petition a | nd personally obtained each of |
| name. I | know their respective residences given. I | support this recall petition. I am aware that falsifying | by the officeholder named in this petition. I know that each person signs this certification is punishable under § 12.13(3)(a), Wis. Stats. | ed the paper with full knowledge of its content on the date in | ndicated opposite his or her |
| | 5/13/24 | TI, | sino controlled is pullishable under § 12.15(5)(a), wis. Stats. | | D V 054 |
| | (date) | (rignahun | c of circulator) | | Page No. 951 |
| | ` ' | (signatur | or or or or or or | | |

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

| | | RECALL PETITION | lactors of the Assembly District 63 | |
|---|--|--|--|---------------------------------|
| The Wissessia Florian Commission | | We, the undersigned qualified e | lectors of the | ict of officeholder) |
| O: The Wisconsin Election Commission (official with whom nomination | papers or declaration of candidacy for the office is filed) | Goo purguent to Article XIII. Se | ction 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| etition for the recall of | Robin Vos | from office pursuant to Atticle 2001, 50 | • | |
| etition for the recall of | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeho | older. No statement of reason is required to initiate the recall of | f state, congressional, |
| | or city village town and school district officials. The | reason must be related to the official responsibilities of the officend | idel. 140 statement of reasons 1 | |
| gislative, judicial, or county officials.) | 4 the Chinage Communist Party (CCP), acceptance of tri | ps from the CCP, failure to protect wisconsin formand in our | | |
| ck of committment to election integrity, blocking in | ower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots. | " OF DESIDENCE MI | ST ALWAYS BE LISTED. |
| 01.01.00 | DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE STREET & NUMBER OR RURAL ROUTE | E NAME OF THE MUNICIPALITY OF RESIDENCE | DATE OF |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | STREET & NUMBER OR RURAL ROUTE | Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box of the no | □ Town | 5-18-24 |
| Dimi | Josh Dewoes | 1416 Groves In | arcity Union Grove | 24 |
| Soon sures | <u> </u> | : 15 0 | Town Union Grove | 5-18-201 |
| 701 | (=5 tvo | 126 13+7 Ave | 2009 | |
| peror | 20421 | \$12613+4 AUE | □ Town □ Village | 5-18-20 |
| · dea | Andrea Torres | #12613 AUG | Town | E 100 711 |
| 1 00 | ~ 1 .01 | 361 MIL Ave | City GASON GROVE | 78.550 |
| John Hooghes | Juha Mooreheet | 381 / 141 /100 | □ Town ↓ ↓ | <.12.7U |
| 5. 1 1 | Vivian Tranberg | 363 MIII AVE | dicity (Mion Crove | 3100 |
| · hum home | VIVIORI ITARRA | , , , , , , , , , , , , , , , , , , , | ☐ Town | |
| 5, | J | | ☐ City | |
| | | | □ Village | |
| 7- | | | City | |
| | | | □ Town □ Village | |
| Ru se - | | | □ City | |
| *// * | | | ☐ Town | |
| ^ | | | □ City | |
| 9. | | | □ Town | |
| | | | □ Village | |
| 10. | # 5 5 S S S S S S S S S S S S S S S S S | | O City | |
| | | Cartification of Circulator | VE/BATAVIA, IA 52533 | |
| 2011 | 11 -0 | Certification of Circulator I reside at 1877 FRANCIO OD A | (circulator's residence - include number, street, and municipality) | |
| DOUG BRIC | REIZ certify: | | ti talahin manili natiti | on and personally obtained eac |
| (name of circulator) | and the second of the second o | were a resident of this state, would not be disqualified from voting | under Wis. Stat. 9 0.03, I personally encounted this remaining the day | te indicated opposite his or he |
| further certify I am either a qualified elector of | f Wisconsin, or a U.S. citizen, age 18 of older wild, 11 | were a resident of this state, would not be disqualified from voting bed by the officeholder named in this petition. I know that each persent the state of the st | on signed the paper with full knowledge of the | |
| ne signatures on this paper. I know that the sign | ners are electors of the jurisdiction of district represent | were a resident of this state, would not be disqualified from voting and by the officeholder named in this petition. I know that each persong this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 952 |
| ame. I know their respective residences given | 1 support uns recan petition. Tambén de la constante de la con | 'a i'a | | |
| -40 | | | anail elections@wi gov | |
| (date) | (Sign | the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 web: http://electrons.wi.gov | |
| -170 (Rev 2019-09) The information on this form is req | juired by Wis Stats §§. 8.40 and 9.10. This form is prescribed by | ature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 | | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elected | ors of the Assembly District of (jurisdiction or distric | et of officeholder) |
|--|--|--|--|--|
| (official with whom nomination | n papers or declaration of candidacy for the office is filed) | | | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 of | |
| | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | |
| | a | TATEMENT OF REASON FOR RECALD 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 reason for recall must be stated on petitions to legislative, judicial, or county officials.) | for city, village, town, and school district officials. The | reason must be rounted to the COR | | |
| Robin Vos should be recalled for his tacit support of | of the Chinese Communist Party (CCP), acceptance of to | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| leak of committeent to election integrity, blacking I | ower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | T-11/6/W |
| | THE PURPOSES WHEN DIESEDENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | | | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no. | Town | Ť r |
| 1. Penn | CHELVADURA BASKARA | 6130 poloma place . 53406 | Octy RACINE Pleasant) | 5/13/24 |
| 2. | T 100 1 2-1 | (0100 Potomac Place 53406 | Unilage MT Pleacant | 5/13/24 |
| 3. Joan M. West | Joan M West | ESTEL Interdesional | O Town City M P (callout) | 5/13/24 |
| 4 | William Schill | 7531 Relinatoild D | O Town O Village O City O City | 5/13/24 |
| 1 hans since | Maried Solling | 2601 Rolling Fields | O'VIllage MT PIRASOLOT | 5/13/24 |
| 5. | LISACISODO | 21 21 R.D. Colleto- | Town of the sant | 5-13-24 |
| 67/10 Ch | Nate Vinan | 1621 Maling Field | Town Village M. A. C. | 5/13/24 |
| 7 Josephone | Jordyn Silominer | 4715 Indian hills ar | Town | = 17 / 26/ |
| 8. Cole | Fr. C Villaldoos | 4709 Indian hillsor | City MT pleasant | 5/13/27 |
| 9 L-HI Smith | Transthy E. Smith | 4830 Indian Hills Dr. | Ocity Mt Pleasant | 5/13/24 |
| 10. J. | Dakota T Burrorghs | 4800 Indran H1/15 DE. | orty M+ Pleasont | 5/13/24 |
| Parose Vol | Pri-10/2 4. | Certification of Circulator | 1: 11 P -1 AP 70717 | ξ. |
| . Catherine Jus | Shop certify: | I reside at 16970 Rations Rat | (circulator's residence - include number, street, and municipality) | 1 |
| (name of circulator) I further certify I am either a qualified elector of | Wisconsin, or a U.S. citizen, age 18 or older who, if I | were a resident of this state, would not be disqualified from voting under d by the officeholder named in this petition. I know that each person signs this certification is punishable under § 12.13(3)(a), Wis. Stats. | Wis. Stat. § 6.03. I personally circulated this recall petition red the paper with full knowledge of its content on the date | and personally obtained each of indicated opposite his or her |
| the signatures on this paper. I know that the sign | ers are electors of the jurisdiction or district represente | ing this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No 953 |
| name. I know their respective residences given | 1 support tills recair petition 1 am and and | horain histo | | 1 450 1100 900 |
| (date) | (signa | | 066-8005 lweb: http://elections.wi.gov.lemail:elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is requ | uired by Wis, Stats, §§, 8.40 and 9.10. This form is prescribed by t | uture of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | Moreover Insert and In | |

| | | RECALLIFITION | Cut. Accombly District 63 | |
|---|---|--|---|--|
| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elect | ors of the Assembly Blatter of (jurisdiction or distri | ict of officeholder) |
| (official with whom nomination | n papers or declaration of candidacy for the office is filed) | A A A WILL COAL | n 12 of the Wisconsin Constitution and §.9.10 of | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the wisconstit Constitution and 35 | |
| - | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | | s . |
| | S Tho | rescon must be related to the official responsibilities of the officeholder, | No statement of reason is required to initiate the recall o | f state, congressional, |
| (The reason for recall must be stated on petitions for | or city, village, town, and school district officials, The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder, | | |
| legislative, judicial, or county officials.) | f the Chinese Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | to and the sent disrespect for | his own constitients by calling them "whack-jobs, mororis, and relote. | | |
| lack of committment to election integrity, blocking it | ower prescription drug occup and age | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | ST ALWARD BE LISTED. |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE IS | MUNICIPALITY OF RESIDENCE | DATE OF SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | indicate form, etty, tr | 1 Sidiking |
| Sidilities of 2 | 1/1/ | | Town Village | 1031,12U |
| 1 hearstra homes | VI III | 10 46 Jackson pl | Ochy William fleason | a //14 1 |
| THEORGAN THOMAS | 10.11000 | | D Town | No. |
| 2. \ | 1 20 | Property of the second of the | - OCIV | 1 1 7 |
| DI THEY THE | TOPOTHY -CE | 1 Total | Town O 1 + D | 10/24) |
| 3. | | 079 | Jun 1 1 200 7 4 1 | |
| | | 01/12 | □ Town | |
| 4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | July 2 | 1 1/4 2/ |
| | f f 1 1 | Trakeri Dare | O Town | 5/14/1624 |
| 5. (x)C/111 / 1/100 | LI LIIA | 1108 merson Fince | City MT/4 (VU SC | 1 710 |
| 201 2 101 W OCITE | 1000 | 1725 1 101 | Unitage 200 1 D | # t= 14-22 |
| 6. | 1) writty / l | 1099 Jackson | OCHY 91/7 IT LEGGAVI | 49/1 |
| A DONO INVA | 400 | 1000 | Town In I Town | |
| 1. | 10 | TOCCIC ENCE | Town | |
| | 5 | 2000 1 11/1/20 | □ Village K | 15-14-23 |
| 18. Philocia Dat | 1 PHYLLIS GOTT | 3810 Lincoln Village | City / / C | 3 3 3 4 |
| 1000110 | | TECH M | Uvillage 1001 1 1000 Com | 5-14-28 |
| 2 Story (A) MAD | Stanley A Dover | 5829 Margery Drive | City / Trues | |
| Carry VI A 1000 | 10011 | 7 | □ Village ~ ↓ ○ \rac{1}{2} C \rac{1}{2} | 4 5-14 W |
| 10. | Julie Chm | 4 2 y langery | To city M | |
| A 14.00 | Violen | Certification of Circulator | 1 Raisos Rd. LR. AR | 72215 |
| T L'A HUGU | 0 11560 certify: | I reside at | (circulator's residence - include number, street, and municipality) | - 11 - hteined each of |
| (name of circulator) | THE sitings age 18 or older who if I | were a resident of this state, would not be disqualified from voting under the officeholder named in this petition. I know that each person significant the contract of the co | r Wis. Stat. § 6.03. I personally circulated this recall petition | n and personally obtained each of e indicated opposite his or her |
| I further certify I am either a qualified elector of | ers are electors of the jurisdiction or district represente | were a resident of this state, would not be disqualified from voting under the by the officeholder named in this petition. I know that each person signs this cartification is punishable under § 12.13(3)(a), Wis. Stats. | gned the paper with full knowledge of its content on the date | |
| name. I know their respective residences given | I support this recall petition. I am aware that falsifying | ng this cartification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 954 |
| 5-14-1 | 1 matterium | - Clarino | ä! | |
| (date) | (signa | sture of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608- | 266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev.2019-09) The information on this form is requ | uired by Wis Stats §§ 8 40 and 9 10. This form is prescribed by | The Misconsin Diecoris Commission | | |
| | | | | |

| We, the undersigned qualified referrors of the Missemany Losson Constitution of candidacy for the office is filled. (jurisdicine) (jurisdic |
|--|
| TATEMENT OF REASON FOR RECALL To 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, stating, judicial, or county officials. In committee the recall of state of support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, in considerate the textile support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, in constitution that the recall of state, congressional, stating, principles of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, in constitution to election Integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents by calling them "have-chiese, the constitution of the CCP, in constitution integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents by calling them "have-chiese, the constitution of the CCP, in constitution integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents by calling them "have-chiese, the constitution of the CCP, in constitution integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constitution of the CCP, in const |
| (came of officeholder to be recalled and office) STATEMENT OF REASON FOR RECALL State of the control of the chiese of the control of the collection in the coll of state, congressional, statewe, ludicial, or county officials.) In vos should be recalled for his tack support of the Chieses Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, to committee the recall of the Island support of the Chieses Communist Party (CCP), acceptance of this work constituents by calling them "whack-jobs, morons, and idition." 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 RIGAL ROUTE Rural address must also include box or fire no. STORY S |
| e 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, stative, judicial, or county officials. In visco should be recalled for this text support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, and recalled for this text support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, acceptance of trips from the CCP, allure to protect Wisconsin farmland from the CCP, and recalled for this text support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, allure to protect Wisconsin farmland from the CCP, and recalled for the recall of state, congressional, and visconsin farmland from the CCP, and recall of the recall of state, congressional, and visconsin farmland from the CCP, and recall of the recall of state, congressional, and visconsin farmland from the CCP, and recall of the recall of the recall of state, congressional, and visconsin farmland from the CCP, and recall of the recall of the recall of state, congressional, and visconsin farmland from the CCP, and recall of the recall of the recall of state, congressional, and visconsin farmland from the CCP, and recall of the CCP, and recall of the recall of the recall of the recall of the CCP, and recall of the C |
| SIGNATURES OF ELECTORS PRINTED NAME OF THE MUNICIPALITY OF RESIDENCE. PART OF THE MUNICIPALITY |
| in Nos should be recalled for his tacit support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconshi farmand from the CCP. **Cot committeent to election integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents by calling them "whack-jobs, morns, 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 |
| 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 |
| 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 PRINTED NAME OF ELECTORS PRINTED NAME OF ELECTORS STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. 1 Town 1 Town 1 Town 1 Town 2 HOUGH FYOM KILL DI ace 1 Town 2 HOUGH FYOM KILL DI ace 2 Town 2 HOUGH FYOM KILL DI ace 3 Town 2 HOUGH FYOM KILL DI ace 3 Town 2 HOUGH FYOM KILL DI ace 3 Town 3 SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS PRINTED NAME OF ELECTORS PRINTED NAME OF ELECTORS PRINTED NAME OF ELECTORS Rural address must also include box or fire no. 1 Town 2 HOUGH FYOM KILL DI ace 3 HOUGH FYOM KILL DI ace 4 HOUGH FYOM KILL DI ACE 5 HOUGH FYOM KILL DI ACE 5 HOUGH FYOM KILL DI ACE 6 HOUGH FYOM |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS PRINTED NAME OF ELECTORS STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. Indicate Town, City, or Village Converted to the Conve |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS PRINTED NAME OF ELECTORS STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. Indicate Town, City, or Village Converted to the Conve |
| Ang M. Artoro and W. array 5106 Franksek lace oly Mount Play And 5/14 24 Timing Cost Ciming Cost 2106 Franksek lace oly Mount pleasant 5/14 24 Clarica Vazguer Main Vay 5932 Mersery Dr. oly Ocean & Dlasson & 5/14/24 Town old oly Ocean & Dlasson & 5/14/24 Town old oly Ocean & |
| And M. Artogo (M. M. Urray 2106 translat Klace or or own fllages 3/14) 24 Timus Cost (Minisor, C. 2106 Franklat Klace or or own or of leasant 5/14/24 Gersa Vazguer Rain Vay 5932 Merapy D. Or own or or own or or own or |
| TMINA COSTO CIMIAN (SON 5936 MARGERY DR. CARREY M. W. USON 5936 MARGERY DR. CITON CONTROL OF PROSANT 5/14/24 |
| MINA COSTO CIMILAR (ST. 2106 Frankle Dlace City Mount Dleasant 5/4/24 Clare Vazguer Namb (St.) 5932 Meraphy Dr. City Count Dleasant 5/4/24 Charles Carrey M. W. (Son 5936 Margery Dr. City Mount Pleasant 5-14-202. Charles Carrey M. W. (Son 5936 Margery Dr. City Mount Pleasant 5-14-202. Charles Carrey M. W. (Son 5936 Margery Dr. City Mount Pleasant 5-14-202. Charles Carrey M. W. (Son 5936 Margery Dr. City Mount Pleasant 5-14-202. Charles Carrey M. W. (Son 5936 Margery Dr. City Mount Pleasant 5-14-202. |
| Chrisa Vazquer Main Vay 5932 Meraery Dr. "Town Orland Meason 5/14/24" Town Orland Orland Meason 5/14/24 Town Orland Meason 5/14/24 Town Orland Orland Meason 5/14/24 T |
| Main Varguer Main Vay 5932 Meraery Dr. Carrey Main S/14/24 Carrey M. W. USON 5936 Margery Dr. Other Mount Plausant 5-14-2024 Other Other Carrey M. W. USON 5936 Margery Dr. Other |
| Mynne Carrey M. W. USON 5936 Margery Dr. City City City City City City City City |
| Mganer Carrey M. W. ISON 5936 Margery Dr. City Mount Pleasant 5-14-202 |
| Myllinge Carrey M. W. USON 5936 Mangery Dr. Othy Othy Othy Othy Othy Othy Othy Othy |
| Mynne Carrey M. W. USON 5936 Margery Dr. City Mount Pleasant 5-14-2024 |
| Mynne Carrey M. W. USON 5936 Mangery Dr. Othy Och Pleasant 5-14-2024 |
| Mount Carrey M. W. ISON 5936 Mangery Dr. City Mount Pleasant 5-14-2024 |
| Mynne Carrey M. W. USON 5936 Mangery Dr. City Mount Pleasant 5-14-2024 |
| Monte Carrey M. W. (SON 5936 Mangery Dr. City Mount Pleasant 5-14-2024 |
| Cayr Ney M. W. (SBM 5 15 W Markey DE City Willage City |
| Ullage City |
| City |
| |
| |
| □ Village □ City |
| □ Town |
| O. Q City |
| |
| Certification of Circulator Certification of Circulator Certification of Circulator Certification of Circulator Concertification of Circulator Concertifica |
| (name of circulator) (name of circulators residence - included number, street, and municipality) In the 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. § 6.03.1 [All of the control of the state of the control of the contr |
| signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this 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. |
| May 14 2024 Authoris Justin |

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

| (official with whom nominati | on papers or declaration of candidacy for the office is filed) | . We, the undersigned qualified ele | ectors of the Assembly District 63 | |
|--|--|---|--|--|
| petition for the recall of | Robin Vos | | figrisdiction or dis | strict of officeholder) |
| • | (name of officeholder to be recalled and office) | Irom office pursuant to Article XIII, Section | ion 12 of the Wisconsin Constitution and §.9.10 c | of the Wisconsin Statutes. |
| Robin vos snould be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of | 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. | | |
| lack of committment to election integrity, blocking I | ower prescription drug costs, and flagrant disrespect for | r 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 | | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no | MUNICIPALITY OF RESIDENCE | DATE OF |
| Lypthia Slawlet | CHWTYIA SLAASTO | 8716 BUCKIDE (AM DR. | Indicate Town, City, or Village Town Village City TOWN TO | 5/12/2024 |
| 1 NARIA SONASON | +MARIA Johnson | 8801 Buckeyform 404.3 | Othy Sturberard W.J. | 5/2/2004 |
| 4 Tustophellin | Christopher Juinez | 8826 Buckinghan Dr | O Town O Village O City O Sturtement WI | 5/11/2024 |
| 5. Com Told | Dava Kawakani | 6414 Hst Ave | U Town U Village U City Cun os he Wig | 5/12/211 |
| 6. SYNOSAN | Britan Schmidt | 264 W Chestnuts | Unilage Bustington | 5-12-74 |
| | 1. Hony Male | 225 cast market st #1 Bulunction WI | O Village Buller ton | 5-12-20 |
| 7. Curtuel | Cavalec Suchomel | 2001 Blith aux | Urillage Swinghon | 5-17-21 |
| * Jest Dadkan + | lyle Suchonel | 329 Tavellels Run | U Village Buttogton | 5-12-24 |
| " Whole fail | Max Neved: 22 | 1331 11th Ave #95 | Town SEVILIAGE City A CON CONTROL OTHER | 15-12-2020 |
| 10, | | N | □ Town □ Village | |
| ,Josias / | nduja , certify: I ro | Certification of Circulator | 1)th Am V. P. | C/ Parle |
| (name of circulator) If further certify I am either a qualified elector of With the signatures on this paper. I know that the signers name. I know their respective residences given. I s | isconsing or a U.S. citizen, age 18 or older who, if I we | re a resident of this state, would not be disqualified from voting under W y the officeholder named in this petition. I know that each person signed his certification is punishable under § 12.13(3)(a), Wis. Stats. | (circulator's residence - include number, street, and municipality) Vis. Stat. § 6.03. I personally circulated this recall petition ard the paper with full knowledge of its content on the date in | nd personally obtained each of dicated opposite his or her |
| (date) | | | # 12 | Page No. 956 |
| , is required | by the W | of circulator) Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266- | 8005 web: http://elections.wi.gov. email:elections@wi.gov | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec | ctors of the Assembly District 63 | |
|--|---|---|---|---|
| (official with whom nominat | ion papers or declaration of candidacy for the office is filed) | , 0 1 | | 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) | | 3 | |
| (The reason for recall must be stated on natitions | for gity village town and school district officials. The | STATEMENT OF REASON FOR RECALL | | |
| legislative, judicial, or county officials.) | for city, viriage, town, and school district officials. The | e reason must be related to the official responsibilities of the officeholder | t. No statement of reason is required to initiate the reca | ill of state, congressional, |
| | 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 fo | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE 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. Wendy J Ofis | Wendy J Otis | 229E Market St. Apt3 | o village Burlington | 5-12-24 |
| 2 Michille K. Eterra | Michelle L. Etemo | 229 E Market ST Apt 8 | O Village Bally for | 5-12-24 |
| Bu molh | Eden MaArdhov | 313 E. Nevkot | O Town O Village O City Borlington | 53105 5.128 |
| 4 Danuel Jahrn | Jennifer Johnson | 357 E. Market St #111 | O Town O Village Birth 19ton | 5310551 |
| 5. Any we gr | Ryan McLeod | 120 E. CheStrufst | Diviliage Burlington | 5-12-29 |
| 6. Supledlik | tinselda Rebellar | 621 B Meadow in | O TOWN Burlington | 53/055.12 |
| 7. frether | Pat Michels | 21233 Northcape 5+ | O Town O Village O City UNION Grove | 531875-12 |
| 8. Enestectass | Amy Pretasky | 2101 312+10 AVE | U Village Bur (Mg) P | 5365 h. 16 |
| "Chullen Charle | anoe suchomel | 2101 312th Ave | U Village SIM VILLAGE | 9-12-24 |
| 10. Marsh | Veronica housan | 71ll & main | □ Town □ Village □ City | 3/12/24 |
| I, | ndu ja , certify: I. | Certification of Circulator | Viro Black Fl 3296 | |
| the signatures on this paper. I know that the signer | Visconsin, 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 signe 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 petitioned the paper with full knowledge of its content on the date | n and personally obtained each o e indicated opposite his or her |
| 5-12-2C((datc) | | e of circulator) | | Page No. 957 |
| L-170 (Rev 2019-09) The information on this form is requir | 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 | 6-8005 web: http://elections.wi.gov email: elections@wi.gov | * |

| | | RECALL PETITION | | |
|--|--|--|---|--------------------------------|
| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec | etors of the Assembly District 63 | |
| (official with whom nominati | on papers or declaration of candidacy for the office is filed) | , , , | | strict of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII. Section | on 12 of the Wisconsin Constitution and §.9.10 of | of the Wisconsin Statutos |
| | (name of officeholder to be recalled and office) | | on 12 of the wisconsin Constitution and 8.3.10 (| ine wisconsin statutes |
| | | STATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on petitions | for 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. |
| registure, junitum, or county officials.) | | | | -y, g, |
| | | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| lack of committment to election integrity, blocking | ower prescription drug costs, and flagrant disrespect fo | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY HEED FOR MAI | I INC BURNOOPS HAVEN DESCRIPTION | | | |
| | LING PURPOSES, WHEN DIFFERENT THAN M | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | | JST 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 | DATE OF |
| . 1/ 1/ 1/ | 11. | | Indicate Town, City, or Village | SIGNING |
| Han I noth out a | Halou VinAttino VIIS | a in o much of VI. | Constitution I Ni CO N | 15/20/21/ |
| - many market | 71aug 6101111614) | ransusville (UI 53 139 | acity DOVE | 1 2/d x /0 7 |
| 2. (100000 | Town Vnathners | 6012 240th Ave Salem | Town To do do do | -120/11/ |
| | cajin Fronzis | 11 (61 33168 | Ecity (accorde Care | 15122129 |
| 3. I william Duling | 1. Is a King ala | 6012 240th AVESalem, WI, | Town | C 1 - 1 - 1 |
| XMUNV I MILY | LINGSEY NIMPRO | 53168 | City Paulock Later | 15/22/24 |
| 17110 | _ | 24919 Wareth AP | biTown | 1001/01/ |
| LANDER . | resserantinesirs | 249/8 Howath DR KONSVINE, LI 53/39 | b Village 1) | Stantali |
| J-20 1 1 1 5 | 0 030 900 1100 | KONSDIVINE TIL OSIJI | ocity DOVEN | 120127 |
| 5. | | | ☐ Town | /_/ |
| | | | □ City | |
| 6,0 | | | □ Town □ Village | |
| | | · · · · · · · · · · · · · · · · · · · | U City | |
| 7, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | □ Town | |
| | | | □ Village □ City | |
| 8 | | | □ Town | |
| 0. | | | ☐ Village | - |
| 0 | | | □ City | |
| 9. | | | □ Village The Committee of the Committe | |
| | | | □ City | |
| 10. | | | □ Town | |
| | | | □ City | |
| -Tw / 6 | $\sim 0 \lambda \Omega$ | Certification of Circulator | 2 11 20 20 | |
| I. ANY | certify: I | reside at 13950 (LAKO 9+ 1) | 4801 AL LUT >490 | 1/0 |
| (name of circulator) | | | (circulator's residence - include number, street, and municipality) | 40- |
| the signatures on this paper. I know that the signer | visconsin, or a U.S. citizen, age 18 or older who, if 1 w | ere a resident of this state, would not be disqualified from voting under W | Vis. Stat. § 6.03. I personally circulated this recall petition | and personally obtained each o |
| name. I know their respective residences given. I | support this recall petition. Lam aware that fall fring | by the officeholder named in this partition. I know that each person signe this certification is punicipable under \$ (2.13(3)(a), Wis. Stats. | d the paper with full knowledge of its content on the date i | ndicated opposite his or her |
| 51 2-1-1 | Can D | ZA NO COLOR DE LA STAIS. | | D. M. 272 |
| Jedne 2427 | | | | Page No. 958 |
| L-170 (Rev 2019-09) The information on this form is require | ed by Wis Stats 66 8 40 and 9 10. This form is prescribed at the | e of circulator) Wisconsin Elections Commission P.O. Box 7984, Medison, WI 53707-7984 608-266- | BOOK I 1. Turn Web | |
| A CONTRACTOR OF THE PARTY OF TH | 3.5 / Line Ama presented that | | -8003 web: http://elections.wr.gov email: elections@wi.gov | |
| | | X. | | |

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 | n papers or declaration of candidacy for the office is friedy | | to cut with the and colored | the Wissensin Statutes |
|--|---|--|--|---------------------------------------|
| 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) | | | |
| | S | TATEMENT OF REASON FOR RECALL | | 6 |
| (The reason for recall must be stated on netitions for | or 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, |
| TOTAL PLANTS TO THE PERSON OF | | | | |
| Robin Vos should be recalled for his tacit support o | f the Chinese Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE RESERVE THE PARTY OF THE PA | INC PURPOSES WHEN DIFFERENT TUAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE MUS | Γ ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| (m () | 2 4 | | □ Town . | A / bi . (|
| I COMMON III KON | THANKER WI KOSS | IN ISTALD MALON CHANG | Solly /1016h Carove | 15-12-14 |
| - (Berryal) of the least | JOHN HEY YI HOSS | 101-10 AVE UNION GANE | | 7 |
| | Jannager | THE PART OF THE PA | Town Village // 1/100 | C 11 2 |
| 2 111 11 1 mas | TOUR LAND IS TO | 15/10 MOKIMIS HILL MEDI | City (1) Cove | 2,12,001 |
| AMAN TITA CAMARA | MO JELL PHALLING | 2 Card Microscop and | □ Town ← 10 | \ \tag{\tag{\tag{\tag{\tag{\tag{\tag{ |
| 3. | Cai D Mar-ole | 1625 Puls Glas | Otty Willage Barlington | 5-17-24 |
| T XX Jumes | Craic 11 Kierzela | MODICAN GIFT | | 1001 |
| | | | Town Village Z | 510121 |
| 4. 37 | Sara A Kierrek | 1625 Rookery Glen | city DUY INOSON | 3/12/29 |
| July 10. | Jan A Morack | 1000 1 Board of Carl | □ Town () | |
| 5 | | | □ Village | |
| | | | City | |
| | | | □ Town □ Village | · · |
| 6. | | | □ City | |
| | | | Town | |
| 7 | | | O Village | |
| | | | □ City | |
| | | | □ Town | |
| 8. | | | □ City | |
| | | | □ Town | |
| 9. | | | ☐ Village | |
| - | | | City City | |
| 10 | | | - O-Town | |
| 10. | | (W.) | □ City | |
| | | 5 US 0 5C' 114- | 1 | |
| 01100 | 1 1 | reside at 3687 AK 58 CAVE C | t. AR 72571 | |
| 1, Richard JPo | certify: I | reside at 308/ 72 30 WVC C | (circulator's residence - include number, street, and municipality) | |
| (name of circulator) | | 11 Cable at the month and be disqualified from noting under | Wis Stat & 6.03 I personally circulated this recall petition a | and personally obtained each of |
| I further certify I am either a qualified elector of \ | Visconsin, or a U.S. citizen, age 18 or older who, if I w | 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 | ned the paper with full knowledge of its content on the date i | ndicated opposite his or her |
| the signatures on this paper. I know that the signe | rs are electors of the jurisdiction or district represented | by the officended named in this petition. I know that each person sign | tod the puper man and the control of | |
| | support this recall petition. I am aware that raisitying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 959 |
| 5-12-2024 | Millan | 4000 | | - 000 |
| | - (kignifu | rre of circulator) | CC BOOK hards have following the way to mail algoritons (Two Sour | |
| EL-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 | e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | 30-8003 [web. milit references wit gov] email: electrons(wit gov | |

| | | RECALL I III III | Assembly District 63 | |
|--|---|--|---|---------------------------------|
| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elected | (jurisdiction or distr. | ict of officeholder) |
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 of | (ne wisconsin statement |
| n e e e e e e e e e e e e e e e e e e e | (name of officeholder to be recalled and office) | TO A TRUMPING OF DEACON FOR DECALL | | |
| | | STATEMENT 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 | f state, congressional, |
| (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 officeriorast | | |
| legislative, judicial, or county officials.) | of the Chinese Communist Party (CCP), acceptance of the | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Robin Vos should be recalled for his facit support of | of the Chillese Communist Farty (COF), acceptance of | the area speciments by colling them "whack-jobs morons and idiots." | | |
| lack of committment to election integrity, blocking l | ower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | THE PARTY OF PARTY | OF ALWAYS DELICTED |
| TWO ASSISTANCED AS VEY LICED FOR MAI | LINC PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | DATE OF |
| | | | Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Town | C 12 01 |
| . 0 | 1011 | 06 EL A 3 1 12 W | UVillage /3 | 5-13-24 |
| 3 Borrobles - | 1 annis teanbles | 740 teno Dr. Dullyth, W | Town | 1 2 2 |
| 1/ 1/ / | 1/19.11 | 11 - m Nu Skurt 1 | UVillage Bio 1 20 1 | 5-13-24 |
| The state of the s | DAVEZ 11/1/106 | 165 MOYER 1400 W | Town | 1012-1 |
| The state of the s | | 010 | UVillage & / L | 5-13-24 |
| F Whole | TANK WILLICH | 165 MODICA RUE | geny purlington | 0 / 3 4 / |
| The way of | | 2 1 10 1 | Town | X12.74 |
| 4 1 mulb aller. | Danielle Adi | 140 Paul St Burlington W | Ocity Brain Aton | 212.51 |
| Through Color | TOWN ARE | | Town Rolling Rolling | 5-13-24 |
| 21 104/2 | RUB STENZEL | 132 PAUL ST BULLIGTOWNI | A City Della City City | - |
| Patter of 2 | 1.00:00 | 1.20 0 101 0 . 1 | O Town | 5-13-24 |
| 6 1116 | Liessica Stenzel | 1132 raw St. Burnington WI | pecity DUY IIV 19 OV L | 5-15 21 |
| The same | 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - | CIP VI. 1 | O Town | 5-13-24 |
| 7. 1. 1. 1 | Sherrie Brough | 308 Soan St Burlington | acity DVIINATON | 3001 |
| Zayrur Just | Old 10 | J J | O Town | 51274 |
| 8 K L/K | 1 to land RROWN | 328 Jan S. | acity Burlinglon | 0-10-21 |
| VA | Polar LA O Morris | 300 300 10 | D Town | 5 12 31 |
| 9/200 | 1 July 02 | 121 Tagn St | archy Tentingsen | 3.15.0 |
| The state of the s | The brond handle | 7111 - 1 | O Town | E 13-21 |
| 10. | - Farmella | 1599 banst | city CY 1707 | D-124 |
| 1 IHVCII ICVIUZIA | THIONGS THEY | Certification of Circulator | | |
| 0.1.1. | + Potes = | I reside at 3687 AVE 58 CAVE | City AR 72501 | |
| I, RICHARD | Jorne J- centry. | Teslac at | (circulator's residence - include number, street, and municipality) | and nersonally obtained each of |
| I further certify I am either a qualified elector of | Wisconsin, or a U.S. citizen, age 18 or older who, if I | were a resident of this state, would not be disqualified from voting under | red the paper with full knowledge of its content on the date | indicated opposite his or her |
| the signatures on this paper. I know that the sign | ers are electors of the jurisdiction or district represente | were a resident of this state, would not be disqualified from voting under a do by the officeholder named in this petition. I know that each person sign this certification is punishable under § 12.13(3)(a), Wis. Stats. | ned the paper with tan income age of the | |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsily | ng this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 960 |
| 5-13-24 | Michael | | | |
| (date) | Supplemental by the form is prescribed by the | flure of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | 66-8005 web: http://clections.wi.gov email: elections@wi.gov | |
| EL-170 (Rev 2019-09) The information on this form is requ | uired by Wis Stats 99 8 40 and 9 10. This total is presented by | West Control of the C | | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec | ctors of the Assembly District 63 | |
|---|---|---|---|-------------------------------|
| (official with whom nominati | 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 or | , |
| | (name of officeholder to be recalled and office). | | 3 | |
| (The reason for recall must be stated on netitions | for city village town and school district officials. The | STATEMENT OF REASON FOR RECALL | | |
| legislative, judicial, or county officials.) | for enty, 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 initiate the recall of | of state, congressional, |
| 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 integrily, blocking | lower prescription drug costs, and flagrant disrespect for | r his own constluents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE MUS | 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 | DATE OF |
| 9 11 | 10 | IX and address must also include box of fife no | Indicate Town, City, or Village | SIGNING |
| 1 / Cara Double | Tereza Stanlaina | 3441 1 = 1 | Ø'Village () | 15-13-24 |
| 2 CUA - POWERS | Teller Starting | STY YOUN ST | Town | 0,001 |
| MARIO COMPLEA | ALL. | 75/ TOO 50 | □ Village | c/12/21 |
| 3 M | Simene | JOG SUMA SI | Town BUXLINGTUN | 1/3/24 |
| Mar finers | Warra Jamon- | 358 Joan St | Ocity Roalington | 5/13/24 |
| 4 1 2 2 | | 2/11 | □ Town | -112/01 |
| Loxala Kadish | ez Loiera Rodigue | SOI Joan St | ocity Bullingdon | 5/12/74 |
| 5 Elelia 30/06 | Maria de kon Salus | BY8 W Stude 2+ | Town Village R | 5/12/21/ |
| COLOS BILAN | a raing ax con solve | 7249 ON DURIE 24 | Town | 11/11/29 |
| 6. Mariano Solas | Mariano Solds | 530 Machenby | Ocity Buslington wi | x 17 94 |
| 7 11 11 | | 1 100 010111 | □ Town | 5019067 |
| Nicol M Eon | nel Nicol Gomez | 336 part S+ | City Burlington (1) | 8/13/24 |
| 8. | £ 1 2 00 1 | 327 Jan st | Town Village | 1 1 |
| CICIOLO V. N. | Foundo F. Moles | OLI Joan ST | ocity Durington | 5/15/10251 |
| 9 Chra | Keno Binhstalor | 943 Creshwood Dr | □ Town □ Village | 9/13/2024 |
| 10 684 1. 1. 1. | () () | 110 | City Pullingdon | 11111009 |
| 10. Office Wasses | Scott Wagilerich | 33400 5. Honey U. H | City Burlington | 5/13/2024 |
| . Rich and | TRACT | Certification of Circulator | 11 00 21 | · |
| (name of circulator) | certify: I | reside at 3687 AK 58 Cave C | ATO AR TESCI | |
| I further certify I am either a qualified elector of V | Visconsin, 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. 6 6.03. I personally circulated this recall petition at | nd personally obtained each o |
| the signatures on this paper, I know that the signer | is are electors of the jurisdiction of district represented | DV Inc officeholder named in this netition. I know that each person signs | ed the paper with full knowledge of its content on the date in | dicated opposite his or her |
| rame. I know then respective residences given. I | support this recail petition. I am aware that talsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | |
| (date) | - Janon | Occirculator) | | Page No. 961 |
| CL-170 (Rev 2019-09). The information on this form is require | ed by Wis State && & 40 and 9.10. This form is prescribed by | Wisconsin Florities Commission D.O. Pere 7094 Madiente NV 53707 7004 (600 000 | | |

| The Wilsonian Election Commission (official visits between somiliating pages or declaration of candidately fixe the office is filed) (outnow of efficiently in the case of t |
|--|
| From office pursuant to Article XIII, Section 12 of the Wisconsin Constitution of the receil of fundable to be retailed and office) STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, feepistative, indicate, are country officials. In the confidence of the proposition of the confidence of trips from the GCP, failure to protect Wisconsin hemitand from the GCP, and indicate the recall of state, congressional, feepistative, indicate, are country officials. The MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED SIGNATURES OF LECTORS FIRST A NUMBER OR RURAL DOUTE SIGNATURES OF LECTORS FIRST A NUMBER OR RURAL DOUTE SIGNATURES OF LECTORS FIRST AND ARRIVED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OF SIGNING AND ARRIVED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OF SIGNING AND ARRIVED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONTROLL OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS BE LISTED OR CONT |
| (name of officeholder to be recalled and office) STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, registrative, publicule, or county officials.) (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 official responsibi |
| 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 officials happen of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, really the recalled of the latent support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, really the recalled of the latent support of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP. 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 STREET A NUMBER OF RELECTORS. STREET A NUMBER OF RELECTORS. THE MUNICIPALITY OF RESIDENCE DATE of STREET A NUMBER OF RELECTORS. STREET A NUMBER OF RELECTORS. THE MUNICIPALITY OF RESIDENCE DATE of Village SIGNING Trips of |
| 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 immate the recent of states, related by the complex of the Chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, lack of commitment to election integrity, blocking lower prescription drug costs, and flagrant disrespect for his own constituents by calling them "whate-jobs, moros, and iddies." THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, ISSNOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED STREET'S NUMBER OR RURAL ROUTE SIGNATURES OF ELECYORS PRINTED NAME OF ELECTORS Rural address must also include box or fire no or constituents by calling them with a strength of the complex forms |
| Company Comp |
| Company Comp |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SIGNATURES OF ELECTORS FRINTED NAME OF FLECTORS PRINTED NAME OF FLECTORS PRINTED NAME OF FLECTORS THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE BATE OF SIGNATURES OF ELECTORS PRINTED NAME OF FLECTORS THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE BATE OF SIGNATURES OF ELECTORS PRINTED NAME OF FLECTORS THE MUNICIPALITY OF RESIDENCE BATE OF SIGNATURES OF ELECTORS TOWN Using ALVA SUPPLY STATES OF ELECTORS TOWN Using ALVA SUPP |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE MIST ALWAYS BE LISTED SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS Run address must also include box or fire no. Color of the col |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MIST ALWAYS BE LISTED SIGNATURES OF ELECTORS SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS Run address must also include box or fire no. Town Visiage Color Color |
| SIGNATURES OF ELECTORS Rural address must also include box or fire no Town City or Village City City City |
| SIGNATURES OF ELECTORS Rural address must also include box or fire no Town City or Village City City City City |
| 1. California 201 W W 160 Minute 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Town Ording Ord |
| Town Ording Ord |
| Town Ording Ord |
| Town Ording Ord |
| Olige Orom |
| 3. |
| 4. |
| 4. |
| 5 |
| 5. |
| 6. |
| 6. Village City 7. City 8. Town 9. Tow |
| 6. |
| 7. |
| 7. |
| 8. |
| 8. |
| 9. |
| 9. Uilage Control Cont |
| 9. City Town |
| □ Village |
| |
| To a city |
| |
| Certification of Circulator O C + NP 77.571 |
| I. Kichard J Porte J certify: I reside at 3687 AR 58 Cave City Ak 105 (circulator's residence - include number, street, and municipality) |
| (appropriate this recall netition and personally obtained e |
| (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circulator) [Insulator] (name of circul |
| 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. State § 0.05. I personally circulated this retained in this paper. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or he 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 the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or he signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or he signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or he signers are electors of the jurisdiction or district represented by the officeholder named in this petition. |
| the signatures on this paper. I know that the signers are electors of the jurisdiction of district represented by the officeriolder includes in the paper. 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. 962 |
| 31/3/24 Krehren/4000) |
| (date) (signature of circulator) (signature |
| (date) (date) (date) (date) (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 email: elections@wi.gov email: elections.wi.gov em |

| TO: The Wisconsin Election Commission | n | We, the undersigned qualified elec | tors of the Assembly District 63 | |
|---|---|--|---|---------------------------------|
| (official with whom nomi | ination papers or declaration of candidacy for the office is filed) | | (jurisdiction or dist | 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 of | f the Wisconsin Statutes. |
| legislative, judicial, or county officials.) | ons for city, village, town, and school district officials. The | 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, blocki | ing lower prescription drug costs, and flagrant disrespect fo | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR M | MAILING PURPOSES, WHEN DIFFERENT THAN N | MUNICIPALITY 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 |
| Goother Donth | a Cynthia DSmith | 9209 Florence St | Ovillage Sturdevant | 5.12-2024 |
| 2 HMXM17 | Flosha Smith | 9211 Florence St | Ocity Sturdevant | 5,52,7021 |
| 3. Clark for | PATTHEW JABBER | 9349 FLAZQUE DZ. | Uviliage StateVAR/I | 5-12-24 |
| 4. | | | □ Town □ Village □ City | |
| 5. | | | □ Town □ Village □ City | |
| 6, | | | □ Town □ Village □ City | |
| 7. | | | □ Town □ Village □ City | |
| 8. | | | □ City □ Town □ Village □ City | |
| 9, | | | □ Town □ Village | |
| 10. | | | □ City □ Town □ Village □ City | |
| | of Wisconsin, or a U.S. citizen, age 18 or older who, if I v | reside at | (circulator's residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition a | and personally obtained each of |

Page No. 963

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

(signature of circulator)

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.

| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elected | ors of the Assembly District 63 (jurisdiction or distric | t of officeholder) |
|--|--|--|--|--------------------------------|
| (official with whom nominatio | on papers or declaration of candidacy for the office is filed) | | Quasalction of district | |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | 1 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| petition for the recan of | (name of officeholder to be recalled and office) | TOP PECALL | | |
| | | TATEMENT OF REASON FOR RECALL | No eleterant of reason is required to initiate the recall of | state, congressional, |
| (The reason for recall must be stated on petitions if | 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 recail of | |
| | | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| Robin Vos should be recalled for his tacit support of | of the Chinese Communist Party (CCP), acceptance of the | app from the Got plants to prove the back inches moreons, and idiate " | | |
| 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." | | |
| The service of the Horn For MATI | LINC BURBOSES WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| | | SIREE GIOMBEROR ROLLEROOL | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Town | 2 .0 0 11 |
| in i | 711 7 6 | 17789 5040 6 | UVIIIage Conclus II | 0.13.04 |
| 15 ott 10 0.360/ | Betrun 10X | 11101 302110 | City VIII | |
| A SOLVE | | 170 5 50 1 | D Town D WY K LL (P | 5.13.24 |
| Mumma (main) | DAULN IN COODER | 1868 384 80 | Ocity City | 5 (3 2) |
| Sant III Care | 1 2 - 1 | -1.100 | □ Town □ Village フ | 5 BNH |
| 31) (27 | John 1) WINTER | 3405 D. Stowns LX US- | Ocity BUTLINGTON | 7-1291 |
| pu wes | 0 () | 2 20 000 | D Town | 5. 15.70 |
| 10 and in | Jon Doulow | 18027 58 | City Jon CV 114 | 11/10/29 |
| 1000 | 2011 | -1 1 1 | □ Town □ Village ▼ \\`. \ | 5/13/201 |
| 1 5 T/S-1 VAHTA / / | Robert W Schufte | 242 Edward ST | a city But highery | 113129 |
| 194 X 199 | 10.00.1 | 3118110 | Town Village R 1 V | 5/12/54 |
| 6. We and Wal- | Selgul step 11 Worl | 3/6. Colward 87 | City Schol Vi | 113/21 |
| C GOT VE A | TON HOTEV | | Town B. I | 5/13/24 |
| 7.01 ann Weller | Karen KVO | 409 Edwards ST | ority Ourlington | 3/1.312 |
| JOSEPH T. CHARLES | Ore MCROSPE. | 1101 -1 | Town O 1. | 5/12/04 |
| 18C alm Basish | (and Bowler | 929 Follows St | Gity Bur Ingtor | 2/13/27 |
| CON EUTO FOR TO | aduad Diemer | 10-119009103= | □Town □ | -11/ |
| 9. [/ 4]/ | MALK MIER | 41-7 KANDOLPH ST | City SUKLINGTON | 5/13/24 |
| Xun Va | 17/1/12 FILMON | 701 1010 90 0011 | □ Town | 2111 |
| 10. D 1 1 1 h | Pat Kehrer | FOUShortdel. | O Village | 9/13/24 |
| tax genu | 191 Nemer | Step rate | The state of the s | 1050 |
| Maria Da | 10 | Certification of Circulator 15877 A | 1 18th ST Magnix A. | 285000 |
| I, PIDIVAROI | | reside at | (circulator's residence - include number, street, and municipality) | |
| (name of circulator) | Wisconsin or a LLS-citizen, age 18 or older who, if I v | were a resident of this state, would not be disqualified from voting under | Wis. Stat. § 6.03. I personally circulated this recall petition a | ind personally obtained each o |
| | | | ed the paper with full knowledge of its content on the date i | nuicated opposite his of her |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | g this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 964 |
| 9.13.2024 | VW-Q12c | our D | | |
| (date) | (signat | ure of circulator) | 100-114-110-114-114-114-114-114-114-114- | |

(Value)

(Va





____ We, the undersigned qualified electors of the ___ Assembly District 63

The Wisconsin Election Commission

| | ion papers or decimation of emididacy 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 | f the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office). | | 0 | |
| | | 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 recell | of state assessment I |
| legislative, judicial, or county officials.) | tor only, vinage, to vin, and someof district officials, The | e reason mast be related to the orneral responsibilities of the officeholde. | 14. No statement of reason is required to initiate the recall (|)f state, congressional, |
| Robin Vos should be recalled for his facit support | of the Chinese Communist Party (CCP), acceptance of | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | | | |
| lack of committment to election integrity, blocking | lower prescription drug costs, and flagrant disrespect for | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| | | | | |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN N | MUNICIPALITY 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 | TRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 1 10 00 10 10 | 1/0 | - 11 1 D | □ Town | /// |
| I Limity R Elikser | lim Kehrer | 15011 Chan 11 01 | □ Village → N | 15/2/211 |
| 10000 | 1111 10 | O' Speller Fax | Ocity - Cocc | 12/12/24 |
| 2 1 1 | MI II A IS | 101 | □ Town | 1/1/1/20 |
| The state of the s | (400dia Acoverdo | 678 foxfree air AP#2 | Uvillage Collins Collins | 16/13/25 |
| and the same | Colorest / Colorest | 010101100011100 | ocity 570 cores Carro | 310000 |
| 3. 1 T - T - T - T - T - T - T - T - T | V | C-18 = | Town | 5/12/2/1 |
| LENIES LIKES | LENIA MOL | 678 FOR TREE CIR APT 3 | City ROWN) LIX | W113179 |
| | | , , , , , , , , , , , , , , , , , , , | □Town | 1 101 |
| 4. | 2 | | - Village | |
| | | | City | |
| 5. | | | □ Town | |
| 7 | | 1 min | □ Village | |
| | | | □ City | ` |
| 6. | | | □ Town | |
| | | | City | |
| 7 | | | Town | 1 |
| | | | □ Village - | |
| | | | □ City | |
| 8 | | | □ Town | |
| | | | □ Village □ City | |
| | | | Town | |
| 9. | | | □ Village | |
| | | | □ City | |
| 10. | | | □ Town | |
| 10. | | | ☐ Village | |
| | | | □ City | |
| MARIE D. A. | | Certification of Circulator | , i | |
| 1. Morra Rounds | certify: I | reside at 15872 U 18th P | neon'x Az 805022 | |
| (name of circulator) | | | (circulator's seed as a few seeds and a seed | |
| 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 | Wis Stat & 6.03. I personally circulated this recall petition a | 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 signs | ed the paper with full knowledge of its content on the date in | ndicated opposite his or her |
| name, I know their respective residences given, I | support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | - opposite the control |
| 5.13.0024 | ~ 1/1×017 ~ | 4.6 | | Page No. 965 |
| (datc) | | re of circulator) | | 905 |
| (| (Signatu) | io or originator) | | |

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

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec | tors of the Assembly District 63 | |
|--|--|--|---|------------------------------|
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | ct of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII Section | on 12 of the Wisconsin Constitution and §.9.10 of | |
| • | (name of officeholder to be recalled and office). | paradant to rittolo ritin, booti | on 12 of the Wisconsin Constitution and 3.7.10 of | the wisconsin statutes. |
| | 75m. S | 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 officeholder | No statement of reason is required to initiate the recall of | f stata compressional |
| legislative, judicial, or county officials.) | | | 110 Statement by reason is required to initiale the recuit of | sinte, congressional, |
| 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, | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| ack of committeen to election integrity, blocking i | ower prescription drug costs, and hagrant distespect for | This own constituents by caning them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF DESIDENCE MUS | T AI WAVE DE LISTED |
| 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 10 | 0 - 0 | | □ Town | |
| I VARANTA RO | KOBPRT J BLUM | 1356 VINC ST | Willage 10.0.000-1201 | 5-14-24 |
| AUDERA A. WAL | Modern O Deploy | 1300 011 6 31 | draity //////////////////////////////////// | 51/2/ |
| 2 1 20 + | Topolist | 10000 10 4: 0 | Town Village | - Mario |
| yours / (huma | James S. Christma | W 18930 Martin DC | City VarPuiles | 5-114/24 |
| 3 / | | | □ Town | 110 |
| 16 march McCornel | Tumore Mc Grad | 4625 S, Beauty De | City Kansasville W/ 53130 | E-10 AV |
| 70.000 | 1 | | D City Fan 3 9 6 V. (11 W/ 33130 | 3 1901 |
| 1 4 0 0 0 0 0 | Michael J. Asencia | 280 Church St | Village Bills | 5,14,24 |
| Male Comme | Mically of Districto | 8 10 Om ball | city DON TOW | 317127 |
| 52 10- 500 | V | 1 (10) | □ Town | -161 46 |
| 120vzer J | Kelo Ca Slucio | N(TIT W) Hate | City DUM atom | D/4 '21 |
| Λ | A . | and the state of t | O Town | |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1 Aleider | | C Village | |
| The state of the s | Chieron | | □ City | |
| 7.1 2/1/2/2 | - Phillipp HACON | 3x1, 12(11, 100+ 0 | Town 7 L | = W/ 20V |
| Junty | JAMIN NINGS | DIFFITHEROLY XI | City Des / Por | 54 XX |
| 8 | | | □ Town | |
| | | | □ Village | |
| | 2 | | □ City | |
| 9. | | | C) Village | \ |
| | | | □ City | |
| 10 | | | □ Town | |
| | | | □ Village □ City | |
| 4 1 10 | Λ. | Contignation of Circulates | Section 1 | |
| 11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1 | 12 1 | Certification of Circulator | 11 19th St DhoonYA | 28502 Z |
| (names of circulates) | certify: I | reside at | N 10- 21 THOUTH | F0307 3 |
| I further certify I am either a qualified elector of W | Visconsin, or a U.S. citizen, age 18 or older who, if I wa | ere a resident of this state, would not be disqualified from voting under V | (circulator's residence - include number, street, and municipality) | d sagasally abtained each of |
| the signatures on this paper. I know that the signer | s are electors of the jurisdiction or district represented | by the officeholder named in this petition. I know that each person signs | the paper with full knowledge of its content on the data in- | u personany optained 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. | and babot with this knowledge of its content on the date like | neated opposite his of her |
| 5-14-74 | 1 Amon | 214 | | Page No. 966 |
| (date) | | c of circulator) | | |
| (uatr) | tsignature | e or encounter) | | |

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://clctions.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

| | (name of officeholder to be recalled and office). | | | | |
|--|--|---|----------------------------------|---|--|
| | | STATEMENT OF REASON | | | |
| legislative, judicial, or county officials.) | for city, village, town, and school district officials. The of the Chinese Communist Party (CCP), acceptance of tr | | | , No statement of reason is required to initiate the recall | of state, congressional, |
| lack of committment to election integrity, blocking l | lower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "wha | ack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MAIL | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY 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 OF Rural address must also inc | R RURAL ROUTE | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF SIGNING |
| 1. Not West . | Mathan Williams | 3920 Royal | Oaks anve | Unilage Mount Pleasant | 5.15.24 |
| 2. July | 7 1/2 h / Uf 4 | Com 5728 | Regencyhill | O Village Mount Pleasant | 5,15.24 |
| | aPhillip | cofes | 0 0 | □ Town □ Village □ City | B |
| 4 Mathoson | Heather Sura | 5143 BISCO | yne 200 # 213 | O'Village POLITICAL VILLAGE | 5-18-0 |
| 5. Jul Ry | Julia Reynoso | 5143 Biscan | ine are #5204 | o Village Mt. pleasant | 5-15-24 |
| 6. Lynn buly Cattory | Kimberly You hourtian | 3730 Greenbi | rook hn | O Village M. + Pleasant | 5-15-2024 |
| "Stry Elder | STACY ELBERST | 5720 Rege | my hills | Distribution of Plant | 5-15-24 |
| 8. Toley Ezi | Torey Eggerson | 5720 Kezency | Hill pr | Usilage Mt Pleasant | 5-15-24 |
| " Williettodges | WILLE HODGES | 3550 WOOD | DR. | Usilage MT, PLEX SALT | 5-15-27 |
| 10. Mas 2 | Mike miller | 4020 Royal | Dak Dr | O Town Dyllage MT Plasers | 5-15724 |
| I, Moira Rounds | certify: I r | Certification of Circ | ulator 2N 18th S | of CheonixAz 850 | 22 |
| I further certify I am either a qualified elector of W the signatures on this paper. I know that the signer | rs are electors of the jurisdiction or district represented b | by the officeholder named in this petition | n. I know that each person signe | (circulator's residence - include number, street, and municipality) Vis. Stat. § 6.03. I personally circulated this recall petition and the paper with full knowledge of its content on the date it. | and personally obtained each of ndicated opposite his or her |
| S - 15 - 707 4 | support this recall petition. I am aware that falsifying t | this certification is punishable under § 1. | 2.13(3)(a), Wis. Stats. | | Page No. 067 |

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

(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 | on 12 of the Wisconsin Constitution and §.9.10 of | of the Wisconsin Statutes |
|--|---|---|---|--|
| | (name of officeholder to be recalled and office) | | | |
| | | STATEMENT OF REASON FOR RECALL | | |
| legislative, judicial, or county officials.) | | The reason must be related to the official responsibilities of the officeholde of trips from the CCP, failure to protect Wisconsin farmland from the CCP, | x. No statement of reason is required to initiate the recall | of state, congressional, |
| lack of committment to election integrity, blocking | lower prescription drug costs, and flagrant disrespec | et for his own constiuents by calling them "whack-jobs, morons, and idiots," | | |
| THE MUNICIPALITY USED FOR MA | ALLING PURPOSES, WHEN DIFFERENT THA | N MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | AME OF THE MUNICIPALITY OF RESIDENCE MU | JST 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. Joseph | Verter Brown | 3528 Sherwood St RACINE WI 5340 6 | Town Servillage M+ PleASANT | 5/15/24 |
| 2/1/ | | / | □ Town | |
| | | | □ City | |
| 2. * | | | □ Town | |
| 3. | | | □ -Village □ City | |
| | | | Town | |
| 4. | | | Village | |
| | | | □ City | |
| - | | | □ Town | |
| 3. | | | - D-Village | |
| | | | City | |
| 6. | | | □ Town □ Village | |
| | | | City | |
| (24) | | | □ Town | 1 |
| × 7. | | | ☐ Village | |
| | | | □ City | |
| 8 | | | □ Town | |
| 0, | | | ☐ Village | |
| 7 | | | Town | |
| 9 | | | U Village | |
| | | | □ City | |
| | | | Town | |
| 10, | | | □ Village | |
| | | | □ City | |
| | Λ | Certification of Circulator | | |
| 1, Moira Rou | 6 HC certifi | y: I reside at 15972 N 18 | 15 St Pheonix Az 850 | 27 - |
| (name of circulator) | , cordi |). Treside at | (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 | | and personally obtained each |
| | | nted by the officeholder named in this petition. I know that each person sign | | |
| | | ring this certification is punishable under § 12.13(3)(a), Wis. Stats. | F-F | The second secon |
| $\sim 1 - 1$ | C112-01 | | | Page No. 968 |
| | | cource | | 1 . 10 900 |
| (date) | (sig | mature 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://clections.wi.gov | email: elections@wi.gov

| TO: The Wisconsin Election Commission |
|--|
| Conficial with whom nomination papers of declaration of candidacy for the offices inter) |
| Petition for the recall of Robin Vos (name of officeholder to be recalled and office). (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 official for the form of the official persons is incoming of the control of the chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, resolution to 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, resolution of the chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, resolution of the chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, resolution of the chinese Communist Party (CCP), acceptance of trips from the CCP, failure to protect Wisconsin farmland from the CCP, resolution for the municipal from the CCP, resolution for the municipal from the CCP, resolution for the control of the failure of |
| 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 officendeder. No statement of reason is required to initiate the recall of state, congressional, legislative, Indicial, or county officials. 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 officendeder. No statement of reason is required to initiate the recall of state, congressional, legislative, Indicial, or county officials.) 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 official responsibili |
| (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 related to the official responsibilities of the officeholder. No statement of related to the official responsibilities of the officeholder. No statement of related to the official responsibilities of the officeholder. No statement of prescription drug costs, and separated or trips from the CCP, fallure to protect Wisconsin farmland from the CCP. 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. 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 PRINTED NAME OF ELECTORS Rural address must also include box or fire no. 1 or own Sylliage M. Pleasant U.T. S. 16-34 2 WAY D. S. 16-34 1 or own Sylliage M. Pleasant U.T. S. 16-34 1 or own Sylliage M. Pleasant U.T. S. 16-34 1 or own Sylliage M. Pleasant U.T. S. 16-34 1 or own Sylliage M. Pleasant U.T. S. 16-34 2 or own Sylliage M. Pleasant U.T. S. 16-34 3 Or own Sylliage M. Pleasant U.T. S. 16-34 4 Or own Sylliage M. Pleasant U.T. S. 16-34 5 Warth M. S. 16-34 5 Warth |
| Registative, judicial, or country differents Performance Performan |
| Registative, judicial, or country differents Performance Performan |
| 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. 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 Indicate Town, City, or Village SIGNING |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS Rural address must also include box or fire no O Town O Town O Town O Willings O WHAT PLEASANT S-16-29 O Town O Willings O WHAT PLEASANT S-16-29 O Town O Willings O Town O Willings O WHAT PLEASANT S-16-29 O Town O Willings O Town O Willings O WHAT PLEASANT S-16-29 O Town O Willings O Town O Willings O WHAT PLEASANT S-16-29 O Town O Willings O Town O Willings O WHAT PLEASANT O Town O Willings O Town O Willings O WHAT PLEASANT O Town O Willings O Town O Willings O WHAT PLEASANT O Town O Willings O Town O Willings O Town O Willings O Town O Willings O WHAT PLEASANT O WHAT O Town O Willings O Town O Willings O Town O Willings O Town O Willings O WHAT O Town O Willings O WHAT O Town O Willings O WHAT O Town O Willings O Town O Willings O WHAT O WHAT O Town O Willings O WHAT O WHAT O WHAT O WILLINGS O WHAT O WHAT O WILLINGS O WHAT O WH |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS Rural address must also include box or fire no Town Village Mt. Poggart III 5-16-34 Comparing Comparing Mt. Poggart III 5-16-34 Comparing |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS Rural address must also include box or fire no Town Village Mt. Poggart III 5-16-34 Comparing Comparing Mt. Poggart III 5-16-34 Comparing |
| SIGNATURES OF ELECTORS RUMA SAMACHAR LAURA LAMASTINA 4205 WOOD Rd City Mt. Pagant W 5-16-34 City Mt. Pagant W 5-16-34 City Mt. Pagant W 5-16-34 City Mt. Pagant W 5-16-29 City Mt. Pagant S-16-29 City Mt. Pagant S-1 |
| 2. Kelly Johnson 8205 White fail Dr Gay Mt Pleasant WT 5-16-29 3. July 5 Mirphyll 9430 Luane Dr Grown Village Mt Pleasant 5-16-29 4. July 5 Delmant Au City Mt pleasant 5-16-29 5. Rent La Renneth Johnson 8940 Marite Ct City MT Pleasant 5-16-29 5. Rent La Renneth Johnson 8940 Marite Ct City MT Pleasant 5-16-29 5. Rent La Renneth Johnson 8940 Marite Ct City Mt Pleasant 5-16-29 5. Rent La Renneth Johnson 8940 Marite Ct City Mt Pleasant 5-16-29 6. City Mt Pleasant 5-16-29 |
| 2. KN Norman 8205 White tail Dr Bridge Mt Pleasant W 5-16-29 3. July Murphys 9430 Luane Dr Drown Williage Mt pleasant 5-16-29 4. July Mu Soseting Mt 812 Belmont An Williage Mt pleasant 5-16-29 5. Rent La Renneth Johnson 8940 Marie Ct Drown Village MT Pleasant 5-16-29 5. Rent La Renneth Johnson 8940 Marie Ct Drown Village MT Pleasant Solical |
| 2. Kelly Johnson 8205 White fail Dr Goly Mt Pleasant WI 5. 16-29 3. July the Solona Mte 812 Belmont Au City Mt pleasant 5-16-29 5. Rent fa Renneth Johnson 8940 Marile Ct City Mt Pleasant 5-16-29 5. Rent fa Renneth Johnson 8940 Marile Ct City Mt Pleasant 5-16-29 5. Rent fa Renneth Sohnson 8940 Marile Ct City Mt Pleasant 5-16-29 5. Rent fa Renneth Sohnson 8940 Marile Ct City Mt Pleasant 5-16-29 5. Rent fa Renneth Sohnson 8940 Marile Ct City Mt Pleasant Share S |
| 2. Kell Johnson 8235 White fail Dr Golf Mt Plans on t 5-16-29 3. July the Sobring Mt 812 Belmont Au Ording Mt pleasant 5-16-29 4. Ment La Renneth Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 5. Kent La Renneth Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 5. Kent La Renneth Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 6. July the Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 6. July the Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 6. July the Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 6. July the Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 6. July the Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 6. July the Sohnson 8940 Marile Ct Ording MT Pleasant 5-16-29 |
| 3. Just 1 Suis Mirray 9430 Luane Dr Oily Mt Pleasant 5-16-29 4. Just the Soberna Mt 812 Belmont An Oily Mt pleasant 5-16-29 5. Kent La Renneth Sohnson 8940 Marile Ct Oily MT Pleasant 5-16-29 5. Kent La Renneth Sohnson 8940 Marile Ct Oily MT Pleasant 5-16-29 |
| 4. Sult the Soberna Me 812 Belmont And "Town Village Mt pleasant 5-16-29 5. Kint La Kenneth Johnson 8940 Marile Ct "Town Village MT Pleasant 5-16-29 5. Kint La Kenneth Johnson 8940 Marile Ct "Town Village MT Pleasant Slice 24 |
| 4. The Solding Me 812 Be mont Au Oilige Mt pleasant 5-16-29 5. Kent La Kenneth Johnson G940 Marile Ct Oily MT Pleasant 5-16-29 5. Kent La Kenneth Johnson G940 Marile Ct Oily MT Pleasant Sland Sland |
| 5. Kenneth Johnson GA40 Marile Ct Cty Month Pleasand 5-16-24 |
| 5 Hent La Kenneth Schasch & 940 Marie Ct City MT Pleagand Sale 28 |
| 5 Renneth Schasch & 940 Marie Ct City Maria Provide SILC 28 |
| Silcold Silcol |
| |
| 16 AN MIN IN THE VIEW THE DEED TO THE PROSECT OF TH |
| a minuse hare tone of the control of |
| Settlement Trail ovillage Wit menting 3/16/21 |
| 7 VI VI VI TAI THE TAIN THE TOWN OF THE STAIN |
| Ollo A |
| & SHOWLDS AVENN WILLIAMS DAGITUME 87 DIGITUME 3 |
| |
| BOUT PETT 21/9 MARSHAUSO, City FANSASVILLE STIGOT |
| 0 1 7 1 1 1 0 1 0 1 0 0 0 0 0 0 0 0 0 0 |
| 10. 4 - 1804 1. 1804 3/19 1/ posho/ 00/1808 1/18 1/18 |
| Certification of Circulator 272 August A7 85025 |
| |
| I, |
| (name of circulator) |
| I further contiful are either a qualified elector of Wisconsin, or a U.S. chiefe on the date indicated opposite in a linear state of the paper with full knowledge of its content on the date indicated opposite in a linear state of the paper with full knowledge of its content on the date indicated opposite in a linear state of the paper with full knowledge of its content of the date indicated opposite in a linear state of the paper with full knowledge of its content of the date indicated opposite in a linear state of the paper with full knowledge of its content of the date indicated opposite in a linear state of the paper with full knowledge of its content of the date indicated opposite in a linear state of the paper with full knowledge of its content of the date indicated opposite in a linear state of the paper with full knowledge of its content of the date indicated opposite in a linear state of the date indicated opposite in a linear state of the date indicated opposite in a linear state of the date indicated opposite in a linear state of the date indicated opposite in a linear state of the date indicated opposite in a linear state of the date indicated opposite in a linear state of the date indicated opposite in a linear state of the date in the date in the date of the date in th |
| I further certify I am either a qualitied elector of Wisconsin, or a U.S. citizen, age to distart many that 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 coment of the date indicated opposite many that 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 coment of the date indicated opposite many than 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 coment of the date indicated opposite many than the signature of the paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. |
| 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 citizated in the team personally citizated in the content on the date indicated opposite his or her the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally citizened in the signature of the paper with full knowledge of its content on the date indicated opposite his or her the signature of the paper with full knowledge of its content on the date indicated opposite his or her the signature of the paper with full knowledge of its content on the date indicated opposite his or her the paper with full knowledge of its content on the date indicated opposite his or he |
| the signatures on this paper. I know that the signess are electors of the jurisdiction of the jurisdicion of the jurisdiction of the jurisdiction of the jurisdiction |
| I further certify I am either a qualified elector of Wisconsin, of a U.S. citizen, age 18 of older why, it where the the signatures on this paper. I know that the signatures on this paper. I know that the signatures on this paper. I know that the signature of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite when the signatures on this paper. I know that the signature of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite when the signature of the paper with full knowledge of its content on the date indicated opposite when the signature of the paper with full knowledge of its content on the date indicated opposite when the signature of the paper with full knowledge of its content on the date indicated opposite when the signature of the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the signature of the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the date indicated opposite when the paper with full knowledge of its content on the |

TO: ___ 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 | Hobin Vos | from office pursuant to Article XIII, Sect | ion 12 of the Wisconsin Constitution and §.9.10 | of the Wisconsin Statutes. |
|---|--|--|---|----------------------------------|
| | (name of officeholder to be recalled and office). | OTATEMENT OF DEACON FOR DECALL | | |
| | | STATEMENT OF REASON FOR RECALL | | |
| • | for city, village, town, and school district officials. Th | e reason must be related to the official responsibilities of the officehold | et. No statement of reason is required to initiate the reca | 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 CCP, | | <u> </u> |
| lack of committment to election integrity, blocking | lower prescription drug costs, and flagrant disrespect for | or his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN I | MUNICIPALITY 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. Charles | Chris Nullan | 2505 Lincoln Ave | Offoun Vansasville | 5/16/24 |
| 2 Augale Ball | AmandaBusch | 2505 Lincoln Ave | Ullage hanasville | 5/16/24 |
| 3 | | | ☐ Town ☐ Village | |
| *************************************** | | | City City | |
| | | | □ Town | |
| 4. | | | O'Village | |
| | | | □ City | |
| 5. | | | U Village | |
| | | | □ City | |
| 6. | | | □ Town | |
| 0. | | | □ Village | |
| | | | □ City | _ |
| 7. | | | UVillage | |
| | | | □ City | |
| 0 | | | □ Town | |
| 8. | | | Village | |
| | | | □ City | |
| 9. | | | □ Village | 100 |
| | | | □ City | |
| 10 | | 4: | Town | |
| 10, | | | □.Village | |
| | | | City | |
| NADUGE D | . 10 | Certification of Circulator | oth of D in more | 70-7 |
| 1. Morra Rou | certify: 1 | reside at 159372. N (| 8th St Pheonix 0385 | W 2 2 |
| (name of circulator) | | | (circulator's residence - include number, street, and municipality) | |
| | | were a resident of this state, would not be disqualified from voting unde | | |
| | | I by the officeholder named in this petition. I know that each person sig | ned the paper with full knowledge of its content on the dat | te 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 prinishable under § 12.13(3)(a), Wis. Stats. | | |
| 0/16/24 | UM 312 | o un or | | Page No. 970 |
| (dafe) | | ure of circulator) | | |
| L-170 (Rev 2019-09) The information on this form is requi | | e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-2 | 266-8005 web: http://elections.wi.gov email: elections@wi.gov | |

| | | | RECALL PETITION | | |
|------------|---|--|--|--|-------------------------------|
| TO: | The Wisconsin Election Commission | | We, the undersigned qualified elec | ctors of the Assembly District 63 | |
| | (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distr | ict of officeholder) |
| petition | n 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) | | on the state of th | the Wisconsin Statutes. |
| (The rec | can for recall must be stated an notitions | for either will are those and self-of-life in the in- | STATEMENT OF REASON FOR RECALL | | |
| legislati | ve, 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 o | f state, congressional, |
| | | of the Chinese Communist Party (CCP), acceptance of | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | | r his own constituents by calling them "whack-jobs, morons, and idiots." | | |
| laok of o | ommunent to diction integrity, blocking i | ower prescription drug costs, and liagrant disrespect for | r his own constituents by calling them "whack-jobs, morons, and idiots." | | |
| TE | IE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF DESIDENCE MUS | T AT WAVE DELICTED |
| | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATE OF |
| <u> </u> | S S 94 | | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 1. | 11 1 11 /- | Cl. I II I | ila a | Town Village MOUNT PIPASANT | F 1111 1-3711 |
| - 6 | Thereins | Shirley Hopkins | 1100 oakes Rd. #207 | Uvillage Mount Pleasant | 5/14/2029 |
| 2.0 | | 10 1 11 20 | 1 1/2 1 | □ Town | |
| _ <u> </u> | john jun | hobert Moure | 1120 Ouks 121 1 206 | Ocity Mount Measunt | 15/14/2024 |
| 3/2/ | | A1 | 200-11 - A-1110 | □ Town | 1 hans |
| | ann cos | Clarence Bine | 7220 Kinne Ave At 107 | City Millage Mishing pleasant | 8/14/2024 |
| 4 | | Ayo bidago | , 1 | □Town | 77 |
| | 827 | April Interior | 11858 TORREST FIGGE | Ochy Agot Possart | 5/4/- 24 |
| 5. | 1 / 1./ | | The state of the s | Town | 11712027 |
| J., (| (sisol Mitz | In wel Markeyer | 5-914 Melen Dive | Uvillage Manual Manager | 5/14/24 |
| 61 | 100 | | 10001001.4 | Drown Plant Files (M) | 17129 |
| lill | yen Kill 2 | Wayne Kerkowski | 5834 Margery Vine | er village MI Manager | 5/10/201 |
| 7 A | | A 1 | 20.31 17119119 01110 | Town | 3/14/2024 |
| NO. | 2 ′ | Hracelis Perez | 2106 Frankie Purce | UVIIIage NAT Olacasent | F 111 2 - 1 |
| | | THI WEST PEREZ | 2100 Trailine Place | | 5-17-002 |
| 8. 3 | m | Feriagal (1) illiams | 6016 margery Drive | UTown | 1- 11 21 |
| X | . 1 | El coopea () [(como) | 0 (1.01) | City (CCS CCO) | 5-14-04 |
| 1 9 M | / NUW/. | by Witings | MOG Trantie Male | □ Town □ Village IAA I 0 1 | c= / = / |
| - / ·/ | 149 | CHYTTEC | aloo idilibe lide | Ocity INT Pleasant | 5-14-24 |
| 10. | Fello | 11 000 | | ☐ Town ☐ Village | |
| | 10/1/ | HED MENTYES | | □ City | |
| _ | 1 10000 | 2000 | Certification of Circulator | 1 10 11 > | |
| l, | COTURA D | certify: I i | reside at 10900 Whys Kn | (MM772211) | |
| I further | certify I am either a qualified elector of W | Visconsin, or a U.S. citizen, age 18 or older who if I we | ere a resident of this state, would not be disqualified from voting under V | (circulator's residence - include number, street, and municipality) | |
| 0.6,,,, | tares on the paper. I know that the signer | and dictions of the jurisdiction of district represented i | DV THE DIRECTIONALLY NAMED IN THIS DESIGNAL I KNOW that each pareon signal | vis, Siat, 9 0,03, I personally circulated this recall petition and | d personally obtained each of |
| name I l | 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. | a me paper with run knowledge of its content on the date int | neated opposite his or her |
| | 5/14/24 | | au huhu | | Page No. 971 |
| | (date) | (signature | of circulator) | | 311 |
| L-170 (Rev | (2019-09) The information on this form is require | ed by Wis Stats. §§. 8 40 and 9.10. This form is prescribed by the | Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | 8005 web: http://elections.wi.gov email: elections@wi.gov | |

| O: The Wisconsin Election Commission (official with whom nominal | tion papers or declaration of candidacy for the office is filed) | RECALL PETITION We, the undersigned qualified | electors of the Assembly District 63 | |
|--|--|--|--|-----------------------------|
| etition for the recall of | Robin Vos | | (final-structure at the | aterial of office 1, 11, 1 |
| | (name of officeholder to be recalled and office) | from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin State | | |
| | | | | |
| he reason for recall must be stated on petitions | s for city, village, town, and school district officials. Th | STATEMENT OF REASON FOR RECALL e reason must be related to the official responsibilities of the office he | | |
| islative, judicial, or county officials.) | -111 011 | o 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 |
| | acceptance of | If IDS If OT the CCP failure to protect Wissers to the | | , Granding |
| k 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 | II INC BURNOSES WITTEN | whack-jobs, morons, and idiots. | " | |
| SIGNATURES OF PUREL STORY | ILING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THI STREET & NUMBER OR RURAL ROUTE | NAME OF THE MUNICIPALITY OF DESIDENCE | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | ST ALWAYS BE LISTE |
| 5110 111 | | Rural address must also include box or fire no | Indicate Town, City, or Village | DATE OF SIGNING |
| hotelo Hite | | | □ Town | SIGILITO |
| 10 10 | | | □ City | |
| FOLIDE HERMON | - Late | Could a so | □ Town | |
| Temporal de la constante de la | 170 | 600130 Ane 1)12/06 | Octy Mauxtale cont | C 1110 |
| Kah Carol Harry | estile in | 11 | □ Town | 3-14-20 |
| 1)00/1 Clarg 6-1/18/14 | work Clarge Mesil | 6016 Warden Drive | O City Mt P/MS ~ + | -1.1/00 |
| · | () | 7 9 9 10 10 | D Town | 5/14/96 |
| ne: | | | - U Village | 11/ |
| L | | | ☐ City | |
| | | | D Village | |
| N12 | | | □ City | |
| | | | ☐ Town ☐ Village | |
| | | | □ City | |
| 3 | | | □ Town □ Village | |
| | | | □ City | |
| | | | □ Town | |
| | | | □ Village | |
| | | | □ Town | |
| r 12 | | | D Village | |
| • | | | □ Town | |
| 1. | | | Q.Village □ City | |
| (D) MA I | USTAS certify Le | Certification of Circulator | 1 d dity | |
| | | eside at 1000 Par MICLY | (PA) 72-2 | |
| ther certify I am either a qualified elector of W | isconsin, or a U.S. citizen, age 18 or older who if I was | a maide to Call | (circulator's residence - include number etreet and available) | |
| ignatures on this paper. I know that the signers | are electors of the jurisdiction or district represented by | e a resident of this state, would not be disqualified from voting under the Oficeholder named in this petition. I know that each person signs certification is punishable under § 12.13(3)(a), Wis. Stats. | r Wis. Stat. § 6.03. I personally circulated this recall netition ar | nd nersonally obtained and |
| know their respective residences given | support this recall petition. I am aware that falsifying the | the officeholder named in this petition. I know that each person signs certification is punishable under § 12.13(3)(a), Wis. Stats. | ned the paper with full knowledge of its content on the date in | dicated opposite his or her |
| 5-14-14 | | The state of the s | | 11 01 1101 |
| (Signature of circulator) To (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8 40 and 9.10. This form is prescribed by the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-8005 web: http://clections.wi.gov email: elections@wi | | | | Page No. 972 |
| | the Win State CC 0 to 10 to m. | | | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elec | tors of the Assembly District 63 | |
|---|--|---|--|--------------------------------|
| | tion 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 | f the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office). | STATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on petition | | 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, |
| legislative, judicial, or county officials.) | | vice from the OOD tallows to marke the Wisconsin formula of from the OOD | | |
| | | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| lack of committment to election integrity, blocking | g lower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MA | ALLING 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. Jana Count | James Crowley | 116 N. WisconsinSt | Ullage Dirlington | 5/13/2 |
| 2 Brood Schering | Brad Scheuning | 29131 Bushnoll Rd | Oliv Bun Luxton | 5/13/24 |
| 3. Malala | mark Schonning | MYS-MON GGPD | © Village Bull War War | 16/20 |
| 4. 11/1 | Kolten Krueger | 6543 Foxtel Un | Oction Bullyon, WI | 5/13/24 |
| 5. Margie Ker | MARGIE KERR | 1931 Wheatland Rd. | Oliv Burlytn WI | 5-13-24 |
| 6. Marina ST | Melissa Edwards | 107 waters Edge Ci! | Ullage Burlington NI | 5-13-24 |
| 7. Day Mohe | Kimberly J. MOERKE | 110 Waters Edge Cir | O City Bullylon WI | 5-13-24 |
| 8. Daniel Core | DANIEL CASKEY | 118 WOTERS Edge CIR | O'City Burlingty WI | 5.13-24 |
| 9. Tina Castry | TINA CASKEY | 118 WATERS Edge CIR | O'Village Burlington Wi | 5.1304 |
| 10. | Terry Outlaw | 126 Walter Edge Cir | Uvillage Burl. Ton W1 | 531274 |
| 1. Know Blankon: | entify I | reside at 100 x 5 43/22 GA | and Mairie Dx 94 | 15 C/ H |
| (name of circulator) I further certify I am either a qualified elector o | f 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 by the officeholder named in this petition. I know that each person sign | (circulators residence - include number, street, and municipality) Wis. Stat. § 6.03. I personally circulated this recall petition and the paper with full knowledge of its content on the date it | and personally obtained each o |
| | I support this recall petition. Last aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 973 |
| (date) EL-170 (Rev 2019-09) The information on this form is req | | re of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-26 | 6-8005 web: http://clections.wi.gov email: elections@wi.gov | 1 |

| TO: | The Wisconsin Election Commission | | We show to the state of | | |
|------------|--|--|--|---|--------------------------------|
| 1. | (official with whom nominal | ion papers or declaration of candidacy for the office is filed) | We, the undersigned qualified elec | ctors of the Assembly District 63 | |
| netition | for the recall of | Robin Vos | 0 00 | (jurisdiction of | r district of officeholder) |
| pomio | . To the recall of | (name of officeholder to be recalled and office) | trom office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.1 | 0 of the Wisconsin Statute |
| | | | STATEMENT OF DEASON FOR DECATA | | |
| (The reas | son for recall must be stated on petitions | for city, village, town, and school district officials. The | STATEMENT OF REASON FOR RECALL ne reason must be related to the official responsibilities of the officeholder | | |
| legislativ | e, judicial, or county officials.) | and select district officials, 11 | ie 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, |
| Robin Vo | os 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 co | ommittment to election integrity, blocking | lower proportation drug posts and the sent dis- | The second wisconsinitariniand from the COP, | | |
| | stimilation to dission integrity, blocking | lower prescription drug costs, and flagrant disrespect to | or his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| Тн | E MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN I | MUNICIPALITY OF PEGIDENCE, IC NOT CONTROL TO | I P. SECA | |
| | SIGNATURES OF ELECTORS | PRINTER WAYER OF THE EXCELLENT THAT I | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE | MUST ALWAYS BE LISTED |
| | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | MUNICIPALITY OF RESIDENCE | DATE OF |
| 1.0 | 2. 11 1 | 1 1 | | Indicate Town, City, or Village | SIGNING |
| V | nda Hangdon | Kinda Langdon | 16945tors FL RULL + | O Town | |
| | 1 92 | | 101 outers 20ge Ourringon | acity hunlington | 5-13-24 |
| 2ν | ANAMA XXXXX | Frances la franzo | 269 Waters Edge Burlington | D.Town | |
| -U | mines of oness | Trances latranzo | 267 Waters EDGE Burlington | City Durlin army | 5-13-24 |
| 3 | | | 500 - 500 - 500 | □ Town | 0-13-29 |
| | | | | Q Village | |
| 9 | | | | □ City | |
| 4.00 | · | | | ☐ Town ☐ Village | |
| | | | | □ City | |
| 5. | | | | □ Town | |
| | | | | Village | |
| 6 | | | | □ City | |
| - | | | | □ Village | |
| 7 | | | | □ City | |
| 100 - | | | | □ Town | |
| | | | | □ Village □ City | 100 |
| 8. | | | | □ Town | |
| | | | | UVIllage | |
| Q | *************************************** | | | O City | |
| - | | | | □ Town | |
| | | | | □ City | |
| 10. | | | | □ Town | |
| | | | | ☐ Village ☐ City | |
| 1 | 11 1 1 | | Certification of Circulator 10 | 2 | |
| _/4 | ndull Blankensli | certify: I | reside at Certification of Circulator Control | Prairie IX 750 | -Colle |
| | (name of circulator) | , | ere a resident of this state, would not be disquantied from voting under W | TROUNTE IT TO | |
| o gianot | ertify I am either a qualified elector of V | visconsin, or a U.S. citizen, age 18 or older who, if I we | ere a resident of this state, would not be disqualified from voting under W | /is. Stat. 6.6.03. I personally circulated this recell paties | 505 |
| me Il | now their respective residences since. I | s are electors of the jurisdiction or district represented | ere a resident of this state, would not be disquaffied from voting under W by the officeholder named in this petition. I know that each person signed this certification is aunishable under 8.12.13(2) Win State. | the paper with full knowledge of its content on the dat | and personally obtained each |
| ano i K | iow their respective residences given. I | support this recall petition, am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | . 1 tare missingle of its compile off the date | e marcated opposite his or her |
| | 5-13-24 | _ Blee a NV | in jo | | Page No. 074 |
| | (datc) | (signature | e of circulator | | Page No. 974 |
| 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 608-266-8 | 8005 lweb: http://elections.wi.nov.la-eil.election-Co.: | |
| | | | , | gov jenan elections@wi gov | |

| The Wisconsin Election Commission | 1 | RECALL PETITION We, the undersigned qualified electo | rs of the Assembly District 63 (jurisdiction or di | istrict of officeholder) |
|--|--|--|---|--------------------------------|
| (official with whom nomi | nation papers or declaration of candidacy for the office is medy | from office pursuant to Article XIII, Section | 12 of the Wisconsin Constitution and §.9.10 | Of the wisconsin status |
| - 4 11 C | Robin Vos | | | |
| | (name of officeholder to be recalled and office). | TATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the reca | ll of state, congressional, |
| S II must be stoted on petiti | ons for city, village, town, and school district officials. The r | PATEMENT OF REASON FOR RECALL eason must be related to the official responsibilities of the officeholder. sectors the CCP failure to protect Wisconsin farmland from the CCP, | | |
| | | | 4 | |
| n Vos should be recalled for his tacit supp | out of the Chinese Continues of the continues of the control of th | his own constiuents by calling them "whack-jobs, morons, and idiots." | | WAYE DE LISTE |
| of committment to election integrity, block | ing lower prescription drug costs, and hagrant disrespost | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE Pural address must also include box or fire no. | ME OF THE MUNICIPALITY OF RESIDENCE M | DATE OF |
| THE MUNICIPALITY USED FOR I | MAILING PURPOSES, WHEN DIFFERENT THAN MU | UNICIPALITY OF RESIDENCE, TO | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Kum admess men | □ Town | S111 1/20 |
| SIGNATURES OF ELLECTORS | Az | Par That havelor | ☐ Village | 17/11/10 |
| 11 11 11 m h Land | Anna Shrar Cola | Later Truly 1 | O Town | 15111124 |
| (16/10/100) | The LCT | 3734 Couthrives | U Village 2 | 2(1-1) |
| Media | Lasere o monare | 727 75574 | □ Town | 5/14/24 |
| 12 22 | | 2820 Fleetwood Drive | Octiv Facine | 1711/00 |
| 16-2-2 | MXKUILA | | Town D. C. C. Land | 5/14/12 |
| 1- ^ | I LOD WILL | 1350 261.10) 101/508 9h | orcity Lacine | 100 |
| 0/1/ | 20042011 14116 | Tradition of the second of the | United Para Value | 18/14/24 |
| | 1 1 1 1 1 5 1 5 1 | 1146 Spins Valley ar | Graty /2 // Co | 1.11/12.20 |
| Mian sede | Wich Jacuson | 101 +21/4 | Town Village VIII VI 100 SCM | 5/10/200 |
| Car Con | Sucan CVOUL | 3530 (JOOD Rd 53406 | O City Town | 5/11/00 |
| c Visab Ste | W OUBAN Cross | 8 1 Al 5 5 6 | UVillage CCC WO | 3/10/1000 |
| 12 / | Alanko Sindiste | 5706 SMID. Rd 35% | Town 100 15 101 | a Maina |
| 95-6 | 0 100 10110 | 1 2000 Sotlement tril | O City | D11 11 C9 |
| 1/2 | Caeder Miller | 2006 Jetferiett Hati | Town (| 15/14/24 |
| | | 2037 95th Stuterut WI | ecity Sturtevant | 102/1/27 |
| 2011/20 Porcel | Laura Springer | 30)1 (J- 0)-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | U Town | 15/14/2 |
| TASSES OF THE PARTY OF THE PART | 1 1/4/4 4/1/1/2 | 33376MANE Kache | D City | |
| 0. | VICE /10140 | Certification of Circulator | Recaller I/ 600 | \$202° |
| | = casc la | I reside at 1519 MONTOE St K. | (circulator's residence - include number, street, and multicipality) | llu abtoined |
| Woan Ly | gare TVOV | Treside at | er Wis, Stat. § 6.03. I personally circulated this recall per | tition and personally obtained |
| wther certify I am either a qualified ele | ctor of Wisconsin, or a U.S. citizen, age 18 or older who, if I | I reside at | gned the paper with full knowledge of its content on the | , date market |
| e signatures on this paper. I know that the | ne signers are electors of the jurisdiction or district represent | were a resident of this state, would not be disqualified from voting under the officeholder named in this petition. I know that each person sing this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 97 |
| me. I know their respective residences | 611011111111111111111111111111111111111 | . (1) | | |
| 2/19/19 | (sign | vature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608 | -266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| (date) | State SE 9 40 and 9.10. This form is prescribed by | the Wisconsin Elections Commission (1) | | |

| | RECALL PETITION We, the undersigned qualified elector | rs of the Assembly District 63 (jurisdiction or district | of officeholder) |
|--|--|--|---------------------------------------|
| | RECALL PETITION | 12 of the Wisconsin Constitution and §.9,10 of the wisconsin Constitution and §.9.10 of the wisconsin Constitution Constitution and §.9.10 of the wisconsin Constitution Constitution Constitution Constitution Constitution Constitution Constitu | he Wisconsin Statutes. |
| | . We, the undersease | 12 of the Wisconsin Constitution and 9.3.10 of | |
| The Wisconsin Election Commission (official with whom nomination papers or declaration of candidacy for the office is filed) Probin Vos (name of officeholder to be recalled and office). (The reason for recall must be stated on petitions for city, village, town, and school district officials. The religiblative, judicial, or county officials.) | Sice pursuant to Article XIII, Section | 12 01 010 | anarossional, |
| The Wisconsin Election Commission The Wisconsin Election Commission papers or declaration of candidacy for the office restriction of candidacy for the office restric | from Office pursuant | is required to initiate the recall of | state, congression |
| (official with whom normalism p-r | OF REASON FOR RECALL | No statement of reason is required | |
| netition for the recall of | ATEMENT of the official responsibilities of the official | | |
| and school district officials. The n | eason must be retained wisconsin farmland from the CCP, | | - LOTED |
| (name of officials of the recall of the recall of the recall of petitions for city, village, town, and school district officials. The religistative, judicial, or county officials.) Robin Vos should be recalled for his tacit support of the Chinese Communist Party (CCP), acceptance of the lack of committeent to election integrity, blocking lower prescription drug costs, and flagrant disrespect for lack of committeent to election integrity, blocking lower prescription drug costs, and flagrant disrespect for the MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MEDITALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT PURPOSES, WHEN DIFFERENT T | os from the CCP, failure to protect wiscons morons, and idiots." | OF PESIDENCE MUS | ST ALWAYS BE LISTED. |
| (The reason for recair must officials.) | nis own constituents by calling them "whack-jobs, | AME OF THE MUNICIPALITY OF RESIDENCE | SIGNING |
| Robin Vos should be recalled for his facil support of the support | OF RESIDENCE, IS NOT SUFFICIENT. THE IS | MUNICIPALITY OF Kellinge | |
| lock of commitment to election integrity, blocking lower prescription | UNICIPALITY OF RESIDENT OF RURAL ROUTE | Indicate 10 mg | 5/11/24 |
| HISED FOR MAILING PURPOSES, WHEN DIFFERENCE | Rural address must also include box of the year | D Village 73/2 1/1 m g to | 10/10 |
| THE MUNICIPALITY USED TO THE PRINTED NAME OF ELECTORS | 1 1 17- | DCity SOPETIC | 5/16/24 |
| SIGNATURES OF ELECTORS | 14/2 Browns Lake | Town VIIIage VIIIASUUVIIE | 10/10/01 |
| Gary / hompson | (= CO(1012) | a city Coo | 15/16/24 |
| My By Harm 1 100 da | 718 8, 02 00 | o Town | 100 |
| bayca / loud | 718 S. dox 81. | a city Period II | 15/16/24 |
| 2 () () | 7185. 901 | Village Kansasville | 1 1 1 1 1 1 1 |
| Lang Adower | 1100 | D City Common 11 | 19/16/24_ |
| 3. (- () | 4305 COK KOL | o village Kansasville | 11/10 |
| 2 cancle tratto | Tool Prod | City 1 | 5/16/4 |
| 4 6 6 5 17 | 13418 / Konk 1800 | Town Village 1 115 ft d | 1 |
| Lari Warner | - DIANIC RI | City Part | 5/11/24 |
| 5. To and her | 173418 PINOC | Town Village VA A SVILLE | -1-1 |
| 1 TO WASKE | 1000 | City (FT) | 5/16/29 |
| 6. | SAD SCALLON | o Town Village Ving ton | FILL MA |
| Judge Cleater | 1 0 0 | City VIII | IAMA |
| 7 h li electede/ 10101000 pilling | 34/2 Sheard 050 | o Town | |
| Michael Millis | 1 3412 Sheardird | O City 1 MAY 1 1 | |
| 8. () (A) () (A) () () () () () () () () () () () () () | 1 301- 201-01 | □ Town J | |
| (hat Phillip) | | GC City GC | 207. 24 |
| 9. (1) | 1. ton | · IC CIENSIUN GO | in) |
| Mar 100 | Certification of Circulator | (circulators residence - include number, street, and municipal | petition and personally obtained or h |
| 10. | icu I reside at | og under Wis. Stat. § 6.03. I personally effectiated and | the date indicated opposite |
| - Tiamarhan | ertify. I reside as | erson signed the paper with full knowledge | Page No. 976 |
| Work Driver are 18 or older wh | no, if I were a resident of this state, | | |
| I, | resented by the officiation is punishable under § 12.15 | | POV |
| I further certify I am either a qualified elector of Wisconsin, or a U.S. Citizen, very the signatures on this paper. I know that the signers are electors of the jurisdiction or district representation. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name. I know their respective residences given. I support this recall petition. I am aware that name is the support that the support the respective residences given. I support this recall petition. I am aware that name is the support that name is not name. I know their respective residences given. I support this recall petition. I am aware that name is not name is not name. I know their respective residences given. I support this recall petition. I am aware that name is not name is not name. I know the name is not name is not name. I know the name is not name. I know the name is not name is name. I know the name is not name. I know the name is not name is not name is not name is not nam a support name is name is name is name. I know the name is name | alsi y in e | 266-8005 web: http://elections.wi.pov email: elections@wi.pov | 9 |
| name. I know their respective residences given. I support | (signature of circulator) | 984 008-200 003-1 | |
| SIII ON Com is press | ribed by the Wisconsin Elections Commission 1 | | |
| (date) (d | | | |
| EL-170 (Rev 2019-09) The information on this total is 194 | | 3 | |

| TO: The Wisconsin Election Commission | 6 | RECALL PETITION | | | | | |
|--|--|--|-------------------------------|--|-------------------------|--|--|
| | tion papers or declaration of candidacy for the office is filed) | . We, the undersigned qualified ele | ectors of th | ne Assembly District 63 | | | |
| petition for the recall of | Robin Vos | | | (intisdiction or dist | rict of officeholder) | | |
| • | (name of officeholder to be recalled and office) | from office pursuant to Article XIII, Sect | tion 12 of t | the Wisconsin Constitution and §.9.10 o | f the Wisconsin Statute | | |
| Trobin vos snould be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of the | STATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officehold 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 MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | The state of the s | | | | | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N STREET & NUMBER OR RURAL ROUTE | NAME OF T | HE MUNICIPALITY OF RESIDENCE MUS | ST ALWAYS BE LISTED. | | |
| 1 () | TAINTED HAME OF ELECTORS | Rural address must also include box or fire no | | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF | | |
| 1. Soulie A Tois | SANDRHLOIS | 383 1) weekd (2) | ☐ Town☐ Village | Burlington | SIGNING | | |
| 2. Rev placement | Rene macho og | SI3 Dunford | □ Town □ Village □ City | Racine/Burlington | 5/12/21 | | |
| 3. Apply Byty | Ashly Brewington | 748 S. Pine St. | ☑ Town ☐ Village ☐ City | e de la | 5-13.24 | | |
| Matine Handr | & MAXINE HANDER | CHA CILLONS | ☐ Town☐ Village☐ City | Burlington | 5-12-74 | | |
| 5. Raynard Gondrin | I Ray Hondick | 1108 Hidgler Creek Lane | ☐ Town☐ Village☐ City | Burknaton | 513-24 | | |
| 7 Marther | Comi Dotsin | 465 MARY ST | ☐ Town☐ Village☐ City | BMINETON | Slalay | | |
| 8. Ch 2 0 0 model | Replace Dalls | 928 S. Ane St Bullnothin | ☐ Town ☐ Village ☐ City | BUMUNATON | 5/13/24 | | |
| 9. M. In II I | Chr. 5 Honder | 926 5 Pine Street | ☐ Town☐ Village☐ City | BWligton | 5/13/24 | | |
| 10. Marselly Purpo | g Bradley Hughes | 219 5 Main St | ☐ Town☐ Village☐ City | Burlington | 5/13/24 | | |
| James of Ollon | TAMERA Nelley | COTMEADOW DR #6 | ☐ Town ☐ Village ☐ City | Burgencton | 5-13-2 | | |
| I, (name of circulator) I further certify I am either a qualified elector of W | certify: I re | 104 | 4 / | m Ver Bal 12 | 32946 | | |
| the signatures on this paper. I know that the signers name. I know their respective residences given 1 s | I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of 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. | | | | | | |
| (date) | | | | | Page No. 977 | | |
| , and the state of | This form is prescribed by the W | Circulator) isconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266- | -8005 web: htt | p //elections wi gov email: elections@wi gov | | | |

| TO: The Wisconsin Election Commission | | We the undersigned qualified - | lastana Cil. Assembly Black as | |
|--|--|---|---|-----------------------------------|
| (official with whom nomina | ation papers or declaration of candidacy for the office is filed) | . We, the undersigned qualified e | | |
| petition for the recall of | Robin Vos | from office pursuant to Article VIII Ca | (jurisdiction or | district of officeholder) |
| · · · · · · · · · · · · · · · · · · · | (name of officeholder to be recalled and office) | nom office pursuant to Afficie XIII, Sec | ction 12 of the Wisconsin Constitution and §.9.10 | 0 of the Wisconsin Statutes |
| (TI | | STATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on petition | s for city, village, town, and school district officials, T | he reason must be related to the official responsibilities of the officehol | det. No statement of reason is required to initiate the race | all of state, concernious! |
| Robin Vos should be recalled for his tacit suppor | t of the Chinese Communist Party (CCR), acceptance of | f trips from the CCP, failure to protect Wisconsin farmland from the CCP, | The recommendation of regularies to include the reco | un oj state, congressional, |
| lack of committment to election integrity, blocking | November designation and the second s | r trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | or his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE | NAME OF THE MUNICIPALITY OF DESIDENCE A | ALICE ALIVANO DE LA COMPA |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | | MUNICIPALITY OF RESIDENCE | DATE OF |
| . 10 | | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING |
| 1. // M | Mucha harras | 619 WARREND 1 - | Town By (15 (2)0 | 6/12/2 |
| 7 / 7 | Mysta ngueron | all received in | ocity TUG LIVES TON | 1)//3/24 |
| 2. (4. 11/1.1-1 | CHARLES S VERNUN | / . 0 | ™ Town | 10/10/1 |
| Children of the Control of the Contr | CHARLES S VERSUN | COLY MEADOULN | Ocity BURLINGTON | 5/13/74 |
| 3. 1 | b | / | □ Town | - 115/21 |
| Lucia Keyes | Lucia Buyes | 019 MEADOU LN | Ocity Burling ToN | 15103124 |
| 4. Ones S. Yenr | Bound to Port | TOU MEADON IN | ☐ Town Ø / / | 2/1 |
| Yangi C | Jryan - 12-C | 121 hours Mr. | City Pulidation | 5/13/24 |
| 5. | B-6 Nhan | 0201 | □ Town | 7.3/ |
| | 10011195/Veiz | 1/29 MEROW LL | City BURKINER | C-12-76 |
| 6 | | | □ Town | 772 |
| | | | □ Village □ City | |
| 7. | | | □ Town | |
| | | | □ Village | |
| 8. | | | ☐ City | |
| | | | □-Village | |
| 9 | | | D City | |
| *** | | | ☐ Town ☐ Village | |
| 10. | | | □ City | |
| 10. | | | ☐ Town | |
| | 11 | | □ City | |
| cosias f | Induja | Certification of Circulator | A 11 / 10. | |
| (name of circulator) | , certify, I | | If we dad the | 32966 |
| 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 by the officeholder named in this petition. I know that each passen sign | (circulator's residence - include number street and municipality) | |
| 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 by the officeholder named in this petition. I know that each person signification is punishable under 8.12.13/3/a). Wis State | med the paper with full knowledge of its content on the date | n and personally obtained each of |
| tame 1 know then respective residences given 1 | support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | and paper with ran knowledge of its content on the date | mulcated opposite his or her |
| 11129 | | | | Page No. 978 |
| (date) | ed by Wis State 88 9 40 and 0.10 | e of circulator) | | 310 |
| the management on any total is require | ed by this Glats 98 a 40 and 9 10. This form is prescribed by the | e of circulator) Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-20 | 66-8005 web: http://elections.wi.gov.lemail.elections@wi.gov | |

| | | . We, the undersigned qualified elect | tors of the Assembly District 65 (jurisdiction or distr | rict of officeholder) |
|--|---|--|--|----------------------------------|
| TO: The Wisconsin Election Commission | on papers or declaration of candidacy for the office is filed) | The service of the se | Constitution and \$ 9.10 of | the Wisconsin Statutes. |
| | Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | |
| petition for the recall of | e or 1 the to be recalled and office) | | | |
| | (name of officerolder to be recalled and | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder | No statement of reason is required to initiate the recall of | of state, congressional, |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | for city village, town, and school district officials. The | reason must be related to the official responsibilities of the officeholder | . No statement of reason to require | |
| (The reason for recall must be stated on petitions) | for city, vinage, to m, and amount | and the sector Wisconsin farmland from the CCP. | | |
| Pobin Vos should be recalled for his facit support of | 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 i | ower prescription drug costs, and 3 | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N. STREET & NUMBER OR RURAL ROUTE | AME OF THE MUNICIPALITY OF RESIDENCE MU | ST ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | IUNICIPALITY OF RESIDENCE, IS NOT SUPPLED. | MUNICIPALITY OF RESIDENCE | SIGNING |
| | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate Town, City, or Village | Sidimio |
| SIGNATURES OF ELECTORS | TRICTED TOTAL | TOTAL BOOK OFF | Town | 10/12/20 |
| | | 2715/071-5+ 11 NUNGANG | City UNION Crove | 3/13/24 |
| A DUN | Datod) Ameno | 521510 1. J. WILDER | □ Town Λ | T/12/21 |
| TO A | 1 | 100 6 Kana St | U City Strate | 12/12/24 |
| A Consel It me | W LASKIA ZX | 1917 | □ Town | 1 1 |
| Villy Notes That A | | 1101 0 510101 | UVillage Q () | 5/13/2024 |
| 3. 1.86 (1) | Todd Cipponard | 461 Knd01015 | scity DUTTYTCH COL | 1211111111 |
| from Cu. | TOTA CA CHICLO | 101 101 | U Town | 15/12/24 |
| 41 | 1 | 1461 Landolph St | Scity Dalling | 111221 |
| Musucha | Amanda Gerth | | Town | |
| | | | □ Village □ City | |
| 3, | | | □ Town | |
| | | | ☐ Village | |
| 6. | | | □ Town | |
| | | | - G-Village | |
| 7. | 7: | | ☐ City | |
| | | | Village | |
| 8 | | | ☐ City | |
| | | | □ Village | |
| 9 | | | □ City | |
| | | | ☐ Town ☐ Village | |
| 10 | | | □ City | |
| 10 | | Consulator | N 1 Davida | WI 53158 |
| | 1 10/01/0 | Certification of Circulator | Measant Mairie | 105,00 |
| 1. Mudison Jan | NO DEWOLF certify | . I Tesido de | (circulator's residence - include number, street, and municipality) | on and personally obtained each |
| (name of circulator) | THE SHIP OF A PROPERTY WHO IF | I were a resident of this state, would not be disqualified from voting und ted by the officeholder named in this petition. Know that each person sing this certification is punishable under § 12.13(3)(a), Wis. Stats. | ler Wis, Stat. § 6.03. I personally circulated this recan period | te indicated opposite his or her |
| I further certify I am either a qualified elector o | f Wisconsin, or a U.S. citizen, age 18 of older wite, in | ted by the officeholder named in this petition. Know that each person s | signed the paper willi full knowledge of the content | |
| the signatures on this paper. I know that the sign | I support this recall petition. I am aware that falsify | ing this certification is punishable under § 12.13(3)(a), Wis. Stats | | Page No. 979 |
| 16/13/030/ | | | | |
| 05/15/2024 | - A Gragi | nature of circulator) | 8-266-8005 lweb: http://elections.wi.gov email: elections@wi.gov | |
| (daty) | quired by Wis. Stats §§ 8.40 and 9.10. This form is prescribed by | nature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 13707-7984 608 | 0-200-0000 [1100: MITTER TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL | |
| EL-1/0 (Key 2013-03) The information on this form is re- | | | | |

| | | RECALL PETITION We, the undersigned qualified elector | s of the Assembly District 63 (jurisdiction or district 12 of the Wisconsin Constitution and §.9.10 of the | of officeholder) he Wisconsin Statutes. |
|---|---|---|---|---|
| The Wisconsin Election Commission | papers or declaration of candidacy for the office is filed) | from office pursuant to Article XIII, Section | 12 01 416 11 11 | angrassional. |
| on for the recall of | (name of officeholder to be recalled and office) | FATEMENT OF REASON FOR RECALL The related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recall of | state, congression2- |
| for regall must be stated on petitions fo | r city, village, town, and school district officials. The i | ps from the CCP, failure to protect Wisconsin farmland from the CCP, his own constiuents by calling them "whack-jobs, morons, and idiots." | | |
| reason for fecal meaning officials.) | the Chinese Communist Party (CCP), acceptance of tri | ps from the CCP, failure to protect Wiscomain and idiots." nis own constituents by calling them "whack-jobs, morons, and idiots." UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | TOUGHALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| n Vos should be recalled for this task sep- | wer prescription drug costs, and flagrant disrespect for | INSUMPCONDENSION OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE | SIGNING |
| of committment to election integrity. | INC PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE OF RURAL ROUTE STREET & NUMBER OR RURAL ROUTE | Indicate Town, City, or Village | 1 = 114124 |
| THE MUNICIPALITY USED FOR MAIL | PRINTED NAME OF ELECTORS | Rural address must also include box or man | Ryillage Sthickevant | 13/11/4 |
| SIGNATURES OF ELECTORS | | a w at the Sturtevant | Brown Sturtevant | 6/11/211 |
| 21 11 1 | Debra Hanko | 3046 90 30 | grillage Starteway | 13/19/104 |
| Diemo Harry | Turella Ferril | 3715 91 5 Juli Cary | Town Village < Livetywom D | 5/14/04 |
| tucella terril | Tyrella FCITT | 20011918 Aurtowan | ocity Comment | 11:14,21 |
| III D. The son | How was go | 300 9 A Ryskey | City SWATE VANT | 7 11 1 |
| to attack was a | The state of | 3219 98 101 31 311/9 11 | TOTOWN Charles (Collin) | 414/24 |
| 4 RAID V STRANKIN | In Remy will | Lagua Marcil Ann Drive Sture | Whyliage SI WY TCV WYV | 15/14/70 |
| FOR TOTAL AND IN | Livroin Outnewes | Of the Control of the state of | O Village CHUY HOVEM T | 1111100 |
| 3 MIRITING OTRIV | 1 1 0 | 291 95 W STYRET | City Town | 5/14/2 |
| 6 Stonhanie Coercied | Weghan Selvis | 3324 Bustingham Rd | ocity Studener | 1-/11/1/20 |
| JIMPHATA JIM | Kathania Koch | 3324 DUBITYTON 1 5.1P | 1 Town Strate mut | 5/14/24 |
| 7. Katherine Roch | True and te | 23332 Kennsineton gre | Gity Of Estate | -1- |
| 8. A. A. Lind | U DOROTHY LINGAN | O DOCINE | U Village | |
| Morning A congre | | | □ Town □ Village | 1==== |
| 9. | | | C) City | WI 53158 |
| 10 | | Certification of Circulator | Pleaseunt Prouve | |
| 10. | D1/14 | Certification of 12454 41 of OL | (circulator's residence - include number, street, and municipality) | ition and personally obtained |
| Madison Jan | ne Veryon cert | ify: I reside at if I were a resident of this state, would not be disqualified from voting usented by the office holder named in this petition. I know that each person strying this certification is punishable under \$12.13(3)(a) Wis. Stats. | nder Wis. Stat. § 0.03.1 per support on the a signed the paper with full knowledge of its content on the | date indicates of |
| I, (name of circulator) | or of Wisconsin, or a U.S. citizen, age 18 or older who | of I were a resident of this samed in this peritton. I know that each personnel by the office holder named in this peritton. I know that each personnel by the office holder named in this peritton. I know that each personnel by the office holder named in this peritton. | ************************************** | Page No. 98 |
| I further certify I am either a qualified elector | signers are electors of the jurisdiction or district teples | sifying this certification is punishable under | | |
| name. I know their respective residences gr | Veil 1 support an | WI 53707-7984 | 608-266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| 05/14/2024 | is required by Wis. Stats. §§. 8.40 and 9.10. This form is prescrib | (signature of city flator) ed by the Wisconsin Elections Commission P.O. Box 7984 Madison, WI 53707-7984 | | |
| (Asha) | | | | |

| TO: The Wisconsin Election Commission | We, the undersigned qualified elect | ors of the Assembly District 63 | | | | |
|--|--|--|-------------------------|--|--|--|
| TO: The Wisconsin Election Commission (official with whom nomination papers or declaration of candidacy for the office is filed) | , we, are uncoronant quantities | (jurisdiction or distri | ct of officeholder) | | | |
| petition for the recall of Robin Vos | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. | | | |
| (name of officeholder to be recalled and office) | | | | | | |
| | STATEMENT OF REASON FOR RECALL | No. 1 | friata comprassional | | | |
| (The reason for recall must be stated on petitions for city, village, town, and school district officials, The | ne reason must be related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recuit of | state, congressional, | | | |
| legislative, judicial, or county officials.) Robin Vos should be recalled for his tacit support of the Chinese Communist Party (CCP), acceptance or | 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 f | | | | | | |
| | | | - MANUAL DE L'OTTE | | | |
| THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS MUNICIPALITY OF RESIDENCE | DATE OF | | | |
| SIGNATURES OF ELECTORS PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING | | | |
| David Diller | 232 BNUGO NO | Evillage 3) Burlington | 5/3/2 | | | |
| 2. DAVID Brown | Parton | UVillage | 5/13/24 | | | |
| 3. Marilee Gloe Mgh | 33631 Janesville Dr | or village Mukwonago W1531 | 49 5/13/24 | | | |
| 4. Mantazon Merarda Biring | 31505 Bear Arbor Dr. | Village Bullington | 5/13/24 | | | |
| 5. Dhenda Gwen Cox | 232 Bridge St Apt 246 | Unilage Bullington | 5/13/24 | | | |
| 6. Tristure annea Tristan Lenke | W 1058 Spring Prairie Rd | Town Drown | 5/13/29 | | | |
| 7. JAJGYE TED SCHOLE | CONKZY | U Village 50 ZVV | 2/13/24 | | | |
| 8. By DEWS RICK L Neton | 8039- Fed Hotely (1) | o Village / 3 and left | 5/13/24 | | | |
| 2 Statulle Greg Petroselli | #117 ce-da/1 st | O'City Bully NA | 5/13/241 | | | |
| 10 pie fetrelli PATRICIA PETROZE/li | 117 Kandall St. | O Village BoxCing Too | 5/13/24 | | | |
| | Certification of Circulator I reside at 469 HILCEPST R | Coreulator's residence - include number, street, and municipality) | 13024 | | | |
| (name of circulator) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her | | | | | | |
| name. I know their respective residences given. I support this recall petition. I am aware that falsify | ng this certification is punishable under § 12.13(3)(a), wis. Stats. | | Page No. 981 | | | |
| | ature (New Johnson 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- | tors of the Assembly District 63 | | | | |
|--|--|--|--|---------------------------|--|--|--|
| (official with whom nominati | on papers or declaration of candidacy for the office is filed) | | | 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. | | | |
| 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 | . No statement of reason is required to initiate the recall o | of state, congressional, | | | |
| | | 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 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. | Karmain Hofmann | 144 Kendall St. | Otown Unilage Burlington | 5/13/24 | | | |
| 2. Pint | Donglas A Helucor | 188 Kendall street | O'Vilage Bullins | 5/13/24 | | | |
| 3. Jak Hantist | JACK Rambicat | 348 Smith St. | Ortown Durlingt | 5/13/24 | | | |
| 4. Jacky Kenne | Themy | 20 Lewis St | Village Bullwylon | 5/13/24 | | | |
| 5 Bullying | Barb Aprizzo | 201 Lewis ST | O Village Bur ling ton | 5/13/24 | | | |
| 6. | Hope Beix-Steininger | 245 Lewis St #2 | O Village Burlington | 5/13/24 | | | |
| Theresol Illi | Theresa Little | 348 Lewis St. | Ullage Burlington | 5/13/24 | | | |
| 8mhyrdeul | Troy Moldenhaver | 313 Conkey St. | O Village Barlington | 5/13/24 | | | |
| 9. 9 | Tak Schmidt | 309 Conley St | O Town O Village O City O Why | 5/13/24 | | | |
| 10. Auget 3 | Argel Zoellner | 86 McHerry St. | Uvillage Burlington | 3/13/24 | | | |
| I, ANDLEW HOY , certify: I reside at 469 HILLEROST ROLD GRAFFORM 53024 | | | | | | | |
| (name of circulator) (circulator's residence include number, street, and municipality) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her | | | | | | | |
| name. I know their respective residences given. I support this recall petition. I am aware that falls fring this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 982 | | | | | | | |
| EL-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 | 5-8005 web: http://clections.wi.gov email: elections@wi.gov | A | | | |

| | | | RECALL PETITION We, the undersigned qualified elected. | ors of the Assembly District 63 | |
|-----|---|---|---|--|-----------------------------------|
| | - La Flanting Commission | | | ors of the Assembly District of (jurisdiction or distri | ct of officeholder) |
| , Т | O: The Wisconsin Election Commission | on papers or declaration of candidacy for the office is filed) | or Article VIII Section | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| | | Robin Vos | from office pursuant to Afficie Affi, seems | | |
| p | etition for the recall of | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | a serviced to initiate the recall 0 | of state, congressional, |
| | | S | reason must be related to the official responsibilities of the officeholder. | No statement of reason is required to initiate the recent | , |
| (| The reason for recall must be stated on petitions | for city, village, town, and school district officials. The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder. reason the CCP, tailure to protect Wisconsin farmland from the CCP. | | |
| - 1 | epistative, marcial, or county officials, | acceptance of the | DS ROIT tile COT, Tallare Ta | | |
| 1 | Robin Vos should be recalled for his data support | lawer prescription drug costs, and flagrant disrespect for | his own constituents by calling them "whack-jobs, morons, and idiots." | TOTAL MILE | ST AL WAYS BE LISTED. |
| 3 | ack of committment to election integrity, blocking | lower prescription oraș | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE Burd address must also include box or fire no. | AME OF THE MUNICIPALITY OF RESIDENCE MO | DATE OF |
| I | THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN M | STREET & NUMBER OR RURAL ROUTE | Indicate Town, City, or Village | SIGNING |
| l | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Town / I. | 105/13/14 |
| 1 | | -/ . | CUA CON Les CICH | Village Dyrlington | 001/1/12 |
| | 1. Jan Cim | Tan Gusserson | 649 tox tile circu | Town 1 | 1/3/12/1 |
| | curi co | 1 . / | 1-44 100 -2010 | Surlingle Burlinglon | 05 11002 1 |
| | 2. | Tim Mankel | 65 POR NOR CIECH | Town | 5/13/14 |
| | 241 | | a III Kar Kom I rate. | Scity Burlington | 11/10/04 |
| ì | 3. | MIKE TESTAMAIE | 0 465 12 116 CIGE | Town | 4/17/29 |
| | 11/2/1 | 10 04 130+7 | 1. Idala Fox Tres Carde | o village Burlington | 3//3/2/ |
| i | 12 KONINGO | 1 K. RUYPSIA | 000/01/ | Town O I Lou | 5/13/24 |
| 1 | 1.000 | 1 101101 -00101 | TOUSOS BRUK ALVINOLIVE | Proity Builington | 111111 |
| | 5. WINDER OF THE | HOVE CUBE | DI VICTORIAN INTERNAL DIA | Uvillage Rurling ton | 11/2/24 |
| | Walley A | Dista Caratila | 19x 0/01/2 dC | arcity Par III | 3 (13) 20 |
| • | 6. 1/4 X J W | KING COCO | 1000 | U Town | 4/13/19 |
| | | Paul Puleton | 173 Clover dr | acity Dat Irg 1 | 7/07 |
| | 10 | Paul Culeion | 0 1100 | D Town | T/1/24 |
| | 01 | 1 0 P GOTECH | 130 clavel 11 | Delly Part x) 100 | 13/13/ |
| , | " (2 1941) Flack | hogen courses | 1 201 | Town Village Can Josefa | 13/34 |
| 1 | 2/1/1/1 | I Calla Shuda | 789 Chicory Ra | Deity DUPITO | 51 100 |
| | " lu lux pora | Carla Spoots | 500 00 01 | UVillage Kur (h9+2) | 5/13/24 |
| | 10. | 6 Spenox Sped | 789 Chilory FO | Grotty / State | 6 00 10 |
| | 18 | B 0100 02 3/ 351 | Certification of Circulator | Ivd Carlsbal, Ct | 1 92008 |
| | n lin | (A He // certify: | : I reside at 5/85 C4713 626 7 | (circulator's residence - include number, street, and municipality) | ion and personally obtained each |
| | I, (naute of circulator) | (9) | I were a resident of this state, would not be disqualified from voting und | ler Wis. Stat. § 6.03. I personally circulated this recall petiti | ate indicated opposite his or her |
| | I further certify I am either a qualified elector | of Wisconsin, or a U.S. citizen, age 18 or older who, it | I were a resident of this state, would not be disqualified from voting und red by the officeholder named in this petition. I know that each person sing this certification is punishable under § 12.13(3)(a), Wis. Stats. | algued the habet with ran knowledge | Page No. 002 |
| | the signatures on this paper. I know that the signatures of the signature residences give | gners are electors of the jurisdiction. I support this recall petition. I support this recall petition. I am awaro that falsify | ing this certification is punishable under § 12.13(3)(a), Wis. Stats | | Page No. 963 |
| | name. I know then respective residences give | (/) // // | | | |
| | (date) | - Sign | nature of circulator) | 8-266-8005 web: http://elections.wi.gov email: elections@wi.gov | |
| | EL-170 (Rev.2019-09) The information on this form is r | equired by Wis Stats §§ 8.40 and 9.10. This form is prescribed by | nature of circulator) y the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 609 | | |
| | | | | | |

| T. | The Wisconsin Election Commission | | We, the undersigned qualified elec- | tors of the Assembly District 63 | | | | |
|----------|--|--|---|--|---------------------------------|--|--|--|
| T(|): The Wisconsin Election Commission | on papers or declaration of candidacy for the office is filed) | We, the undersigned quantities that | (jurisdiction or distri | ct of officeholder) | | | |
| | | | c cc Adial VIII Cartio | on 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes | | | |
| pe | tition for the recall of | Robin Vos | from office pursuant to Afficie Affi, Section | on 12 of the wisconstit Constitution and §.7.10 of | the Wisconsin Statutes. | | | |
| - | | (name of officeholder to be recalled and office) | CE DE LOON HOD DECALL | | | | | |
| | | S | TATEMENT OF REASON FOR RECALL | and the state of t | C-4-4- | | | |
| (T) | he 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 | f state, congressional, | | | |
| 1.00 | statative indicial or county officials) | | | | | | | |
| Ro | bin Vos 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, | | | | | |
| _ | | leures are serintian drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | | | | |
| lac | | | | | | | | |
| | THE MUNICIPALITY USED FOR MAI | ILING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. | | | |
| - | | | STREET & NUMBER OR RURAL ROUTE | MONICH ABITT OF RESIDENCE | | | | |
| | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Indicate Town, City, or Village | SIGNING | | | |
| \vdash | N A | | 1132 11 1 | O_Town | F-17-7/1 | | | |
| , | 1 | HARNIAN VM AS | I USS MOON GUM HAVE | Village Kolhoster | 151204 | | | |
| | AND DALLOS | 11211600102 | 133 Viller Chariffine | Q'Town | | | | |
| | 200 = = = = = | and and | Occar DA | a Village By sunstan | 5-13-24 | | | |
| • | - MYVOC | Minel Priver | 17724 WOOCKWA PI | LI City | | | | |
| - | | | 1 0 0 | Town O | 10 7/1 | | | |
| ! | 3. Alecco Unalle | Respecca Mueller | 1812 Moiler KX | ocity Out in out on | 19-12-61 | | | |
| L | reductor if which | There is a five tite | out weller too. | D Town | C.274 | | | |
| | 4 () (1) | In Acres | 165 10 Didae | UVIIIage VIII ON | 1 >-1>-27 | | | |
| 4 | lose horse | Dagns Gereph | 10) 17ay 12109E | active During | | | | |
| | - / | | 1212 | Town Rivers | 5-13-24 | | | |
| a Li | | 1. Julie Schumacher | 1417 sabel Lane | O Village Burlington | 13-27 | | | |
| ` | | Outil Selection | | □ Town | | | | |
| | 6. | | | □ Village | | | | |
| 1 | -1 | | | □ City | | | | |
| | 7: | | | □ Town □ Village | | | | |
| - 11 | | | | □ City | | | | |
| ⊩ | | | | Town | | | | |
| - 1 | 8 | | | □ - Village - · · · · · · · · · · · · · · · · · · | | | | |
| L | | | | □ Town | | | | |
| | 9 | | | □ Village | | | | |
| - 1 | · 1 | | | □ City | | | | |
| ┢ | | | | □ Town | | | | |
| - 1 | 10. | | | □ Village □ City | | | | |
| | | | | | r | | | |
| | Mus 11 C | 11-11 | reside at 5175 Calls bad Blk | Cack bud (A 920) | k7 | | | |
| I, | I, Quent'n (street) certify: I reside at 5185 Cath Bac BIR (circulator's residence - include number, street, and municipality) | | | | | | | |
| , | (name of circulator) | | | Wis Stat 8 6 03 I personally circulated this recall petition a | and personally obtained each of | | | |
| Ιí | (name of circulator) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her | | | | | | | |
| th | e signatures on this paper. I know that the sign | ers are electors of the jurisdiction or district represented | this certification is punishable under 8.12.13(3)(a). Wis. Stats | no me puper mini tan inio meage of the comem on the ance i | | | | |
| na | ame. I know their respective residences given. | i support this recall petition. I amaware that that the | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 984 | | | |
| | 11-10-29 | 11.1180 | 1 | | 1 ° JU-T | | | |

(Classic)

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

| TO: | The Wisconsin Election Commission | | We, the undersigned qualified elec | ators of the Assembly District 62 | | | |
|--|---|---|---|--|-----------------------------|--|--|
| | (official with whom nominal | ion papers or declaration of candidacy for the office is filed) | we, the undersigned quantied elec | | ' 4 C CC 1 11 1 | | |
| petition | for the recall of | Robin Vos | from office pursuant to Article VIII Senti | (jurisdiction or dist | | | |
| • | · | (name of officeholder to be recalled and office) | nom office pursuant to Article Affi, Section | on 12 of the Wisconsin Constitution and §.9.10 or | the Wisconsin Statutes. | | |
| | | | STATEMENT OF REASON FOR RECALL | | | | |
| (The reas | 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 recell | C-1-1 | | |
| | | | | To statement by reason is required to initiale the recutt to | y state, congressional, | | |
| | | | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | | | |
| lack of co | ommittment to election integrity, blocking | lower prescription drug costs, and flagrant disrespect for | r his own constiuents by calling them "whack-jobs, morons, and idiots." | | | | |
| Тн | E MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN M | MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | AME OF THE MUNICIPALITY OF DESIDENCE MUS | T ALWAYS DE LISTED | | |
| | 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 | | |
| 14 | olli Moche | Holli Mocacan | 1333 cakes ep Apt 16 | Unilage mt. Dleasant | 5/16/29 | | |
| 2. | 10/2 | 10,0 | 17/10/ 0/15 | Town | -101001 | | |
| | Rayron W | railion 249 | 1511 001000 PAISOLIS | Uvillage // / // // // // // // // // // // // | SIVIOR | | |
| 3. | 11 ' /) | 11 | 420 11 11 | Town | 114/207 | | |
| 3. | Jul Co | Christian Conner | 4300 You dr Ax 120 | Oth Mt Plasen | 5/16/24 | | |
| 4. 4 | lule | Cairlin convicaner | 14300 Vates dr Apt 120 | Orown Olive MEIP RAS ant | 5/16/14 | | |
| 5. | Strongt | Linea Schmitt | 4410 Yates Apt207 | or own or | 5/16/24 | | |
| 6. | Jan Jans | Don Davison | 4705 127th Pl. | Uvillage City | 5-11-74 | | |
| 7. 1 | Mel III aval | Priscilla Villavreal | 4420 YATES DY NO+ 209 | O Town O Village MAI Place and | 5 162 | | |
| ~ | 11/0/00000 | THISTI A O LOVITOR | 79 CO YATES DY AP+ 209 | acity MA PRASMI | 5-16-24 | | |
| 8. | 1/2 | Avil James | x+4430 yates br. #20 | 10 Village Mt. Plasant | 5/14/24 | | |
| 9. | | Victory David | 1264) ARCHAINGT AN | U Town | -1 1 | | |
| <u> </u> | 0014 | V 1 3 H V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 6204 LARCHMONNT DR | Gily MY) (L(ASAN) | 05/16/24. | | |
| 10. | m | (eligh mills | B- 149 Oaks KN MMHDI | Utiliage OF OFTUM | pellio 12 | | |
| ī | To Hal Autle | | Certification of Circulator | add the first th | 03 14/2 | | |
| ı,\ | Jane of circulator) | , certify: I | reside at 230 RIVERWOOD ST | Richland WA 993 | 521 | | |
| 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 discussed as a few life. | | | | | | | |
| | | | | | | | |
| name, I k | now their respective residences given. | support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | a the paper with run knowledge of its content on the date in | uicated opposite his or her | | |
| | 5/16/L024 | - Va | - Ch | | Page No 985 | | |
| L-170 (Rev. | 2019-09) The information on this form is requir | (signature ed by Wis, Stats, §§, 8.40 and 9.10. This form is prescribed by the | c of circulator) Wisconsin Elections Commission P.O. Box 7984, Medican, WI 53707, 7084 608, 266 | 9005 hada Taris Walland | | | |
| | 170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-8005 web: http://clections.wi.gov email: elections@wi.gov | | | | | | |

| TO: | The Wisconsin Election Commission | | West | | | |
|--|---|--|--|--|---------------------------|--|
| - | (official with whom nominati | on papers or declaration of candidacy for the office is filed) | We, the undersigned qualified elec- | | | |
| petition | of for the recall of | Robin Vos | £ CC | (jurisdiction or dis | trict of officeholder) | |
| • | | (name of officeholder to be recalled and office) | irom office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 o | f the Wisconsin Statutes. | |
| | | | STATEMENT OF DEACON FOR PROJECT | | | |
| (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 annual in the state of the s | | |
| legislati | ve, judicial, or county officials.) | of the Ohious O | and the original responsibilities of the original | No statement of reason is required to initiate the recall t | of state, congressional, | |
| TIODIII VI | os snould be recalled for his tacit support | or the Chinese Communist Party (CCP), acceptance of t | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | | |
| lack of c | ommittment to election integrity, blocking | lower prescription drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots." | | | |
| | | | | | | |
| | SIGNATURES OF ELECTORS | EING FOR OSES, WHEN DIFFERENT THAN M | IUNICIPALITY 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 | DATE OF | |
| 1. | 0.01 | (i) | | Indicate Town, City, or Village | SIGNING | |
| (| July Mr. | Variel Peck | 819 Teutonia | UVillage TOUNDAN | 5 11/21 | |
| 2. | 0 | | Cia - : | D Town | 1-14-19 | |
| |) a - (| Taxilla Le CK | 8/7 Tentonia | □ Village | 511 ton | |
| 30 | Milas | | | Town 2 Car (12 Fan | 2/14/64 | |
| | | Der of Me | 834 Testonia Dio | □ Village / / | -1 11-11 | |
| 1 0 | | | 001 20170 | acity Durllington | 2/14/24 | |
| V | AND hollis | Soanne So Fasra | 800 Text . Dr. Apt | □ Town □ Village | clila. | |
| 5. | 200 | Jocc 1112 - 50 1 6 41 C | 1 etupia Die | ocity Dutington | 5/14/29 | |
| J. (r.: | 1000 | PETER FOU | 200 PRINCE -TREET | Town Village R. O. (a) | -/-/ | |
| - | | 111 90 100 | 200 DRIDGE STREET | OCIN DURCLINGGON | 3/1828 | |
| 6. 5 | and Report | ashe K. h | 180 Bale 5+ | □ Town □ Village | rl. O | |
| - | 1 () n' | The state of the s | 100 12mm 577 | Ochy Sulkhaten | 7/14/24 | |
| 7. | Musi Doole | Shakon Irolin | MUO3 INS BOUNDS | □ Town □ Village | -1 | |
| | 7000 200 | 9191 (C) (D) | 700 100 1011 492 51 | ocity On 1000 | 14/24 | |
| 8. | lu 1= | TRAI DON 141 | 108 B- 1 11 11 1 1/02 | □ Town □ Village | 1 1 1 | |
| 0 1 | 5 1 2 20 1 | THE DOCCINE | 100 OFICIO ST NOT 903 | acity Bulington | 5/14/24 | |
| 9. 1 | Valores 971 | en DULORES 5. WI | = 1501) 180 Brisas St | □ Town □ Village | -1111 | |
| / | 7- 1 PS | | 23 % 1 13 Tege 21 | 1 City BU1129 Ta | 5/14/24 | |
| 10. | 4 | - Tim FESENMARER | 3902 lake C+ | Town Village R 1/1 | 7/10 | |
| -/- | a feet | 1111 1 -> -> 10/1/4/41 | TUNC 7 | city Pullington | 5/14/24 | |
| | Richard T Par | te T | Certification of Circulator | 0 11 00 9/21 | 7.11 | |
| · — / | (name of circulator) | , certify, 1 fe | | City XK 72521 | ñ (8) | |
| further c | ertify I am either a qualified elector of W | risconsin, or a U.S. citizen, age 18 or older who, if I wer | re a resident of this state, would not be disqualified from votice and a ve | (circulates's residence - include number, street, and municipality) | | |
| further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I 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 ame. I know their respective residences given. I support this recall petition. I am aware that disfying this certification is punishable under 8.12.13(3)(a). We state | | | | | | |
| anic I K | ame. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. | | | | | |
| 3 | 2/14/24 | - Packod ! | VIII V | | Page No. 986 | |
| -170 (Rev | (date) 2019-09) The information on this form is required | d by Wis State 88 8 40 and 9 10. This form is not | of circulator) Visconsin Electrons Commission P.O. Box 7984 Madison WI 53707 7084 1608 266 | | 300 | |
| | , in and tonal is required | , State 33 0 TO min 2 TO This form is prescribed by the V | VISCONSIDE LICEGIONS COmmission P.O. Box 7984 Medicon, WI 52707 7084 L608 266 | TOOK I I NINGSHORE SHOOLE SHOO | | |

| The Wisconsin Election Commission | | We the understand qualified electr | rs of the Assembly District 65 | |
|--|--|---|---|----------------------------|
| 11.0 .1100011211. | | We, the undersigned qualified elected | | strict of officeholder) |
| (official with whom nominate | ion papers or declaration of candidacy for the office is filed) | S on Add Will Continu | 12 of the Wisconsin Constitution and §.9.10 of | of the Wisconsin Statute |
| | Robin Vos | from office pursuant to Article XIII, Section | 112 of the Wisconsin Control | |
| ion for the recall of | (name of officeholder to be recalled and office) | A SON FOR DECALL | | |
| | \$ | STATEMENT OF REASON FOR RECALL e reason must be related to the official responsibilities of the officeholder, | No statement of reason is required to initiate the recall | l of state, congressional, |
| for exact 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 officerolder | THO BELLEVILLE ST. T. T. | |
| reason for recall finds be stated on permone | , ioi oily, iiiiigi | the CCP, trillure to protect Wisconsin farmland from the CCP, | | |
| n 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, | | |
| | The state of the s | this own constillants by calling them what jobs, morons, and the | | |
| of committment to election integrity, blocking | lower prescription drug sees, | AUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE | ME OF THE MUNICIPALITY OF RESIDENCE M | UST ALWAYS BE LISTE |
| THE MUNICIPALITY LISED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN M | AUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | MUNICIPALITY OF RESIDENCE | DATE OF |
| | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF EDUCATIONS | KUrai address inds. also indeed on s. in the | STOWN / / | 7 /14/ |
| | | B902 GRE St. BUrlington, WI | Uvillage Buch netan | 0/17/0 |
| 16211 | I popin laridate II | 7.00 0000 013010101011 | Town O | -leston |
| | 1 CONT VANGALON | 717 + 112 1: | U Village B. / | 5//4///9 |
| Har den- | Malula lienter | (1) 1) K mai 17.5+ Dul Ingt | 1/2 City 1/4/1/29 7 | |
| 1-02 1002 | 1161111 219911 | 7.7.1.11 | Town | |
| | | | □ Village □ City | |
| | | | □ Town | |
| | | | ☐ Village | |
| | | | City | |
| | | | ☐ Town | |
| | | | □ City | |
| | | | □ Town | |
| | | | ☐ Village | |
| , | | | Town | |
| | | | ☐ Village | |
| | | | □ City | |
| | | | □ Town □ Village | |
| | V | | □ City | |
| | | | - 0.0 | |
| 0 | | | □ Town | |
| () <u></u> | | | Town | |
| | | | ☐ Town ☐ Village ☐ City | |
| | | | Town | |

| TO: The Wisconsin Election Commission | | RECALL I ETITION | | | |
|---|---|---|--|-----------------------------|--|
| | ntion papers or declaration of candidacy for the office is filed) | We, the undersigned qualified ele | ectors of the Assembly District 63 | | |
| petition for the recall of | Robin Vos | from - CF | (jurisdiction or dis | strict of officeholder) | |
| - | (name of officeholder to be recalled and office) | nom office pursuant to Article XIII, Secti | ion 12 of the Wisconsin Constitution and §.9.10 c | of the Wisconsin Statutes. | |
| Hobin vos siloula de recallea for his facit suppor | t of the Chinese Communist Party (CCP), acceptance of t | 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. | | | |
| 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 | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N | | | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | | AME OF THE MUNICIPALITY OF RESIDENCE MU | ST ALWAYS BE LISTED. | |
| 92 2 2 | 1 1250.00 | Rural address must also include box or fire no. | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF SIGNING | |
| Gagnesline Killip | SacqueLine KILLIPS | Maal Taykok Harbon E7 | ortown ovillage Mt Pleasant | 5-15-24 | |
| 21/11/2010 | Jan Plane | 4500 Yates D | O Town O Pleasant | 5-15-24 | |
| Mary Milians | Hatey williams | 4460 Yates Dr | Ocity Mt pleasart | 5/5/24 | |
| Michael 1919/2 | Michael Phillip 5 | 4410 gates Dr | ovillage Wit desgant | 5/15/24 | |
| It builty | RAWY BALTGAZAA | 44/0 YATES DR | O Town O Village MT / LATS AT | 5/05/24 | |
| Som ymi | Soprie Heisennan | 45004ates or | O'Village Ott. Picasant | 5/15/21 | |
| (1984 Water | KATHY ARCHIBAZO | 7500 Yade DG. | Village Les Plearan | 5/15/24 | |
| Sund williams. | Brian Mortines | 4500 Yutes f | Orlinge Mt. Prasant | 5-15-14 | |
| "Irunia SAU | Jackse Soto | 4500 Vates DR | Orlinge WA DIOSAAT | 5-18-74 | |
| 10. | Lissette Reymio | 8536 county line od | Utilage MT Recascant | 5-15-14 | |
| I. Kichard J Porter Ir certify: I reside at certification of Circulator 58 Carp Cit, IAR 7752 | | | | | |
| I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is plunishable under § 12.13(3)(a), Wis. Stats. | | | | | |
| name. I know men respective residences given. I | support this recall petition. I am aware that falsifying the | his certification is punishable under § 12.13(3)(a), Wis. Stats. | d the paper with full knowledge of its content on the date inc | dicated opposite his or her | |
| 3/15/29 | troha | HUMAL | | Page No. OOO | |

Page No. 988

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

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elect | | |
|---|--|---|--|--|
| (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, Sectio | n 12 of the Wisconsin Constitution and §.9.10 of | f the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office). | THE ATTENDED BY A CONTROL BY A | | |
| | | STATEMENT OF REASON FOR RECALL | No address of the second of th | -fatata acuaranianal |
| (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 initiale the recuit of | ij state, congressionat, |
| 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 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 | |
| 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 |
| A 0 | _ | 678 Foxtree Chiecle Apts | DTOWN Palingreton WI | (2) |
| 1. / harra >== | Shannon Shoson | Brance Clister 19018 | □ Village □ City | 15/15/24 |
| ADIVA ALL O | STATION WITSON | 1 1 1 | □ Town \ n | ~1 - 1 |
| 2.698/12060 W | BETH DROCKMEN | 503 MINIKRANCIA RA | City Surlemeter | 1/1×-2× |
| 24/// | 1 | | □ Town ○ | , , |
| ' a fully | Andrea Kernelly | 203B Musenequack St | City Cult Au | 15-15-21 |
| | The state of the s | 0.555 1 5 54 554 555 | □ Town S (: A | W 140/ |
| 4 John Janson | Josh Curtis | 29523 River Veiw Parkway | City 309 400 | 15-15-29 |
| 50 01 11 | 2 22- (il le s) | TUR 111 - 21 10 6 | Town Devillage Dankton Mic | 1 1 9 CA |
| Jorry & singux | JERRY Weinkaa | 598 HODEYLANEBURINGON | D City ROCISIER VV15 | 5-15-24 |
| 6. | 10/1/1/1 | 50 c M'all 1 - 1 Dd | Town Rullingto 128 | Shelsu! |
| Asso | John yapes | DOS MINE JEANN JEAN | Ocity DVIIII COL | 3/10/29 |
| 7.00000 | * 1 50 1 | 5.50 3.77.71 8: 1 | Town Savillage | Elirlan |
| Debu Belley | Debra Beales | 251 Oak Hill Circle | Och Rochester, WI | 3/15/24 |
| 8.1 | | | ☐ Town ☐ Village | The state of the s |
| | | | -D'City | |
| 9 | | | ☐ Town ☐ Village | |
| | | | □ City | |
| 10. | | | ☐ Town ☐ Village | |
| | | | □ City | |
| 1.0. T | = | Certification of Circulator | 1 AN 72210 | |
| | CTC certify: I | reside at 1 190 Kahn ESKO (| (circulator's residence - include number, street, and municipality) | |
| (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 | vere a resident of this state, would not be disqualified from voting under V | | and 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 signs | ed the paper with full knowledge of its content on the date i | ndicated opposite his or her |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. OOC |
| 5-15-14 | // port | my | | Page No. 989 |
| (date) | | ire of fireflator) e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266 | 5-8005 web. http://clertions.wi.uov.lemail.elections@wi.gov | |
| FILT (VO (VEA 5013-03) THE INFORMATION ON THIS TOLD IS LEGIN. | icu by wis stats 99 6 40 and 9 10. This joint is prescribed by the | E Transmin Electronia Continuasion 1 O Dok 7304, Madison, W1 33707-7304 000-200 | o-ooos (web. mile in section of the period of the gov | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified elected | ors of the Assembly District 65 | . 0.00 1.11.3 |
|--|--|--|--|-------------------------|
| (official with whom nominati | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | |
| | Robin Vos | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| petition for the recall of | (name of officeholder to be recalled and office) | | | |
| | C | TATEMENT OF REASON FOR RECALL | | |
| (The reason for recall must be stated on netitions | for city village town and school district officials. The | reason must be related to the official responsibilities of the officeholder, | No statement of reason is required to initiate the recall of | f state, congressional, |
| | | | | |
| Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | his own constiuents by calling them "whack-jobs, morons, and idiots," | | |
| lack of committment to election integrity, blocking | lower prescription drug costs, and hagrant disrespect to | This own continuous by calling them street, property | | |
| THE MUNICIPALITY USED FOR MA | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| | | SIREEI & NUMBER OF ROCAL ROCAL | | 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 |
| V Mai | 12 1 101 | L40 . 37 0 . 01 | Town Dillage Ohld Color | 115-15-711 |
| 1 Water Miller | Katellites | DOW WINK KOWN KY. | a city BON NOTON | 3 13 29 |
| THE PLACE | LICKING SPORTS | 300111121111111 | D Town | 1 |
| 2. 91 A | C 45- | 2728 Fox Grave Drive | City water ford | 5-15-24 |
| / N Dose | Drant Jage | 0 127 10x Orgie Ditto | Town | - 11 |
| 3.0 | 10 4 12/11 | 11 -0 H | Uvillage / IC 10/4070 | 5-B-24 |
| V JOI CARMACURO, TO | MICKY KUMBER THE | 409 A 8191134 98 41/2 ment 26 | a only | 7 10 |
| The state of the s | 2. 81.0 | 6000 | U Town | 0-15 791 |
| 4/1) 4/1/ | Vaicuosas El | 1835 Krowns Lake Drive | ocity Six Minuton | 70704 |
| 16/1 | Fridrich | 0,7000000000000000000000000000000000000 | □ Town | . 2/ |
| 5. 1/ AK | 1 OCXO AND | 1 233 BD OWNE Later DA | Oity Bullage | 15-15-29 |
| 1100000000 | 10gen via | DID PHOWNS CALL DI | - Town | |
| (A A D) (a - 1) | 2- 1/4 | 291103 CODIE Ridge De | □ Village is 1 | 18-15-74 |
| The water | magge makellos | 2190) (05/2 1210) | ocity Mincro | |
| 100 | 17001 | 20000 10400110 | Town Q Village Q (1) | 11/11/12/ |
| | PASICA KLADA | (391) Hilliam Dr | City DWIMA | 1) 11 14 |
| " TWO | Cor Co Ferrior | 7-11-11 | Town | / |
| 8. | | | ☐ Village | |
| | | | Town | |
| 9. | | | ☐ Village | |
| 13 ABSO- | | | ☐ City | |
| 10. | | | -D-Village | |
| 10. | | | □ City | |
| , | | Certification of Circulator | • 100 mm - 1 | |
| Lathenne De | SHIP and the L | reside at 10970 Raines Ro | 1. Little Rock, AR 72 | 210 |
| | | | (circulator's residence - include number street, and municipality) | d aller abtained coch o |
| (name of circulator) I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each of the person signed the paper with full knowledge of its content on the date indicated opposite his or her | | | | |
| the reservoir on this peace. I know that the gigners are electors of the purishing or district represented by the difficulty that the control of the purishing | | | | |
| name. I know their respective residences given. | I support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 990 |
| May 15 207 | // //- | en Aletta | | 1 330 |
| 11611 10 000 | - Just | and almost and | | |

(date) (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

| | | W. d. and designed qualified electe | ors of the Assembly District 63 | |
|--|---|---|--|--------------------------------------|
| : The Wisconsin Election Commission | | . We, the undersigned qualified elected | | ict of officeholder) |
| (official with whom nominate | ion papers or declaration of candidacy for the office is filed) | L. J. VIII Cantin | n 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statute |
| | Robin Vos | from office pursuant to Article AIII, Section | 1 12 Of the Wisconsin Comme | |
| tition for the recall of | (name of officeholder to be recalled and office). | STATEMENT OF REASON FOR RECALL | | ACCUSES TO A SHARE A STREET AND A SA |
| | | STATEMENT 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 state, congressional, |
| e reason for recall must be stated on petitions | s for city, village, town, and school district officials. The | e reason must be related to the official responsibilities of the officers | (S.) | |
| islative, judicial, or county officials.) | - Party (CCD), accontance of | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| bin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of | to be selling them "whack-jobs morons and idiots." | | |
| k 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." | an awarenesses Mil | ST ALWAYS BE LISTED |
| | THE WINDS DIFFERENT THAN I | AUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA | ME OF THE MUNICIPALITY OF RESIDENCE MU | DATE OF |
| THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THANK | STREET & NUMBER OR RURAL ROUTE | Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | | C1. 12.1 |
| | Co. 11 | 7001 VOS 6001 OA | Town Burleyston | 15/16/201 |
| Toll las stal loud | Tiffany Malbus | w399 Klarney Rd. | D City | 1 1 1 |
| MWM I BOMO | 11110000 | ngdary 34425 WAShire to Auc | Town Burlington We | 15/11/12/ |
| 11 101 | V. Ollataratha | 10 da m 39425 WASHING 1040E | | 1.612 |
| W I I | Vy FITO Janarno | 49649 | □ Town | |
| 3.71 | | | ☐ Village | |
| | | | Town | |
| 0 | | | - Uvillage | |
| | | | □ City □ Town | |
| | | | _ □ Village | 1 |
| 5. | | | City | |
| | | | □ Village | |
| 6. | | | □ City | |
| | | | □ Town □ Village | |
| 7 | | | City | |
| 1.0 | | | □ Town | |
| 7. | | | | |
| 8 | | | ☐ Village City | |
| 8. | | | □ City | 7 |
| 8. | | | □-Village □ City □ Town □ Village | |
| 8. | | | □-Village □ City □ Town □ Village □ City □ Town | |
| 9. | | | □-Village □ City □ Town □ Village □ City | |

| | \mathcal{D} | | RECALL PETITION | Caller Accombly District 63 | |
|-----|--|---|--|--|--------------------------------|
| 1 | The Wisconsin Election Commission | | . We, the undersigned qualified elect | (jurisdiction or district | of officeholder) |
| Y | (official with whom nominati | ion papers or declaration of candidacy for the office is filed) | or Attacked VIII Section | on 12 of the Wisconsin Constitution and §.9.10 of the | he Wisconsin Statutes. |
| | petition for the recall of | Robin Vos | from office pursuant to Article Affi, Section | of 12 of the Wisconsin Consumers | |
| 100 | , , | (name of officeholder to be recalled and office). | TATEMENT OF REASON FOR RECALL | | |
| | 9.00 | Jackson district officials. The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder | r. No statement of reason is required to initiate the recall of 2 | state, congressional, |
| | (The reason for recall must be stated on petitions | s for city, village, town, and school district officials. The | To an a state of Wisconsin farmland from the CCP | | |
| | Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | lewer proportion drug costs, and flagrant disrespect for | his own constiuents by calling them "whack-jobs, morons, and idiots. | | |
| | | THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N. | AME OF THE MUNICIPALITY OF RESIDENCE MUST | ALWAYS BE LISTED. |
| | THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN W | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | SIGNING |
| - 1 | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | Town | c/ / / |
| | . 1, 1/1 | Mina 1 CI las | 21-20011 00.60 | Uvillage CL (2 12 L) I | 0/15/24 |
| | Harp Scale | STACY Shales | 36529342 919386 | Town | 5/10/41 |
| | 2/4 | Marie Valla | 1011) Chrony (hook Dr. | City Styrte Cara, WI | 0/12/24 |
| | 1 Miner Valley | white o | 1911 a stracting check on | □ Town / | 115/24 |
| | 3 42 1 1/1/44 | 1:5010 111 446 | 3652 95th St | Ocity Starterant, wit | 7/3/2/ |
| | Legida Watter | LINDA WATTS | 3032. 1344 | Town) | 5-15-24 |
| | 4 10 - 204 | , Niane Matter | 3038 97 St. | Ocity Startevant | |
| £ | 1 Law Nathle | of the factor | 2000 Both T | UVIllage STURTEU ANT W. | 5-15-24 |
| | 5/ Man Dono Kos Demole | L'HARLENE KARDINSKI | 3/24 98 - 51 | City | 5 - 7.1 |
| 1 | Comment of the second | | C122 C = 1 Ala DE | Usillage Start Land | 5-15-24 |
| V | 6 Boseanzicher | ROSEANN ZICKUS | 4423 Carolina Di | Gity NV ICV | 24 |
| 1 | 77 1 | | 9433 0000 100 10 | Selvillage C C- () T M / 1 | 5-15-24 |
| • | 7. X. C | SHANK CONN A | 7453 CAPOC AND DR. | O City TORTE VANT | - 214 |
| | 8 2 4 | Fre Ludwigson | 9517 HUIDEDY | Ocity St. vfener | 5-15-24 |
| | & Va Cy | gra lad my son | 9111 Rue 11 | Town 17010 | 84 18 -A |
| | 56 | 10:16 OB 100K | 1 91 16- DE AVCE | Picty Club Cours | 5-12/9 |
| | Mush | 9510-644400 | 1918 | DITOWN Con A CITY | 517-24 |
| | 10. | William Lessert | 13644 94th St | Octive Stort UCA | 200 |
| | 1/ // /// | To fill all belief | Certification of Circulator | 2702 Say (L. L. 1 170) | 57(D) |
| | 0°C | GOLPC certify: | Treside at 1545 10. (00. Shift) | CCOS SCO #Scharge FX & | 1300 |
| | (name of circulator) | Conce | | (circulator's residence - include number, street, and municipality) er Wis, Stat. 8 6.03. I personally circulated this recall petition a | and personally obtained each o |
| | I further certify I am either a qualified elector of | 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 the officeholder named in this petition. I know that each person si | igned the paper with full knowledge of its content on the date i | ndicated opposite his or her |
| | the 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 the bythe officeholder named in this petition. I know that each person sing this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 992 |
| | name. I know their respective residences given | Support this recent beamon Tan and but the |). C: | | ' "5° ' " 332 |

(signature of circulator)
(date)
(dat

| The MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, is Nor "Fired about the second for fired and second for the second for the second for fired the second for fired the second for fired for fired the second for fired | | | We the undersigned qualified | electors of the Assembly District 63 | |
|--|--|---|---|--|------------------------------------|
| From office pursuant to Article XIII, Section 12 of the Wiscontin Constitution and System Constitution | TO: The Wisconsin Election Commission | to be store of an didney for the office is filed) | | (Jurisdiction of e | |
| STATEMENT OF REASON FOR RECALL The reason for rocall must be stand on pertitions for city, village, town, and sebood district officials. The reason must be related to the official responsibilities of the official responsibilities | (official with whom nominal | | Com affice purguent to Article VIII S | ection 12 of the Wisconsin Constitution and §.9.10 | of the Wisconsin Statutes. |
| Transmission 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 official representation of the analysis of the chiese accommands Party (CCP), acceptance of they and must be related to the official responsibilities of the analysis of the chiese accommands Party (CCP), acceptance of they and must be related to the official responsibilities of the analysis of the chiese accommands Party (CCP), acceptance of they and must be related to the official representation from the CCP. The MUNICIPALITY USED FOR MAILING PURPOSES, WILEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE. IS NOT SUPERIORS. THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS ELLIPED. THE MUNICIPALITY USED FOR MAILING PURPOSES, WILEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE. IS NOT SUPERIORS. THE ANALOS OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS ELLIPED. THE MUNICIPALITY USED FOR MAILING PURPOSES, WILEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE. IS NOT SUPERIORS. THE ANALOS OF THE MUNICIPALITY OF RESIDENCE MUST ALLWAYS ELLIPED. THE MUNICIPALITY OF RESIDENCE MUST ALL | petition for the recall of | | rrom office pursuant to Article Arti, o | cotton 12 of the 71 to other 1 | |
| The mutino for recall must be stated on petitions for city, village, town, and acknowled district officials. The reason must be related to the official exponsibilities of the official expons | | | TATEMENT OF PEASON FOR RECALL | | |
| plate the common offices to common offices to the common of the common offices to the common of the common o | | | STATEMENT OF REASON FOR RECADE | polder. No statement of reason is required to initiate the reco | all of state, congressional, |
| place of common offices to the common offices and its support of the Chinese Communist Party (CCP), accoptance of trips from the CCP, failure to protect the common offices and its support of the CCP, according to the common offices and its support of the CCP, according to the common offices and its support of the CCP, according to the common of the c | (The reason for recall must be stated on petitions | s for city, village, town, and school district officials. The | e reason must be related to the official responsibilities of the officer | iolder, 110 diasement by versus as 14 | |
| THE MUNICIPALITY USED POR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUSPENCE MUST ALWAYS BE LISTED. **SIGNATURES OF ELECTORS** **PRINTED NAME OF PELECTORS** **PRINTED NAME OF PELECTORS** **RETAIL NAME OF THE MUNICIPALITY OF RESIDENCE, IS NOT THE MUNICIPALITY OF RESIDENCE, IN THE MUNICIPALITY OF RESI | | | | | |
| THE MUNICIPALITY USED FOR MALLING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUST ALWAYS BE LISTED SUFFICIENT OF THE MUST ALWAYS BE LISTED SUFFICIENT. THE NAME OF THE MUST ALWAYS BE LISTED SUFFICIENT OF THE MUST ALWAYS BE | Robin Vos should be recalled for his tacil support | t of the Chinese Communist Party (CCP), acceptance of | rips from the OOF, fallare to protost viscostian tanks | | |
| 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 PRINTID MANE OF ELECTORS PRINTID MANE OF ELECTORS The Municipality of Public Pub | 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 | 5." | |
| SIGNAPLIES OF FLECTORS PINITED NAME OF ELECTORS That is address must also melade box or fire no. Continue Continue | idor of community and a | | THE OF PERIPENCE IS NOT SHEELCIENT. THE | IE NAME OF THE MUNICIPALITY OF RESIDENCE M | MUST ALWAYS BE LISTED. |
| SIGNAPLIES OF FLECTORS PINITED NAME OF ELECTORS That is address must also melade box or fire no. Continue Continue | THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN I | TOTAL TY OF RESIDENCE, IS NOT SUFFICIENT. IT | MUNICIPALITY OF RESIDENCE | DATE OF |
| 2 Mark Maria Mark Merci V Posa Linde of Toom Olives 3 Order 4 Order 5 Order 6 Order 7 Order 8 Order 9 Order 10 | | | STREET & NOWIDER ON RESELVE | | SIGNING |
| 2. Mark Morica Ma | SIGNOFICE OF ELECTORS | Kaloito Barrios | Kua suucss mas one meisse one | □ Town ○ / | 12/1-10.1 |
| 2 Made Mark Mercit Food Links of City Sturies Stis Advanced Stis Advance | 1 011 1 | 700 | 19/22/ | | 13113/44 |
| 2. Made Morking 3 | 1000 Salver | - OS COURS | (C)) UNCIVI G | | 1001 |
| 2 Cost Cost | oM 10. | | | | 5/15/N |
| 3. O Wilsop 4. O Town 9. O Town 1. O Town 9. O Town 9. O Town 1. O | 2. (1) | Mark Mercel | 17022 11.1de 1 | | 2/12/01 |
| 3. 4. O Coty O Coty 1 Coty | 1000 10000 | 119/12 1 10 =107 | | | |
| 4 | 3 | | | | |
| 4 | 4 | | | | |
| 4. OCIV 5. OTOWN OVERING OCIV 6. OTOWN OCIV 7. OTOWN OCIV 8. OTOWN OCIV 9. OTOWN OCIV 1. OTOWN OCIV OCIV OCIV OCIV OCIV OCIV OTOWN OCIV OCIV OCIV OCIV OCIV OCIV OCIV OCIV | | | | | |
| Solution | 4 | | | | |
| 5. 6. Orion | | | | | |
| 6. UNISADO U | 5. | | | | |
| 6. O Village City 7. O City 8. O Town 9. O City 10. O Town 10. O | | | | | |
| 7. Certification of Circulator Cer | | | | | |
| Village City Common City Ci | 6. | | | | |
| 8. 9. 10. Certification of Ciuchlator (came of circulator) (came of circulator) (came of disculator) (came of dis | | | | | |
| 8. City Village 10. City 10. Certification of Ciucalator 11. Curve Circulator 12. Certification of Ciucalator 13. Certification of Ciucalator 14. Curve Circulator 15. Certification of Ciucalator 16. Certification of Ciucalator 17. Curve Circulator 18. Certification of Ciucalator 19. Certification of Ciucalator 19. Certification of Ciucalator 10. Ce | 7. | | | | |
| g. 10. Certification of Circulator (name of circulator) (name | 3 | | | | Ji |
| 9. Certification of Circulator Circulator | Q | | | | |
| 10. Certification of Circulator (circulator's residence - include number, street, and municipality) (control of circulator) (circulator's residence - include number, street, and municipality) (circulator's residence - include number, street, and m | O. 400 | | | | |
| Certification of Circulator In Common of circulator In Circulator of Circulator In Common of circulator In Circulator of Circulator of Circulator In Circulator of Circulator of Circulator In Circulator of Circu | | | | | |
| Certification of Circulator (name of circulator) (circulator) (ci | 9. | | | | |
| Certification of Circulator (name of circulator) (name of circul | | | | | |
| Certification of Circulator) (name of circulator) (circulator) | 10 | | | and the state of t | |
| (name of circulator) If turther certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats. Page No. 993 | | | | L L L L | 1 - 064- |
| (name of circulator) If turther certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12,13(3)(a), Wis. Stats. Page No. 993 | 0 110 | 10. | Certification of Ciuchlator /) | HEAR SUIKING | 147 82000 |
| (name of circulator) If further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. § 6.03. I personally circulated this recall petition and personally obtained each the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under § 12,13(3)(a), Wis. Stats. Page No. 993 | · (2M) (2 | certify: | I reside at 13000 1000 | TIOO CO SOUSCILLO | |
| the signatures on this paper. I know that the signers are electors of the jurisdiction of distriction of distriction is punishable under § 12.13(3)(a), Wis. Stats. Page No. 993 | I,(name of circulator) | | HTML STATISTICAL | a con the simulated this month poti | ition and personally obtained each |
| the signatures on this paper. I know that the signers are electors of the jurisdiction of distriction of distriction is punishable under § 12.13(3)(a), Wis. Stats. Page No. 993 | I further certify I am either a qualified elector of | 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. 9 0.03, I personally circulated this recall per | date indicated opposite his or her |
| SISONY LIMBOUT | the signatures on this paper. I know that the sig | ners are electors of the jurisdiction or district represente | by the officeholder named in this petition. I know that each pers | on signed the paper with full knowledge of its content on the | -FF |
| SISONY LIMBOUT | name. I know their respective residences giver | I support this recall petition. I am aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. QQ3 |
| | くしちっかりみし | (10)14 | V XV-V / | | 5 333 |
| | | (signi | iture of circulator) | | 4 |
| (date) (signature of circulator) (date) (capature of circulator) (date) (signature of circulator) (date) (L170 (Rev 2019-09) The information on this form is required by Wis. Stats. §§ 8.40 and 9.10. This form is prescribed by the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266-8005 web: http://clections.wi.gov email: elections@wi.gov email: elections@wi.gov email: elections wi.gov email: | FI -170 (Rev 2019-09). The information on this form is re- | quired by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by | he Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 | 608-266-8005 web: http://ctections.wi-gov email: elections@wi-gov | |

| | | RECALL PETITION We, the undersigned qualified electors | ors of the Assembly District 63 | . C. O' - sholder) |
|---|--|--|---|---|
| O: The Wisconsin Election Commission | 95 1 51 1 | we, the undersigned quanticularities | (jurisdiction or distriction) | the Wisconsin Statutes |
| (official with whom nominatio | n papers or declaration of candidacy for the office is filed) | from office pursuant to Article XIII, Section | 12 of the Wisconsin Constitution and §.9.10 of | the wisconsin statutes. |
| tition for the recall of | Robin Vos (name of officeholder to be recalled and office). | | | |
| | (name of officenoider to be recalled and office). | TATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall of | state, congressional, |
| The small must be stated on netitions | for city, village, town, and school district officials. The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder. | 110 00000000000000000000000000000000000 | |
| gislative, judicial, or county officials.) | Communist Party (CCP), acceptance of tr | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| obin Vos should be recalled for his tacit support | of the Chinese Communist Farty (Co. // 2007) | his own constiuents by calling them "whack-jobs, morons, and idiots." | | 7.000-0410-0 |
| ck of committment to election integrity, blocking I | ower prescription drug costs, and magrant disrespost to | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NA STREET & NUMBER OR RURAL ROUTE The property does include how or fire no. | ME OF THE MUNICIPALITY OF RESIDENCE MUS | T ALWAYS BE LISTED. |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUPPLEID AT THE | MUNICIPALITY OF RESIDENCE | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | Rural address must also include box or fire no | OXTown | 51121 |
| | · Nocconst IIIS | 1917 S Browns Lake Dr. | Oty Bally Oton | 3/14/2 |
| Com abyelle | COCACASINS | 1917 S. Browns lake DIZ | U Village Bull ng ton | 5/14/24 |
| Lylyn | Lesten Bullis | APT 10:3 | Village City Such A Con | 55705 5714/2 |
| 3. Pachel for | Rachel June | 3150S BROW ANGE DELVE | Town Utiliage fragment hundington | 51424 |
| 4 gen Bus | John BYX | 31531 Bent arbeit Drive | □ City □ Town □ Village 2 | E-14.9 |
| 5 Bark Bertin | BARB BERTPANG | 3153) Bear Miles Dy 101 | Town Devillage Development | F 5-14-1 |
| 6. Ihai MI Onn | in Shallwarding | 6 64 toxt reciver | Town RLC III | 8-14-2X |
| 1-Satter | -Sarah Lebred | 64/fox4ppe, circle, #2 | City DUNINGOU WI | T 111-101 |
| 8. Ox Cohm | Shyanne Guelide | 273 Charelterrace # | Parillage DUNI. 19 ton Wi | 7-19-2 |
| 90 . 1/-1_ | Jacobs Caille | 158 Foxfago Or Apt. IC | City Bunking for | 5-19-2 |
| Joseph To | P \ (\lambda \lambda \rangle \lambda \rangle \lambda \rangle \ | 3611 Cake Street | Oriver Buy lington | 15-14-7 |
| 770 | Faul Moldin | Certification of Circulator | repullarine IX 1505 | 2_ |
| , RANDY BANKER | certify: | I reside at 29 68 Alideauay Williams I were a resident of this state, would not be disqualified from voting under the by the officeholder named in this petition. I know that each person signal by the order \$ 12 13(3)(a) Wis. Stats. | (circulator's residence - include pumber, street, and municipality) or Wis. Stat. § 6.03. I personally circulated this recall petitio | n and personally obtained en ention in |
| I further certify I am either a qualified elector of | of Wisconsin, or a U.S. citizen, age 18 or older who, it is | I were a resident of this state, would not be disqualified from voting unde ted by the officeholder named in this petition. I know that each person signs this certification is punishable under § 12.13(3)(a), Wis. Stats. | gned the paper with full knowledge of its content on the data | D 2012 004 |
| the signatures on this paper. I know that the signame. I know their respective residences given | I support this recall petition I am aware that falsifyi | ing this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 994 |
| | | | | |
| (date) | (sign | nature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608- | -266-8005 web: http://clections.wi.gov email: elections@wi.gov | |
| L-170 (Rev 2019-09) The information on this form is re | quired by Wis Stats §§ 8.40 and 9.10. This form is prescribed by | | | |

| TO: The Wisconsin Election Commission | | we, the undersigned quantied elec | tors of the Assembly District of | |
|--|--|---|---|--------------------------------|
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or distri | ct of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | the Wisconsin Statutes. |
| | (name of officeholder to be recalled and office) | • | | |
| | S | TATEMENT 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 o | f state, congressional, |
| legislative, judicial, or county officials.) | | | | |
| Robin Vos should be recalled for his tacit support of | of the Chinese Communist Party (CCP), acceptance of to | rips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| to the state of th | lawer properintion drug costs, and floarant digreement for | his own constiuents by calling them "whack-jobs, morons, and idiots," | | |
| lack of commitment to election integrity, blocking i | ower prescription drug costs, and hagrant disrespect for | This own constituents by calling them whack-jobs, morons, and talots | | |
| THE MUNICIPALITY USED FOR MAI | LING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N. | AME OF THE MUNICIPALITY OF RESIDENCE MUS | T 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 |
| | | | D Town | - (1. f |
| 1 10 80 /// | ANGE A NOLDIN | 11 ZISIII LAVE ST | Ocity RURLINGTON | 1 1 1 - 4 |
| my min | | 1 121 200 31 | Town | \ |
| 2. // 9 // | John Kevo | 28024 Bushell RD | Uvillage Start | 5/15/24 |
| (John Jan | Joan Nevo | 5 00 | city Port, 49704 | 3/17/27 |
| 3. 11 00/000 0 | () 00 | 2 - 6/ 0 / 10 | Town | F 11/24 |
| 1/2 rus all Al ILO CO Cler | Torrald Medeltom ham W. Marie Wear | 2391 Coday Mis | City P all Krylen | 12-14-21 |
| of Millian | | | □ Town | |
| 4. MI Maioro Magast | ham W. Marie Were | 1600 1 2331 (ados 1) A. | City Bullengton WI | 1 5-14-211 |
| Wir large mean | To the cad | Nam = 331 Celebration | Town | 7 |
| 5 | | | O Village | |
| | | | □ City | |
| 6. | | | □ Town | |
| 0. | | | ☐ Village | |
| | | | □ Town | |
| 7 | | | ☐ Village | |
| | | | City | |
| 8. | | | □ Town | |
| #79569#g="G/PI | | | □ City | |
| | | | □ Town | |
| 9. | | | ☐ Village | |
| | | | □ Town | |
| 10. | | | -U-Village | |
| | | | City City | |
| 1 | | Certification of Circulator | 10. 180 · · · To 1 = 1 | |
| I Standy Blankin Sl | certify: I | Certification of Circulator reside at 4788 Hideoway M | ORAND Maine 17 7905 | 2 |
| (name of circulator) | | / | (circulator's residence - include number, street, and municipality) | |
| 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 | 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 | ned the paper with full knowledge of its content on the date in | idicated opposite his or her |

Page No. 995

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

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.

| TO:_ | The WisconsIn Election Commission | | We the undersigned and U.S. d. 1 | C.I. Assembly Black and | |
|---------------|--|---|---|---|------------------------------------|
| | (official with whom nominati | on papers or declaration of candidacy for the office is filed) | We, the undersigned qualified elec | | |
| petitio | n for the recall of | Robin Vos | from office pursuant to Article VIII Sent | (jurisdiction of | r district of officeholder) |
| | - | (name of officeholder to be recalled and office) | nom office pursuant to Article Affi, Section | on 12 of the Wisconsin Constitution and §.9.1 | 0 of the Wisconsin Statutes. |
| | | | 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 rec | call of state, congressional |
| Robin V | <i>ve, judicial, or county officials.)</i> os should be recalled for his tacit support. | of the Chinese Communist Party (CCD), accomtones of | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | s source of the rec | cun of state, congressional, |
| | | | | | |
| lack of c | ommittment to election integrity, blocking i | lower prescription drug costs, and flagrant disrespect for | r 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 | | |
| | SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE MUNICIPALITY OF RESIDENCE | |
| _ | = | TRINIED NAME OF ELECTORS | Rural address must also include box or fire no | MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village | DATE OF SIGNING |
| 1. | has Hell | B 1- 0 11 1 | 21 - 1 11 01 10 1- 1 | 7 Town | -11-1 |
| 1 | pur rue | "Dryant Komero | 2600 Lake Street bullington | Ocity Dading ton | 15/19/200 |
| 2. | 0 W. al | 12000 | | Town | 01101000 |
| | U Dach | DIANUE HACH | 202 WATERS EDGE CIRCLE | City BURLINGTON | 5/15/2024 |
| 3. | 15 (2 | Daniel Duredy | | Town _ | = 1131201 |
| 7 | 1-0 | 6 22 7 6 6 200 | 179 Water edge in | □ Village () | E 15 |
| 4 : | 0 101 | 0 - | - Cozecia | Drown O |) - () - Las |
| | Blolily & She | Deverty Jakic | 30130 Wordlawn Dr. | U Village (3 | F15 2:01 |
| 5 | | OAKIO | 2750 (0000(400011))V. | D Town | 5-15-0009 |
| 34 | | | | ☐ Village | |
| 6. | | | | City | |
| 0, | | | | □ Town □ Village | |
| 7 | | | | □ City | |
| 1 to 3 | | | | □ Town □ Village | |
| | | | | □ City | |
| 8. | | | | □ Town □ Village | |
| | | | | □ City | |
| 9. | | | | ☐ Town ☐ Village | |
| | | | | D City | |
| 10. | | | | □ Town □ Village | |
| | 84 0896 | | | □ City | |
| 1 | andy Blankensh | 20 | Certification of Circulator | 1 11 1 | 7/20 |
| ,_/c | (name of circulator) | certify: I r | reside at 29 ft / Hide awares | stored Mairie, X | 75052 |
| further | certify I am either a qualified elector of W | isconsin, or a U.S. citizen, age 18 or older who if I we | ere a resident of this state, would not be disqualified from voting under W | (circulator's residence - include number, street, and municipality) | |
| he signa | tures on this paper. I know that the signers | s are electors of the jurisdiction or district represented t | this certification is numbered in this petition. I know that each person signed | the paper with full knowledge of its content on the | on and personally obtained each of |
| name. | now 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. | Fabor with rain knowledge of its content on the dat | ie mulcaled opposite his or her |
| KA | udy Mankenster | 25/15/2 / Labelle 18 | hhill | | Page No 996 |
| -170 (Res | (date) | (signature | of circulator) | | 390 |
| 2 2 7 0 (100) | the intormation on this form is require | d by Wis Stats §§ 8.40 and 9.10. This form is prescribed by the | Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266- | 8005 web: http://elections.wi.gov email: elections@wi.gov | |

| TO: The Wisconsin Election Commission | | RECALL PETITION | | |
|---|--|---|--|---|
| | ion papers or declaration of candidacy for the office is filed) | We, the undersigned qualified elec | ctors of the Assembly District 63 | |
| petition for the recall of | Robin Vos | 6 00 | (jurisdiction or dist | trict of officeholder) |
| | (name of officeholder to be recalled and office) | from office pursuant to Article XIII, Secti | ion 12 of the Wisconsin Constitution and §.9.10 o | f the Wisconsin Statutes |
| (The reason for recall must be stated on petitions ingistative, judicial, or county officials.) Robin Vos should be recalled for his tacit support | 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, | | |
| 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." | | |
| | | | | |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | IUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N. STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | MUNICIPALITY OF RESIDENCE | DATE OF |
| 1. 77 | To Pellotter | 55 24 I EVENIT DY | Indicate Town, City, or Village | SIGNING |
| 2 Tan Tete ay | Tom Tetclass | 2907 Webster St Racine | O Town O Village O City O Town | 5/11/21/ |
| 3 M Pollots | Michael PelleTIER | 5824 EVAGT DO | O Town O Village O City O VILL CLEAR | 5/14/24 |
| 4. Mthm | Melissa Pelletier | 582 FEVARIT DR. | O'Illage O'City MI Phet Smy T | -116/24 |
| 5. Mary Korxlins | MARYKORZILIUS | 3240 GAUHART ST | orown Village MA Pleasant | 5/11/29 |
| 6. | WICK FLANY | 3101 OAKWOOD NR | UTown Utilage Utilage Utilage Utilage | 5-11-14 |
| Horm Willen | Adam Willingham A | 35105 Bear achor Dr. | Village Buclington | 3/16/24 |
| * Monnay 14 | Jeanhune /4/ | 3195 Bear Cirlor DV. | Village Pyr/11/5 An | 5/11/2 |
| foras | James Rasmussen | 152 Waters Edge Circ | Ulliage Bur Malon | 5/16/24 |
| | | | □ Town □ Village | 1,010.6 |
| 0, 1 21 1 | | Certification of Circulator | U City | |
| MANAG Blanke. | | | Charl Starte 1x 79 | 5-55 2 |
| he signatures on this paper. I know that the signer name. I know their respective residences given. I | visconsin, or a U.S. citizen, age 18 or older who, if I we is are electors of the jurisdiction or district represented by support this recall petition. I am aware that falsifying | re a resident of this state, would not be disqualified from voting under W by the officeholder named in this petition. I know that each person signer this certification is punishable under § 12.13(3)(a), Wis. Stats. | Vis. Stat. § 6.03. I personally circulated this recall petition and the paper with full knowledge of its content on the date inc | d personally obtained each o dicated opposite his or her |
|)//4 2 T | | rhuge | | Page No. 997 |
| Exits (New 2019-09) The information on this form is require | to by Wis. Stats. §§. 8.40 and 9.10. This form is prescribed by the V | Or circulator) Visconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-266- | 8005 web: http://elections.wi.gov email: elections@wi.gov | |

| TO: The Wisconsin Election Commission | | We, the undersigned qualified ele | ctors of the Assembly District 63 | |
|--|---|---|---|-----------------------------------|
| | ion 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 the Wisconsin Statutes. |
| petition for the recall of | (name of officeholder to be recalled and office) | • | | |
| | S | TATEMENT 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 officehold | er No statement of reason is required to initiate the reco | all of state, congressional, |
| legislative, indicial, or county officials.) | | | | |
| Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of ti | 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 MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE | NAME OF THE MUNICIPALITY OF RESIDENCE M | UST 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 |
| Mex CO | MAGIN 1.10 1 -Cl | 209 conkey St | O Town Or (1941) | 1017/74 |
| Macie Com | BACCO THE LONG COLOR | 209 Conkey St | Orcity CC (1179-7-C) | 13/1/101 |
| 000 | MAG - CICHE - CON CICK | aut conkey st | □Town | 1111 |
| 2 B 1 00 W | 101 12 000 | 150-1-12 | O Village Bull | 1 4/19/20 |
| Darlar & Khango | Barbara J Kraw = 4 | 155 surniside E | O City Dank 1 g | |
| 3. 1 2 2 2 | AKBARD SERVI | 155 SUNNYSIDEE | UVillage Dianie w YU :1 | 3710/24 |
| Hickord Len | RICHARD SERVI | (3) Jano 15 102 10 | city BURUING | 3(1// |
| 1 | | | □ Town | 11 |
| 4. Margaret Holoman W. | Marrorel Hakamek | 151 Sunnside F. | City 13 (1 C/CV2 7 8) | 15-77-24 |
| I Hargares Hayomasa | THE WANTER THAT THE | 121 Janystone Li | □ Town | 1 2 2 |
| 5. | | | ☐ Village | - |
| 0.5 | | | □ City | |
| 6. | | | -D-Village | |
| | | | □ City | |
| 7 | | | □ Town | |
| 1: | | | □ City | |
| | | | □ Town | |
| 8. | | | □ Village □ City | |
| | | | □ Town | |
| 9. | | | UVillage | |
| *** | | | City City | |
| 10. | | | □ Town □ Village | |
| 10. | | | □ City | |
| 0 . 0/ | 2 73 | Certification of Circulator | 1 11 | |
| 1. Kandes Blank | cortific L | reside at 2988 Hilpancy DR, C | orted Mairie IX- | 75052 |
| (name of circulator) (| | | (circulator's residence - include number, street, and municipality) | 115 |
| 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 unde | r Wis, Stat. § 6.03. I personally circulated this recall petiti | ion and personally obtained each |
| 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 | gned 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 aware that falsifying | this certification is punishable under § 12.13(3)(a), Wis. Stats. | | |
| F/17/211 | 11/1/1/ | 8/ 1-12 | | Page No. 998 |

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

| TO: The Wisconsin Election Commission | | . We, the undersigned qualified elec | ctors of the Assembly District 63 | |
|---|--|--|---|---------------------------------|
| THE CO. | on papers or declaration of candidacy for the office is filed) | | (jurisdiction or dist | rict of officeholder) |
| petition for the recall of | Robin Vos | from office pursuant to Article XIII, Section | on 12 of the Wisconsin Constitution and §.9.10 of | f the Wisconsin Statutes. |
| | (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 e reason must be related to the official responsibilities of the officeholde | No statement of reason is required to initiate the recall t | of state, conpressional. |
| legislative, judicial, or county officials.) | for etty, viriage, town, and senton district officials. The | breason must be related to the orneral responsionness of the officeriorde | . The statement of control to require to the result | , y cana, cong. commun, |
| Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of t | trips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| lack of committment to election integrity, blocking | lower prescription drug costs, and flagrant disrespect for | r his own constiuents by calling them "whack-jobs, morons, and idlots." | | |
| THE MUNICIPALITY USED FOR MA | ILING PURPOSES, WHEN DIFFERENT THAN M | MUNICIPALITY 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. Euro Spher | Evone Ashley | 3234 Cakword DR | Stillage Mt Plusant | 5/18/2000 |
| 2 | Kim Staffort | 5700 Tahoe Dr | Dayllage MH Pleasant | 3/18/2024 |
| 3 my Joy | TONY STACKOTO | 5700 TAhoe Dr | Detroy At Pleasant | 5/18/2024 |
| 4. | Yany Herander | 5636 Tapoe Dr | Town Prillage City Aft Plantan+ | 5/18/2020 |
| 5. | Jun Baker | 5744 Taboe Dr | ortown village M+ Pleasant | 5-18-24 |
| 6. Kun Sinon | Richard Exner | 3026 MEYER OT UNITZ | ortown Otillage Mt Plagsant | 5-18-24 |
| 19200 | Craig Latronieno | 5422 Wakefreld Are | Town or Plagsan F | 5-18-24 |
| 8. | John Wilke | \$657 bree buch Care | BAVILLAGE MT Pleyens | 5-18-24 |
| 9. | Tenia Mila | 3/057 Greenwall lu | Prillage MAPLEACT | 5/13/24 |
| 10. | 1 6.0) | | □ Town | 1 |
| | | | □ City | |
| Rando Blanke | njhy, certify: I | Certification of Circulator reside at 2958 H. Se away DM | GRANT PRAISE TX 75 | 252 |
| (name of circulator) | | | (circulator's residence - include number, street, and municipality) | |
| I further certify I am either a qualified elector of | Wisconsin, or a U.S. citizen, age 18 or older who, if I was are electors of the jurisdiction or district represented | vere 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. § 0.03, I personally circulated this recall petition and the paper with full knowledge of its content on the date is | and personally obtained each of |
| | | this certification is punishable under § 12.13(3)(a), Wis. Stats. | the paper with full knowledge of its coment on the date i | material opposite ma or ner |
| 5/18/2021 | Khelle Bh | are of circulator | | Page No. 999 |
| EL-170 (Rev. 2019-09) The information on this form is requi | | e Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 608-20 | 56-8005 web: http://elections.wi.gov email. elections@wi.gov | |

| | | . We, the undersigned qualified elect | ors of the Assembly District 63 | The state of the s |
|--|--|---|---|--|
| TO: The Wisconsin Election Commission | ger in the | . We, the undersigned quantica elec- | (jurisdiction or dis | trict of officeholder) |
| (official with whom nomination | on papers or declaration of candidacy for the office is filed) | from office pursuant to Article XIII, Section | n 12 of the Wisconsin Constitution and §.9.10 of | of the Wisconsin Statutes. |
| petition for the recall of | Robin Vos | | | 444 |
| E | (name of officeholder to be recalled and office) | TATEMENT OF REASON FOR RECALL | No statement of reason is required to initiate the recall | of state, congressional, |
| | for city, village town and school district officials. The | TATEMENT OF REASON FOR RECALL reason must be related to the official responsibilities of the officeholder | No statement of reason is required to imme | N # 122 0.0 € 122 0.0 € 125 0.0 € |
| The reason for recall must be stated on petitions | ioi eny, vinage, to vin, and | the CCP, tailure to protect Wisconsin farmland from the CCP, | | |
| Robin Vos should be recalled for his tacit support | of the Chinese Communist Party (CCP), acceptance of the | ips from the CCP, failure to protect Wisconsin farmland from the CCP, | | |
| | | | ON THE MUNICIPALITY OF RESIDENCE MI | UST ALWAYS BE LISTED. |
| The same of the sa | LINC PURPOSES, WHEN DIFFERENT THAN M | UNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE N STREET & NUMBER OR RURAL ROUTE | MUNICIPALITY OF RESIDENCE | DATE OF |
| | PRINTED NAME OF ELECTORS | STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no. | Indicate Town, City, or Village | SIGNING |
| SIGNATURES OF ELECTORS | PRINTED NAME OF ELECTORS | | | 5-119-24 |
| . ///= 1/ | 1 1:180 | goods WOODLAWN DR | Octy BURUNETON | 17 |
| 1 /1xt < 1la= | CLINT CLASEN | elle and fine Sulp | Jown MI OL | 5/10h |
| | mit no | 5912 WAGALED AL | City / WeakCan't | 2/18/20 |
| 2. | Matt / Kilner | | Town / A | 5/19/24 |
| 3 1 1 2 1 | 1,100 | 2529 oregon St | ocity Mt. Pleasant | 5/19/20 |
| 3 della lande | Ashlee Tumlinson | 2821 0129011)1 | □ Town | 5/19/21 |
| 15 10 21/1/27 | Shakon Cook | 200 MCt | o Village Facine | |
| 4- Valla (OCK | Snakow Cook | 200000 | □ Town | 1 1-119/11 |
| 5. 911 T. Au | DUSTIN CIPTZMAIN | 12201 byeson St | Utillage City | 7/11/2 |
| 3 Ilsten alm | 1000111 06121111 | 220 | □ Town | J = 1/9/21 |
| 6.7 17 0 0. | Day 012/16 | 7707 100000 St | □ Village □ City | 0-11-11V/ |
| Lines Williams | 11615 1101015 | 20101 | □ Town | = 110/20 |
| 7.01 | 1 00 111 | 100 8808 DODG ST | □ Village □ City | 0/19/2 |
| Marcia XI an | act // AME /H-/ E | 112,7 | □ Town □ Village | |
| 8. | // / | | U City | |
| 0, | | | □ Town | |
| 9. | | | □ City | |
| 1 | | | ☐ Town | |
| 10. | | | □ City | |
| | | Certification of Circulator | (1 1 1 | X 75052 |
| 0 , 01 | | 1008 ALDROLLEUS DE | GRAND KIRIKI T | |
| 1. Kardy Blank | VI. | I leside at | (circulator's residence - include number, street, and municipality) | ion and personally obtained each |
| (name of circulator) | f Wisconsin, or a U.S. citizen, age 18 or older who, if | were a resident of this state, would not be disqualified from voting under by the officeholder named in this petition. I know that each person sing this certification is punishable under § 12.13(3)(a), Wis. Stats. | igned the paper with full knowledge of its content on the d | ate indicated opposite his or her |
| the signatures on this paper. I know that the sig | ners are electors of the jurisdiction or district represent | ed by the officeholder named in this petition. I know that each person and this certification is punishable under § 12.13(3)(a), Wis. Stats. | | Page No. 1000 |
| name. I know their respective residences giver | I support this recall petition. John aware that laistly | ng this certification is punishable under § 12.13(3)(a), Wis. Stats. | | 1000 |
| | | | anail alactions@wi gov | |
| (date) | (sign | ature of circulator) the Wisconsin Elections Commission P.O. Box 7984, Madison, WI 53707-7984 601 | 3-266-8005 [web: http://erections.wi.gov email: electrons@wi.gov | |
| EL-170 (Rev. 2019-09) The information on this form is re | quired by wis state 99 o to and 210 This service pro- | | | |