
STATE OF WISCONSIN
Before the Government Accountability Board

The Certified Complaint of

THE REPUBLICAN PARTY OF WISCONSIN
ANDREW DAVIS, Complainant

**VERIFIED
COMPLAINT**

Against,

TODD KOLOSSO, Respondent

This complaint is made under Chapters 5 and 8 of the Wisconsin Statutes and Chapter GAB 2 of the State of Wisconsin Administrative Code, and requests that the Government Accountability Board review the sufficiency of the nomination papers for the Respondent in light of the allegations contained herein.

I, Andrew Davis, allege that:

1. I am a resident of the State of Wisconsin and am a qualified elector. I reside at 2525 South Shore Drive, Milwaukee, Milwaukee County, Wisconsin, 53207.
2. Todd Kolosso, who listed his address as 2226 E. Edgewood Ave., WI 53211 has filed nomination papers with the Government Accountability Board for certification as an Independent candidate for the U.S. House of Representatives in the Fifth Congressional District on the November 2, 2010 ballot.

I
CHALLENGES TO CIRCULATOR INFORMATION

3. Complainant re-alleges and reincorporates herein paragraphs 1 through 2, above.
4. GAB 2.05(14) states, in part, “No signature on a nomination paper shall be counted unless the elector who circulated the nomination paper completes and signs the certificate of circulator and does so after, not before the paper is circulated. No signature may be counted when the residency of the circulator cannot be determined by the information given on the nomination paper.” (Emphasis added.)
5. Page 133 of Respondent’s nomination papers is missing the required municipality of residence information for the circulator, in contravention of GAB 2.05(14). The circulator failed to specify his/her town, village, or city of residence for voting purposes. A copy of page 133 of Respondent’s nomination papers are attached hereto as Exhibit A.

5. Page 80 of Respondent's nomination paper states that "Frank S. Milwaukee" circulated the nomination paper. A copy of page 80 of Respondent's nomination papers is attached hereto as Exhibit Frank's last name is highly suspect and does not match the name with which he signed the nomination paper, in contravention of GAB 2.05(14).
6. Therefore, none of the signatures on pages 133 and 80 of the Respondent's nomination papers may be counted by the Government Accountability Board.

II CHALLENGES TO INDIVIDUAL SIGNATURES

A Signer Does Not Reside within the District

7. Complainant re-alleges and reincorporates herein paragraphs 1 through 6, above.
8. Section 8.15(3), Wis. Stats. states "all signers on each separate nomination paper...shall reside in the jurisdiction or district which the candidate named on the paper will represent, if elected."
9. Chapter 3.15 of the Wisconsin Statutes provides a description of the 5th Congressional District. A residence falling outside of the description listed in Chapter 3.15, is not within the boundaries of the 5th Congressional District. Exhibit ZZZ is a map demonstrating the boundaries of the 5th Congressional District.
10. Page 77, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2061 S. 71st, City of West Allis. A copy of page 77 of Respondent's nomination papers is attached hereto as Exhibit B. Exhibit B contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
11. Page 81, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1812 S. 59th Street, City of West Allis. A copy of page 81 of Respondent's nomination papers is attached hereto as Exhibit C. Exhibit C contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
12. Page 81, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1400 S. 57th Street, City of West Allis. A copy of page 81 of Respondent's nomination papers is attached hereto as Exhibit C. Exhibit C contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

13. Page 81, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1821 S. 70th Street, City of West Allis. A copy of page 81 of Respondent's nomination papers is attached hereto as Exhibit C. Exhibit C contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
14. Page 10, line 10 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 8815 N Center Street, City of Milwaukee. A copy of page 10 of Respondent's nomination papers is attached hereto as Exhibit D. Exhibit D contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
15. Page 16, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2169 S. 66th Street, City of West Allis. A copy of page 16 of Respondent's nomination papers is attached hereto as Exhibit E. Exhibit E contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
16. Page 123, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1830 E. Kane Place Unit 5, City of Milwaukee. A copy of page 123 of Respondent's nomination papers is attached hereto as Exhibit F. Exhibit F contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
17. Page 42, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence in illegible handwriting. A copy of page 42 of Respondent's nomination papers is attached hereto as Exhibit G. Exhibit G clearly demonstrates that the residence cannot be determined to be in the 5th Congressional District, in contravention of section 8.15(3).
18. Page 42, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1752 W. 27th Street., Milwaukee. A copy of page 42 of Respondent's nomination papers is attached hereto as Exhibit G. Exhibit G contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
19. Page 42, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 5701 W. Lincoln, City of West Allis. A copy of page 42 of Respondent's nomination papers is attached hereto as Exhibit G. Exhibit G contains a printout of the Wisconsin State Legislative search for representative districts,

and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

20. Page 45, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 316 S 78th Street, City of Milwaukee. A copy of page 45 of Respondent's nomination papers is attached hereto as Exhibit H. Exhibit H contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
21. Page 45, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2443 Murray Ave., Milwaukee. A copy of page 45 of Respondent's nomination papers is attached hereto as Exhibit H. Exhibit H contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
22. Page 45, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1509 E Kane Pl, City of Milwaukee. A copy of page 45 of Respondent's nomination papers is attached hereto as Exhibit H. Exhibit H contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
23. Page 45, line 10 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1214 E Chambers St., Milwaukee. A copy of page 45 of Respondent's nomination papers is attached hereto as Exhibit H. Exhibit H contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
24. Page 49, line 4 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 3364 N 96th St, City of Milwaukee. A copy of page 49 of Respondent's nomination papers is attached hereto as Exhibit I. Exhibit I contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
25. Page 19, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 7475 S. Highfield Ct., City of Oak Creek. A copy of page 19 of Respondent's nomination papers is attached hereto as Exhibit J. Exhibit J contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 1st Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

26. Page 19, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 3724 S 104th St., City of Greenfield. A copy of page 19 of Respondent's nomination papers is attached hereto as Exhibit J. Exhibit J contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 1st Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
27. Page 36, line 4 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 21455 S 63rd, City of West Allis. A copy of page 36 of Respondent's nomination papers is attached hereto as Exhibit K. Exhibit K contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
28. Page 36, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1012 S. 56th, City of West Allis. A copy of page 36 of Respondent's nomination papers is attached hereto as Exhibit K. Exhibit K contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
29. Page 36, lines 7, 8, 9 and 10 of Respondent's nomination papers are signed by individuals who listed their municipality of residence as 1935 S 72nd, Town of West Allis. A copy of page 36 of Respondent's nomination papers is attached hereto as Exhibit K. Exhibit K contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
30. Page 37, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 80322 S 7703, Mukwonago. A copy of page 37 of Respondent's nomination papers is attached hereto as Exhibit L. Exhibit L contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
31. Page 60, line 4 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1805 E. Park Pl., City of Milwaukee. A copy of page 60 of Respondent's nomination papers is attached hereto as Exhibit M. Exhibit M contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
32. Page 61, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1412 W. Greenfield, City of Milwaukee. A copy of page 61 of Respondent's nomination papers is attached hereto as Exhibit N. Exhibit N contains a printout of the Wisconsin State Legislative search for representative districts,

and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

33. Page 61, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as W310 57455 Florena Ct., Town of Mukwonago. A copy of page 61 of Respondent's nomination papers is attached hereto as Exhibit N. Exhibit N contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
34. Page 61, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1749 S. 70th St. Upper, City of West Allis. A copy of page 61 of Respondent's nomination papers is attached hereto as Exhibit N. Exhibit N contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
35. Page 61, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2333 S. 65th, City of West Allis. A copy of page 61 of Respondent's nomination papers is attached hereto as Exhibit N. Exhibit N contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
36. Page 62, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1444 S. 70th St., City of West Allis. A copy of page 62 of Respondent's nomination papers is attached hereto as Exhibit O. Exhibit O contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
37. Page 62, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2333 S. 65th Street, City of West Allis. A copy of page 62 of Respondent's nomination papers is attached hereto as Exhibit O. Exhibit O contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
38. Page 62, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1613 S. 65th St, City of West Allis. A copy of page 62 of Respondent's nomination papers is attached hereto as Exhibit O. Exhibit O contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

39. Page 62, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6039 W. Mitchell, City of West Allis. A copy of page 62 of Respondent's nomination papers is attached hereto as Exhibit O. Exhibit O contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
40. Page 62, line 9 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1313 W. Lapham, City of West Allis. A copy of page 62 of Respondent's nomination papers is attached hereto as Exhibit O. Exhibit O contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
41. Page 62, line 10 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2138 S. 5th, City of Milwaukee. A copy of page 62 of Respondent's nomination papers is attached hereto as Exhibit O. Exhibit O contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
42. Page 63, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 100401 Gratt St., City of West Allis. A copy of page 63 of Respondent's nomination papers is attached hereto as Exhibit P. Exhibit P contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
43. Page 63, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6039 W Mitchell St, City of West Allis. A copy of page 63 of Respondent's nomination papers is attached hereto as Exhibit P. Exhibit P contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
44. Page 63, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6102 W. Park Hill Ave., City of Milwaukee. A copy of page 63 of Respondent's nomination papers is attached hereto as Exhibit P. Exhibit P contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
45. Page 63, line 10 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1341 S. 62nd St., City of West Allis. A copy of page 63 of Respondent's nomination papers is attached hereto as Exhibit P. Exhibit P contains a printout of the Wisconsin State Legislative search for representative districts, and it

clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

46. Page 64, line 9 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 9031 N 95th, City of Milwaukee. A copy of page 64 of Respondent's nomination papers is attached hereto as Exhibit Q. Exhibit Q contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
47. Page 65, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1509 E Kane Pl Apt 18, City of Milwaukee. A copy of page 65 of Respondent's nomination papers is attached hereto as Exhibit R. Exhibit R contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
48. Page 65, line 9 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1234 N 21st, City of Milwaukee. A copy of page 65 of Respondent's nomination papers is attached hereto as Exhibit R. Exhibit R contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
49. Page 66, line 4 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1512 Royal Place, City of Milwaukee. A copy of page 66 of Respondent's nomination papers is attached hereto as Exhibit S. Exhibit S contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
50. Page 66, line 10 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 17082 Lafayette Pl., City of Milwaukee. A copy of page 66 of Respondent's nomination papers is attached hereto as Exhibit S. Exhibit S contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
51. Page 67, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 3364 N. 96th St., City of Milwaukee. A copy of page 67 of Respondent's nomination papers is attached hereto as Exhibit T. Exhibit T contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

52. Page 67, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1300 N. Prospect Ave. #465, City of Milwaukee. A copy of page 67 of Respondent's nomination papers is attached hereto as Exhibit T. Exhibit T contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
53. Page 68, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 14417 Kostner, Middathian, IL. A copy of page 68 of Respondent's nomination papers is attached hereto as Exhibit U. Exhibit U contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in Illinois, not the 5th Congressional District, in contravention of section 8.15(3).
54. Page 68, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6421 W. Leroy Ave., City of Greenfield. A copy of page 68 of Respondent's nomination papers is attached hereto as Exhibit U. Exhibit U contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 1st Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
55. Page 68, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 4947 W. Jackson Park Dr., City of Milwaukee. A copy of page 68 of Respondent's nomination papers is attached hereto as Exhibit U. Exhibit U contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
56. Page 52, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 11 Boyle Place, City of Fond du Lac. A copy of page 52 of Respondent's nomination papers is attached hereto as Exhibit V. Exhibit V contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 6th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
57. Page 54, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2028 S Livingston Ter, City of West Allis. A copy of page 54 of Respondent's nomination papers is attached hereto as Exhibit W. Exhibit W contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
58. Page 55, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as W225 5900 Mt, City of Big Bend. A copy of page 55 of Respondent's nomination papers is attached hereto as Exhibit X. Exhibit X

contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

59. Page 57, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 3259 N Maryland Ave, City of Milwaukee. A copy of page 57 of Respondent's nomination papers is attached hereto as Exhibit Y. Exhibit Y contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
60. Page 58, line 4 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as W299 58046 Hwy 83, Village of Mukwonago. A copy of page 58 of Respondent's nomination papers is attached hereto as Exhibit Z. Exhibit Z contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
61. Page 58, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2673 N Brenen St., City of Milwaukee. A copy of page 58 of Respondent's nomination papers is attached hereto as Exhibit Z. Exhibit Z contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in an Unknown Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
62. Page 59, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6113 W. Bluemound Rd, City of Milwaukee. A copy of page 59 of Respondent's nomination papers is attached hereto as Exhibit AA. Exhibit AA contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
63. Page 70, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6911 West Orchard St. #207, City of West Allis. A copy of page 70 of Respondent's nomination papers is attached hereto as Exhibit BB. Exhibit BB contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
64. Page 1, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 5807 W Greenfield Ave., Village of West Allis. A copy of page 1 of Respondent's nomination papers is attached hereto as Exhibit CC. Exhibit CC contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th

Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

65. Page 43, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1025 S. 72nd St, City of West Allis. A copy of page 43 of Respondent's nomination papers is attached hereto as Exhibit DD. Exhibit DD contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
66. Page 43, line 4 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 3622 S 77th, City of Milwaukee. A copy of page 43 of Respondent's nomination papers is attached hereto as Exhibit DD. Exhibit DD contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
67. Page 43, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 7313 W. Lapham, City of West Allis. A copy of page 43 of Respondent's nomination papers is attached hereto as Exhibit DD. Exhibit DD contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
68. Page 43, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6705 W. Fairview, City of Milwaukee. A copy of page 43 of Respondent's nomination papers is attached hereto as Exhibit DD. Exhibit DD contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
69. Page 43, line 9 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 5010 W Beloit Rd, Village of West Milwaukee. A copy of page 43 of Respondent's nomination papers is attached hereto as Exhibit DD. Exhibit DD contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
70. Page 78, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 5848 W. Scott, City of West Allis. A copy of page 78 of Respondent's nomination papers is attached hereto as Exhibit EE. Exhibit EE contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

71. Page 78, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1541 S 70th Street, City of West Allis. A copy of page 78 of Respondent's nomination papers is attached hereto as Exhibit EE. Exhibit EE contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
72. Page 78, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1510 S. 60th, City of West Allis. A copy of page 78 of Respondent's nomination papers is attached hereto as Exhibit EE. Exhibit EE contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
73. Page 78, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1212 S 62nd, City of West Allis. A copy of page 78 of Respondent's nomination papers is attached hereto as Exhibit EE. Exhibit EE contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
74. Page 78, line 10 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2059 S 71st, City of West Allis. A copy of page 78 of Respondent's nomination papers is attached hereto as Exhibit EE. Exhibit EE contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
75. Page 93, line 4 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1641 S. 69th St, City of West Allis. A copy of page 78 of Respondent's nomination papers is attached hereto as Exhibit FF. Exhibit FF contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
76. Page 89, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1715 14th Street, City of Green Bay. A copy of page 89 of Respondent's nomination papers is attached hereto as Exhibit GG. Exhibit GG contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is not the 5th Congressional District, in contravention of section 8.15(3).
77. Page 89, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2458 S. 60th Street, West Allis. A copy of page 89 of Respondent's nomination papers is attached hereto as Exhibit GG. Exhibit GG contains a printout of the Wisconsin State Legislative search for representative districts,

and it clearly demonstrates that the residence is not the 5th Congressional District, in contravention of section 8.15(3).

78. Page 44, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 5929 W Greenfield, City of West Allis. A copy of page 44 of Respondent's nomination papers is attached hereto as Exhibit HH. Exhibit HH contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
79. Page 3, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2419 N. Wahl Ave, Milwaukee. A copy of page 3 of Respondent's nomination papers is attached hereto as Exhibit JJ. Exhibit JJ contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
80. Page 118, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 7061 N Good Hope, City of Milwaukee. A copy of page 118 of Respondent's nomination papers is attached hereto as Exhibit KK. Exhibit KK contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
81. Page 110, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 800 S Glen Ave., City of Milwaukee. A copy of page 110 of Respondent's nomination papers is attached hereto as Exhibit LL. Exhibit LL contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
82. Page 75, line 7 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence in illegible handwriting. A copy of page 75 of Respondent's nomination papers is attached hereto as Exhibit MM. Without the ability to identify the person's address, there is no way to verify the person lives in the 5th Congressional District.
83. Page 3, line 6 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2419 N. Wahl Ave, Milwaukee. A copy of page 3 of Respondent's nomination papers is attached hereto as Exhibit JJ. Exhibit JJ contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
84. Page 35, line 1 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 6728 W Hayes Ave, West Allis. A copy of page 35

of Respondent's nomination papers is attached hereto as Exhibit TT. Exhibit TT contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

85. Page 35, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 937 S 72nd St., West Allis. A copy of page 35 of Respondent's nomination papers is attached hereto as Exhibit TT. Exhibit TT contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
86. Page 35, lines 3 and 4 of Respondent's nomination papers are signed by individuals who listed their municipality of residence as 1741 S 70th Street, West Allis. A copy of page 35 of Respondent's nomination papers is attached hereto as Exhibit TT. Exhibit TT contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
87. Page 35, lines 5 and 6 of Respondent's nomination papers are signed by individuals who listed their municipality of residence as 7018 W. Mitchell, West Allis. A copy of page 35 of Respondent's nomination papers is attached hereto as Exhibit TT. Exhibit TT contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
88. Page 17, line 8 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2206 S 67th Pl, West Allis. A copy of page 17 of Respondent's nomination papers is attached hereto as Exhibit UU. Exhibit UU contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
89. Page 17, line 10 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2169 S. 66th St., City of West Allis. A copy of page 17 of Respondent's nomination papers is attached hereto as Exhibit UU. Exhibit UU contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
90. Page 14, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 5848 N 114th St., City of West Allis. A copy of page 14 of Respondent's nomination papers is attached hereto as Exhibit UU. Exhibit UU contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

91. Page 117, line 9 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 3436 N Murray Ave, City of Milwaukee. A copy of page 117 of Respondent's nomination papers is attached hereto as Exhibit WW. Exhibit WW contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
92. Page 119, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2466 N Oakland Street, City of Milwaukee. A copy of page 119 of Respondent's nomination papers is attached hereto as Exhibit XX. Exhibit XX contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
93. Page 119, line 5 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 2361 N 55th St., City of Milwaukee. A copy of page 119 of Respondent's nomination papers is attached hereto as Exhibit XX. Exhibit XX contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
94. Page 119, lines 7 and 8 of Respondent's nomination papers are signed by individuals who listed their municipality of residence as 5672 N 40th Street, City of Milwaukee. A copy of page 119 of Respondent's nomination papers is attached hereto as Exhibit XX. Exhibit XX contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
95. Page 125, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 1028 E Juneau Ave Apt 825, City of Milwaukee. A copy of page 125 of Respondent's nomination papers is attached hereto as Exhibit YY. Exhibit YY contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
96. Page 91, lines 1 and 2 of Respondent's nomination papers are signed by individuals who listed their municipality of residence as 627 S 62nd Street, City of Milwaukee. A copy of page 91 of Respondent's nomination papers is attached hereto as Exhibit ZZ. Exhibit ZZ contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).

97. Page 91, line 3 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as 3700 S 61st St, City of Milwaukee. A copy of page 91 of Respondent's nomination papers is attached hereto as Exhibit ZZ. Exhibit ZZ contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 4th Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
98. Page 38, lines 4 and 5 of Respondent's nomination papers are signed by individuals who listed their municipality of residence as 637 Riverview Ct., City of Jefferson. A copy of page 38 of Respondent's nomination papers is attached hereto as Exhibit AAA. Exhibit AAA contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is located in the 2nd Congressional District, not the 5th Congressional District, in contravention of section 8.15(3).
99. Therefore, under Section 8.15(3), Wis. Stats., the signatures referenced in paragraphs 38-47 herein are not valid and may not be counted by the Elections Board.

B
Signature Does Not Have Valid Date

100. GAB 2.05(15)(b) States "an individual signature on a nomination paper may not be counted when any of the following occur...the signature is dated after the date of certification contained in the certificate of the circulator."
101. Page 16, lines 2 and 3 of Respondent's nomination papers contains a signature that was dated as 7/10. A copy of page 16 of Respondent's nomination papers is attached hereto as Exhibit E. The circled dates indicate that the elector's signature does not contain a day which makes it impossible to determine whether the signature was made before or after the circulator signed the certification of circulator.
102. Page 16, line 4 of Respondent's nomination papers contains a signature that was dated as 7/10/2011. A copy of page 16 of Respondent's nomination papers is attached hereto as Exhibit E. There is no way the signature could have been made on 7/10/2011 since the current year is 2010.
103. Page 89, line 9 of Respondent's nomination papers contains a signature without a date. A copy of page 89 of Respondent's nomination papers is attached hereto as Exhibit GG. Without a date the signature is invalid.
104. Page 132, lines 4, 5, 6 and 7 of Respondent's nomination papers contains signatures dated 7/01/10. A copy of page 132 of Respondent's nomination papers is attached hereto as Exhibit II. The circled dates indicate that the elector's signature is dated after 7/9/10, which is the date that the circulator lists, rendering the signatures invalid per GAB 2.05(15)(b).

105. Page 31, line 6 of Respondent's nomination papers contains a signature that was dated as 7/10. A copy of page 31 of Respondent's nomination papers is attached hereto as Exhibit NN. The circled dates indicate that the elector's signature does not contain a day which makes it impossible to determine whether the signature was made before or after the circulator signed the certification of circulator.
106. Page 40, line 3 of Respondent's nomination papers contains a signature without a date. A copy of page 40 of Respondent's nomination papers is attached hereto as Exhibit OO. Without a date the signature is invalid.
107. Page 79, line 9 of Respondent's nomination papers contains a signature without a date. A copy of page 79 of Respondent's nomination papers is attached hereto as Exhibit PP. Without a date the signature is invalid.
108. Page 94, lines 4, 5 and 6 of Respondent's nomination papers contain signatures without dates. A copy of page 94 of Respondent's nomination papers is attached hereto as Exhibit QQ. Without a date the signature is invalid.
109. Page 72, lines 5 and 6 of Respondent's nomination papers contain signatures dated as 6/13th. A copy of page 72 of Respondent's nomination papers is attached hereto as Exhibit RR. The circled dates indicate that the elector's signature does not contain a year which makes it impossible to determine whether the signature was made before or after the circulator signed the certification of circulator.
110. Page 121, lines 6 and 10 of Respondent's nomination papers contain signatures dated as 7/10. A copy of page 121 of Respondent's nomination papers is attached hereto as Exhibit SS. The circled dates indicate that the elector's signature does not contain a day which makes it impossible to determine whether the signature was made before or after the circulator signed the certification of circulator.

C

Signatures Are Missing Proper Addresses

111. GAB 2.05(12) states, "A complete address, including municipality of residence for voting purposes, and the street and number, if any, of the residence, (or postal address if it is located in the jurisdiction that the candidate seeks to represent), shall be listed for each signature on a nomination paper."
112. Page 70, line 2 of Respondent's nomination papers is signed by an individual who listed his/her municipality of residence as PO Box 14724., City of New Berlin. A copy of page 70 of Respondent's nomination papers is attached hereto as Exhibit BB. Exhibit BB contains a printout of the Wisconsin State Legislative search for representative districts, and it clearly demonstrates that the residence is not a valid address.

D

Signatures Are Missing Proper Municipality of Residence

113. Section 8.15(3), Wis. Stats. states “all signers on each separate nomination paper...shall reside in the jurisdiction or district which the candidate named on the paper will represent, if elected.”
114. Chapter 3.11 of the Wisconsin Statutes provides a description of the 1st Congressional District. A residence falling outside of the description listed in Chapter 3.11, is not within the boundaries of the 1st Congressional District. Exhibit TTT is a map demonstrating the boundaries of the 1st Congressional District.
115. GAB 2.05(12) states, “A complete address, including municipality of residence for voting purposes...shall be listed for each signature on a nomination paper.”
116. Page 110, lines 4 and 10 of Respondent’s nomination papers are signed by individuals who listed their municipality of residence as “WFB.” A copy of page 110 of Respondent’s nomination papers is attached hereto as Exhibit LL. Exhibit LL clearly demonstrates that “WFB” is not a municipality and is therefore in contravention of GAB 2.05(12).
117. Page 17, line 3 of Respondent’s nomination papers is signed by an individual who listed his/her municipality of residence as “Gtown.” A copy of page 17 of Respondent’s nomination papers is attached hereto as Exhibit UU. Exhibit UU clearly demonstrates that “Gtown” is not a municipality and is therefore in contravention of GAB 2.05(12).
118. Page 90, lines 2, 3, 5 and 6 of Respondent’s nomination papers are signed by individuals who listed their municipality of residence as “Meno Falls.” A copy of page 90 of Respondent’s nomination papers is attached hereto as Exhibit BBB. Exhibit BBB clearly demonstrates that “Meno Falls” is not a municipality and is therefore in contravention of GAB 2.05(12).
119. Page 87, lines 1 and 2 of Respondent’s nomination papers are signed by individuals who listed their municipality of residence as “Meno Falls.” A copy of page 87 of Respondent’s nomination papers is attached hereto as Exhibit CCC. Exhibit CCC clearly demonstrates that “Meno Falls” is not a municipality and is therefore in contravention of GAB 2.05(12).
120. Page 109, line 1 of Respondent’s nomination papers is signed by an individual who listed his/her municipality of residence as “WFB.” A copy of page 109 of Respondent’s nomination papers is attached hereto as Exhibit DDD. Exhibit DDD clearly demonstrates that “WFB” is not a municipality and is therefore in contravention of GAB 2.05(12).
121. Page 56, line 1 of Respondent’s nomination papers is signed by an individual who listed his/her municipality of residence as “Meno Falls.” A copy of page 56 of Respondent’s nomination papers is attached hereto as Exhibit EEE. Exhibit EEE clearly demonstrates

that “Meno Falls” is not a municipality and is therefore in contravention of GAB 2.05(12).

122. Page 88, line 1 of Respondent’s nomination papers are signed by individuals who listed their municipality of residence as “W.A.” A copy of page 88 of Respondent’s nomination papers is attached hereto as Exhibit FFF. Exhibit FFF clearly demonstrates that “W.A.” is not a municipality and is therefore in contravention of GAB 2.05(12).

E
Signatures Are Improperly Signed

123. Section 8.15(2), Wis. Stats. states, “Only one signature per person for the same office is valid.”
124. GAB 2.05(8) states, “An elector shall sign his or her own name unless unable to do so because of physical disability.
125. Page 49, lines 2, 7 and 8 of Respondent’s nomination papers are signed by individuals in the form of printing their names. A copy of page 49 of Respondent’s nomination papers is attached hereto as Exhibit I. Exhibit I clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
126. Page 67, line 2 of Respondent’s nomination papers is signed by an individual in the form of printing his/her name. A copy of page 67 of Respondent’s nomination papers is attached hereto as Exhibit T. Exhibit T clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
127. Page 54, line 4 of Respondent’s nomination papers is signed by an individual in the form of printing his/her name. A copy of page 54 of Respondent’s nomination papers is attached hereto as Exhibit W. Exhibit W clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
128. Page 55, line 4 of Respondent’s nomination papers is signed by an individual in the form of printing his/her name. A copy of page 55 of Respondent’s nomination papers is attached hereto as Exhibit X. Exhibit X clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
129. Page 70, line 1 of Respondent’s nomination papers is signed by an individual in the form of printing his/her name. A copy of page 70 of Respondent’s nomination papers is attached hereto as Exhibit BB. Exhibit BB clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
130. Page 1, line 8 of Respondent’s nomination papers is signed by an individual in the form of printing his/her name. A copy of page 1 of Respondent’s nomination papers is attached hereto as Exhibit CC. Exhibit CC clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).

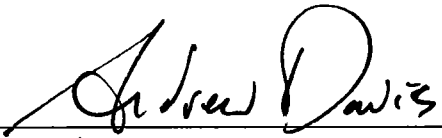
131. Page 43, lines 1, 2, 3, 4, 5 and 6 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 43 of Respondent's nomination papers is attached hereto as Exhibit DD. Exhibit DD clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
132. Page 44, lines 8 and 9 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 44 of Respondent's nomination papers is attached hereto as Exhibit HH. Exhibit HH clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
133. Page 110, line 9 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 110 of Respondent's nomination papers is attached hereto as Exhibit LL. Exhibit LL clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
134. Page 119, line 1 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 119 of Respondent's nomination papers is attached hereto as Exhibit XX. Exhibit XX clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
135. Page 83, lines 1 and 2 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 83 of Respondent's nomination papers is attached hereto as Exhibit GGG. Exhibit GGG clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
136. Page 84, line 1 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 84 of Respondent's nomination papers is attached hereto as Exhibit HHH. Exhibit HHH clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
137. Page 97, lines 3 and 5 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 97 of Respondent's nomination papers is attached hereto as Exhibit III. Exhibit III clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
138. Page 11, lines 9 and 10 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 11 of Respondent's nomination papers is attached hereto as Exhibit JJJ. Exhibit JJJ clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
139. Page 47, lines 1 and 2 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 47 of Respondent's nomination papers is attached hereto as Exhibit KKK. Exhibit KKK clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).

140. Page 48, lines 3, 4, 5, 9 and 10 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 48 of Respondent's nomination papers is attached hereto as Exhibit LLL. Exhibit LLL clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
141. Page 18, lines 1 and 2 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 18 of Respondent's nomination papers is attached hereto as Exhibit MMM. Exhibit MMM clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
142. Page 24, line 10 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 24 of Respondent's nomination papers is attached hereto as Exhibit NNN. Exhibit NNN clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
143. Page 39, lines 1, 5, 6 and 7 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 39 of Respondent's nomination papers is attached hereto as Exhibit OOO. Exhibit OOO clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
144. Page 122, line 7 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 122 of Respondent's nomination papers is attached hereto as Exhibit PPP. Exhibit PPP clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
145. Page 113, line 3 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 113 of Respondent's nomination papers is attached hereto as Exhibit QQQ. Exhibit QQQ clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
146. Page 27, lines 6, 7 and 10 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 27 of Respondent's nomination papers is attached hereto as Exhibit RRR. Exhibit RRR clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
147. Page 26, line 3 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 26 of Respondent's nomination papers is attached hereto as Exhibit SSS. Exhibit SSS clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
148. Page 135, line 4 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 135 of Respondent's nomination papers is attached hereto as Exhibit TTT. Exhibit TTT clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).

149. Page 46, lines 3 and 4 of Respondent's nomination papers are signed by individuals in the form of printing their names. A copy of page 46 of Respondent's nomination papers is attached hereto as Exhibit UUU. Exhibit UUU clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
150. Page 20, line 10 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 20 of Respondent's nomination papers is attached hereto as Exhibit VVV. Exhibit VVV clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
151. Page 29, line 2 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 29 of Respondent's nomination papers is attached hereto as Exhibit WWW. Exhibit WWW clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).
152. Page 116, line 3 of Respondent's nomination papers is signed by an individual in the form of printing his/her name. A copy of page 116 of Respondent's nomination papers is attached hereto as Exhibit XXX. Exhibit XXX clearly demonstrates that the signers printed their name in contravention of GAB 2.05(8).

WHEREFORE, Complainant prays that the Government Accountability Board review the sufficiency of Respondent's nomination papers and declare them to be invalid in whole or in part; and render such other relief that the Government Accountability Board may deem just and equitable.

Dated this 16th day of July, 2010 at Madison, Wisconsin.

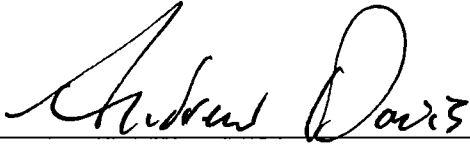


Andrew Davis
REPUBLICAN PARTY OF WISCONSIN

CERTIFICATION

I, Andrew Davis, being first duly sworn upon oath, state that I personally read the above complaint and that the above allegations are true and correct based on my personal knowledge and, as to those allegations stated on information and belief, I believe them to be true.

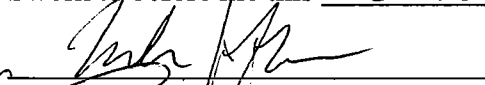
I have mailed a copy of this verified complaint to the Respondent.



Andrew Davis

State of Wisconsin)
) ss
County of Dane)

Sworn to before me this 16th day of July 2010.



Notary Public or Person Authorized
to Administer Oaths

My commission expires 2-5-12
Or, ___ is permanent.

Exhibit List:

133	A
77	B
81	C
10	D
16	E
123	F
42	G
45	H
49	I
19	J
36	K
37	L
60	M
61	N
62	O
63	P
64	Q
65	R
66	S
67	T
68	U
52	V
54	W
55	X
57	Y
58	Z
59	AA
70	BB
1	CC
43	DD
78	EE
93	FF
89	GG
44	HH
132	II
3	JJ
118	KK
110	LL
75	MM
31	NN

Exhibit List:

40	OO
79	PP
94	QQ
72	RR
121	SS
35	TT
17	UU
14	VV
117	WW
119	XX
90	BBB
87	CCC
109	DDD
83	GGG
84	HHH
97	III
11	JJJ
47	KKK
48	LLL
18	MMM
24	NNN
39	OOO
56	EEE
122	PPP
113	QQQ
27	RRR
26	SSS
135	TTT
88	FFF
46	UUU
20	VVV
29	WWW
125	YY
91	ZZ
38	AAA
116	XXX
80	YYY
Map	ZZZ

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT A7

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Robin Retzold</i>	7370 N Langview Ave Glendale WI 53209	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Glendale	7/10/10
2. <i>Rick</i>	4411 N. Manns Blvd Shorewood WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
3. <i>Pamela</i>	922 W. Riverview Glendale WI 53209	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Glendale	7/10/10
4. <i>Katherine Bush</i>	4380 CHEROKEE DR. BROOKFIELD, WI 53005	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City BROOKFIELD	7/10/10
5. <i>[Signature]</i>	6417 W. Fairlane Ave Brown Deer	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6. <i>[Signature]</i>	6417 W. Fairlane Ave. Brown Deer WI 53223	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brown Deer	7/10/2010
7. <i>Jane Riel</i>	456 N. University Waukesha 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	7/10/2010
8. <i>Pamela</i>	1820 N. Cicuta 53007	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield	7/10/10
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, KATHERINE H. BUSH, 13100, certify
(Name of circulator)
 I reside at 5111 N. BAY RIDGE
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
 7/10/10
 Katherine H. Bush
(Date) (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT B 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative			District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Julie Saccomando	20601 S. 71st West Allis, WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
2. [Signature]	2621 S. 92nd St West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
3. KAY Tramonte	2628 W. 93rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	7/2/10
4. Tammy Suran	8637 W. National Ave West Allis, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
5. Amy Rieck	8602 W. Orchard West Allis, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
6. Jewel Berg	1517 S. 94th Pl West Allis WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
7. Monica Hackett	7521 West Beloit West Allis WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
8. Mike Hackett	1954 Rindan Ct Wauwatosa WI 53226	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/2/10
9. MARIANNE MURPHY	2629 N 72nd St WAA	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/2/10
10. Melissa Hstruck	8707 W. Stuth Ave W.A. 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10

I, DUDLEY C. PALMER (Name of circulator) certify:
I reside at 5111 N BAY RIDGE, WHITEFISH BAY, WI
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/2/10 (Date)
Dudley C. Palmer (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT C 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative			District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	2409 S 76th St West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
2. <i>[Signature]</i>	1810 S. SARA ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
3. <i>[Signature]</i>	2480 Lefay Ct. Brookfield	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	7-2-10
4. <i>[Signature]</i>	N60 W39601 Mary Oconomowoc WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Oconomowoc	7/2/10
5. <i>[Signature]</i>	N60 W39601 MARY LA Oconomowoc, WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Oconomowoc	7/2/10
6. <i>[Signature]</i>	1400 S. 57th St West Allis, WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
7. <i>[Signature]</i>	1821 S. 70th West Allis WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
8. <i>[Signature]</i>	2628 N. 83rd St Wauwatosa, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/2/10
9. <i>[Signature]</i>	7516 W. Jackson Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Allis	7/2/10
10. <i>[Signature]</i>	1970 S. 79th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10

I, FRANK S. KRUTEDER (Name of circulator), certify:
I reside at 710 Oak Ridge Ct, Waukesha WI 53188
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content of the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/5/10 (Date) Frank S. Kruteder (Signature of circulator)

EXHIBIT C



1812 S 59th St

West Allis, WI 53214-5129

This district determination is based on the most recent geographic data available for this address.

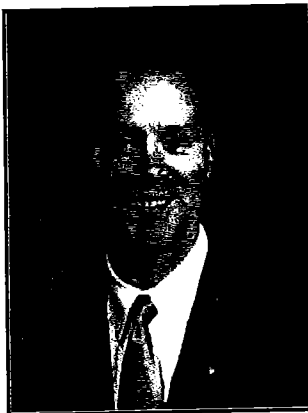
This address was matched to a Street Address, the center of which is located in the following legislative districts:

81 #2

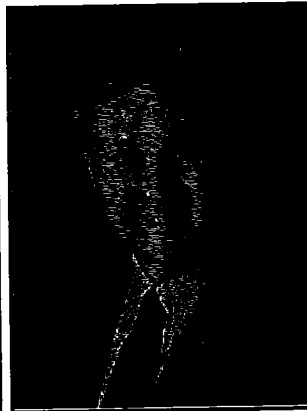
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4

Senator Russ Feingold

EXHIBIT C

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT C



1400 S 57th St

West Allis, WI 53214-5101

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

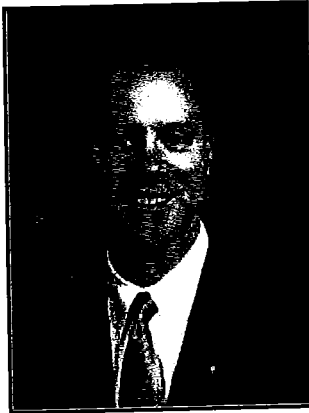
81

6

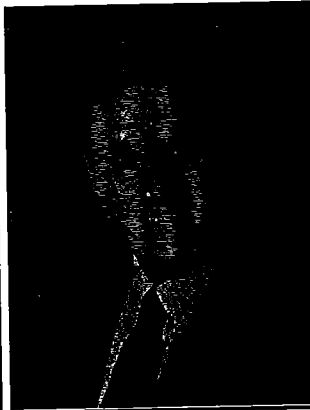
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

EXHIBIT C

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT C



1821 S 70th St

West Allis, WI 53214-4825

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

81

#7

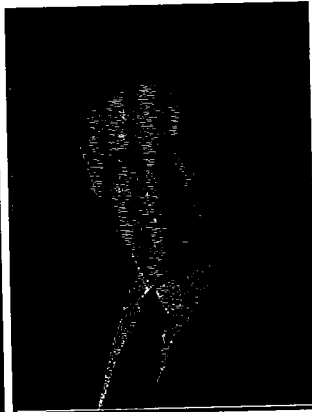
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

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US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

EXHIBIT C

US Representative
Gwen Moore

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.			Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic	
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)			Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1.	993 W. North Ave #243	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	6/19/10
2.	2616 N. 47th Wauwatosa	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	6/19/10
3.	1114 W 15518 Sylvan Cir Apt 17 Germantown WI 53022	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Germantown	6/9/10
4.	7234 W Aramingo Ave Wauwatosa WI 53209	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Germantown	6/19/10
5.	619 Cheyenne Wauwatosa WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	6/16/2010
6.	W303 N2541 Mark Ave Pewaukee WI 53072	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Delafield	6/19/10
7.	2832 Emble Dr Wauwatosa WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	6/19/10
8.	N45 W 23789 County	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cokeville	6/8/10
9.	8223 N. 44th St. Browns Door, WI 53223	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Browns Door	6/19/10
10.	8815 N. Center St Milwaukee WI 53222	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	6/19/10

I, Daniel Kyle (Name of circulator), certify:
I reside at 9993 W. North Ave #243 Wauwatosa, WI (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6/19/10 (Date) (Signature of circulator)

EXHIBIT D



8815 N Center St
Milwaukee WI

This address could not be found as a
standard postal address.

Click the back button on your browser
to try again, or Click here for advice on
entering an address

Wisconsin State Legislature

Wisconsin State Senate	Wisconsin State Assembly
Unknown	Unknown

Please include your mailing address in
your email to your legislator.

US Congress

US House of Representatives	US Senate
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US Congressional District Unknown	Senator Russ Feingold and Senator Herb Kohl
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NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative			District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	2169 S 46 ST WEST ALLIS	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WEST ALLIS	7-10-10
2. <i>[Signature]</i>	1238 NS967 ESSEX Ctr. SUSSEX	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SUSSEX	7-10
3. <i>[Signature]</i>	1238 NS910 7588 Wick SUSSEX, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SUSSEX	7-10
4. <i>[Signature]</i>	1307 Oak Ct Port Washington, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Port Washington	7/10/10
5. <i>[Signature]</i>	2354 S. 100th St West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7/10/10
6. <i>[Signature]</i>	9405 W. Rogers St. West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/10/10
7. <i>[Signature]</i>	W164 N4501 Townsquare Dr. Menomonie Falls WI 54752	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonie Falls	7/10/10
8. <i>[Signature]</i>	1302 MARTHA WASH DR WAUWATOSA, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUWATOSA	07/11/10
9. <i>[Signature]</i>	431 E JEFFERSON ST. Oconomowoc, WI 53064	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oconomowoc	7/11/10
10. <i>[Signature]</i>	5064 N. Idlewild Ave Whitefish Bay, WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Whitefish Bay	7/11/10

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle (Name of circulator), certify:

I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7-11-10

[Signature]
(Signature of circulator)

(Date)

EXHIBIT E



2169 S 16th St

Milwaukee, WI 53215-2617

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

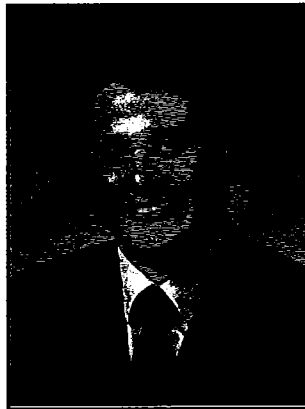
16

#1

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 3

Senator Tim

Carpenter

(608) 266-8535

Email Senator Tim

Carpenter

Assembly District 8

Representative Pedro

Colon

(608) 267-7669

Email Representative

Pedro Colon

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT F 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire nb.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	250 Prospect	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/2010
2. <i>[Signature]</i>	2635 W. King Crossin	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Grafton	7/10/2010
3. Elaine Gordon	9418 N. Green Bay	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brown Deer	7/10/2010
4. <i>[Signature]</i>	1150 E. Standish Pl	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Bayside	2/10/2010
5. <i>[Signature]</i>	4540 N. Sheffield Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood WI	10 July 2010
6. <i>[Signature]</i>	1870 E. Kane Pl. Unit 5 MILWAUKEE, WI 53202	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/10/2010
7. <i>[Signature]</i>	10331 N. Sanders Ct. MILWAUKEE, WI 53092	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Mequon	7/10/10
8. <i>[Signature]</i>	3620 N. WARRIS BLVD SHOREWOOD, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
9. <i>[Signature]</i>	5036 N. Edgewood Whitefish Bay 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/10/10
10. <i>[Signature]</i>	8114 Chestnut St Wauwatosa 53213	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/10/10

CERTIFICATION OF CIRCULATOR

I, Kelly L. Herda (Name of circulator), certify:
 I reside at 8905 N. Froquais Rd. Bayside, WI 53217 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats. 7/10/10

Kelly L. Herda
(Signature of circulator)

EXHIBIT F



1830 E Kane Pl
Milwaukee, WI 53202-1381

This district determination is based on the most recent geographic data available for this address.

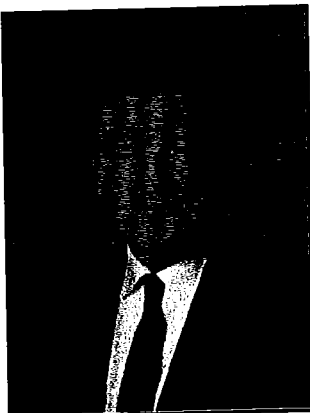
This address was matched to a Street Address, the center of which is located in the following legislative districts:

123
6

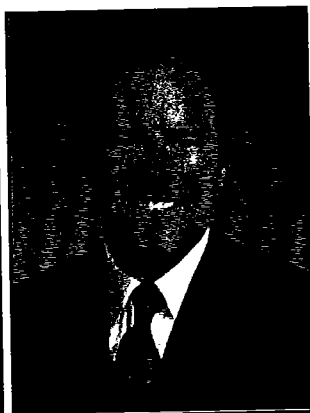
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey Plale



Assembly District 19
Representative Jon Richards
(608) 266-0650
Email Representative Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT 6 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Aleguilla Contreras</i>	<i>870 E. Main St Waukesha WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
2. <i>Bauer</i>	<i>7741 H7 St.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
3. <i>De Rocher</i>	<i>305 McCull St.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
4. <i>Theresa Meyer</i>	<i>504 N. West Waukesha WI 53188</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
5. <i>Cedric Adams</i>	<i>1752 N. 27th Milwaukee</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Milwaukee</i>	<i>6/25/10</i>
6. <i>Kathleen Budge</i>	<i>1336 New Scotland Blvd Mequon 53097</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Mequon</i>	<i>6/25/10</i>
7. <i>Ellen Barnes</i>	<i>180 W. Damwood Fox Point 53217</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Fox Point</i>	<i>6/26/10</i>
8. <i>Rock Murrison</i>	<i>5701 W Lincoln West Allis Wisc</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7/2/10</i>
9. <i>Susan M. Hoyer</i>	<i>2729 S. 102nd St west allis wi.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>west allis</i>	<i>7/2/10</i>
10. <i>Wm. Hoyer</i>	<i>2729 S. 102nd St west allis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>west allis</i>	<i>7/2/10</i>

CERTIFICATION OF CIRCULATOR

I, Sara Graves, certify: (Name of circulator)

I reside at N61 W15263 Wigwam Dr. Menomonee Falls WI 53057
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/2/2010 Sara Graves
(Signature of circulator)

GAB-168 (Rev. 09/2009) The information on this form is required by §§. 8.15, 8.20, 8.50, Wis. Stats.
This form is prescribed by:
Government Accountability Board
212 East Washington Avenue, 3rd Floor
P.O. Box 7984
Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@wi.gov

EXHIBIT G



1752 W 27th St
Milwaukee WI

This address could not be found as a standard postal address.

Click the back button on your browser to try again, or Click here for advice on entering an address

42
#5

Wisconsin State Legislature

Wisconsin State Senate	Wisconsin State Assembly
Unknown	Unknown

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
-----------------------------	-----------

US Congressional District	Senator Russ Feingold
Unknown	and Senator Herb Kohl

EXHIBIT 4

WISCONSIN STATE LEGISLATURE

5701 W Lincoln Ave

West Allis, WI 53219-2246

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

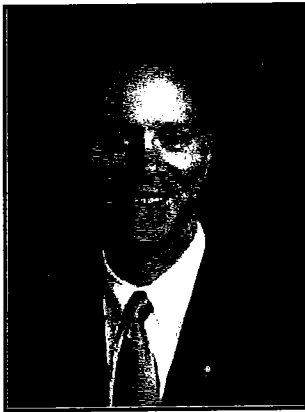
472

#8

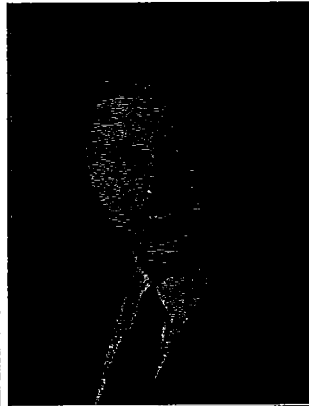
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

1

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT # 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>David Field</i>	2152 S. 91st	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MBST. AUES	7/6/10
2. <i>Sharon Cooley</i>	1022 N 60th St #2 Wauwatosa, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/6/2010
3. <i>David Haller</i>	316 S 78 St Milwaukee WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/6/10
4. <i>Sauran Teerakul</i>	W65 N 738 St, John A Cedarburg, WI 53012	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Cedarburg	7/6/10
5. <i>Emily Jankowski</i>	5220 N. Mohawk Ave Glendale, WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Glendale	7/6/10
6. <i>Field</i>	493 N. Murray Ave Milwaukee, WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/6/10
7. <i>Mikenna A Drogan</i>	1509 E Kane Pl Milwaukee, WI 53020	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/11/10
8. <i>John Smith</i>	401 E Fairmont Ave Whitefish Bay, WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Whitefish Bay Milwaukee	7/11/10
9. <i>DS</i>	216 Jersey Cir Waukesha WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	7/11/10
10. <i>DS</i>	1212A E CHAMBERLAIN ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MILWAUKEE	7/11/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves, certify:

I reside at N61 W15263 Wiggam Dr. Menomonie Falls WI 53051
(Circulator's residence. Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a) Wis. Stats.

7/11/10

Sara Graves

(Signature of circulator)

(Date)



316 S 78th St
 Milwaukee, WI 53214-1411

This district determination is based on the most recent geographic data available for this address.

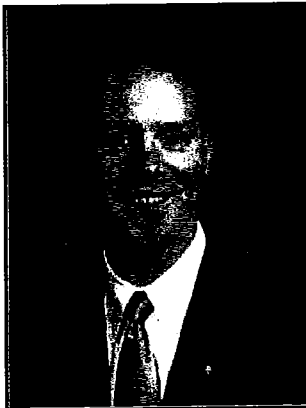
This address was matched to a Street Address, the center of which is located in the following legislative districts:

45
 #3

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 13
 Representative David Cullen
 (608) 267-9836
 Email Representative David Cullen

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT H



WISCONSIN STATE LEGISLATURE

2443 N Murray Ave
Milwaukee, WI 53211-4460

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

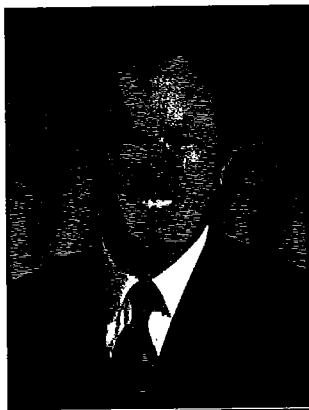
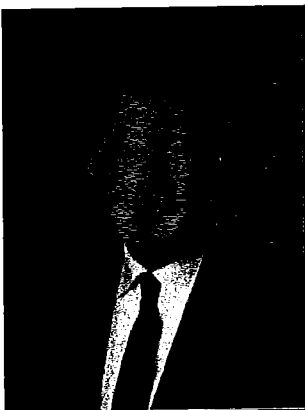
45

#6

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey
Plale

Assembly District 19
Representative Jon
Richards
(608) 266-0650
Email Representative
Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT H



1509 E Kane Pl
 Milwaukee, WI 53202-1759

This district determination is based on the most recent geographic data available for this address.

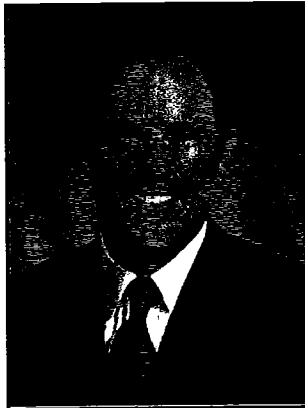
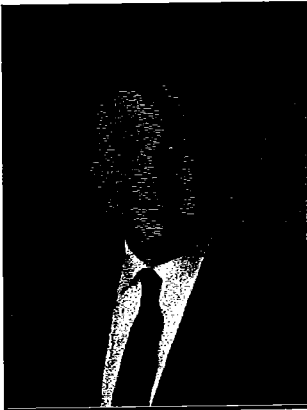
This address was matched to a Street Address, the center of which is located in the following legislative districts:

45
 #7

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 7
 Senator Jeffrey Plale
 (608) 266-7505
 Email Senator Jeffrey Plale

Assembly District 19
 Representative Jon Richards
 (608) 266-0650
 Email Representative Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT H



1212 E Chambers St
 Milwaukee, WI 53212-2219

This district determination is based on the most recent geographic data available for this address.

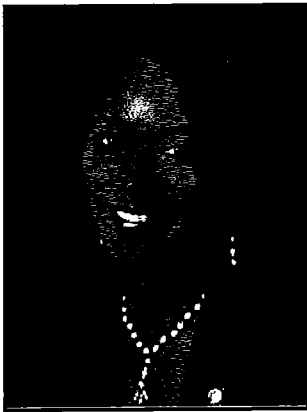
This address was matched to a Street Address, the center of which is located in the following legislative districts:

45
 #10

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 4
 Senator Lena Taylor
 (608) 266-5810
 Email Senator Lena Taylor



Assembly District 10
 Representative Annette Polly-Williams
 (608) 266-0960
 Email Representative Annette Polly Williams

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT I 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Jan Ford</i>	<i>3710 N. Oakland</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/4/10</i>
2. <i>BETH WARNER</i>	<i>3110 N. Oakland</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/4/10</i>
3. <i>KIRT KNUTSEN</i>	<i>4654 N PARADISE DR</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Wauwatosa FOSA</i>	<i>7/5/10</i>
4. <i>Heidi Miller</i>	<i>3364 N. 96th St Milw</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Milwaukee Milw</i>	<i>7/5/10</i>
5. <i>Pat Sikorski</i>	<i>2808 S. 75th St West Allis</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>West Allis</i>	<i>7/5/10</i>
6. <i>Elizabeth Walter</i>	<i>740 E Lexington Blvd Whitefish Bay WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Whitefish Bay</i>	<i>7/5/10</i>
7. <i>Rachel Huber</i>	<i>W159 N6436 Tamarack Tr Menomonee Falls, WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/8/10</i>
8. <i>Louann Huffman</i>	<i>W180 N4928 Marcy Menom. Fls WI 53051</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/8/10</i>
9. <i>Barbara SWEEDY</i>	<i>W289 S4973 Rockwood Waukesha</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>7/8/10</i>
10. <i>Karen Koglin</i>	<i>W174 N8642 schneider Men Falls 53051</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/8/10</i>

I, Sara Graves (Name of circulator), certify:
 I reside at N614W15263 Wigwam Dr, Menomonee Falls WI 53051
 (Circulator's residence - include number, street, and municipality.)
 I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats. 7/8/10
Sara Graves (Signature of circulator)

49

EXHIBIT I



3364 N 96th St

Milwaukee, WI 53222-3406

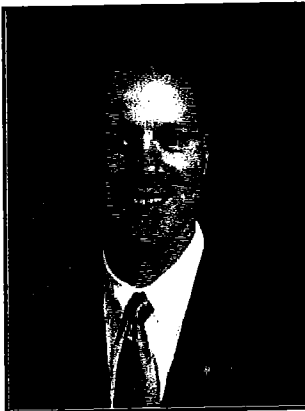
This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 13
Representative David
Cullen
(608) 267-9836
Email Representative
David Cullen

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1.	2223 W. 66 th St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/11/10
2.	1486 W18063 Main St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Menomonee Falls	7/11/10
3. Tom Doneski	W140 N8450 Lilly Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/11/10
4.	W140 N8450 Lilly Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Men. Falls	7/11/10
5.	7475 S. Highfield Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	7/11/10
6.	M11W27310 Lakofield Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Pewaukee	7/11/10
7. Jay A. Schul	3724 S. 104 th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Greenfield	7/11/10
8. Bandra Gankowski	560 Kame Ct Colgate	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Richfield	7/11/10
9.	N46 S3512 Woods Edge Ct Pewaukee WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Pewaukee	7/11/10
10. Karie Praga	N46 W2377 Woods Edge Ct Pewaukee WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Pewaukee	7/11/10

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle, certify:
 (Name of circulator)
 I reside at 9993 W. North Ave #243 Wauwatosa, WI
 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/11/10
 (Date)

(Signature of circulator)

EXHIBIT J



7475 S Highfield Ct

Oak Creek, WI 53154-2415

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

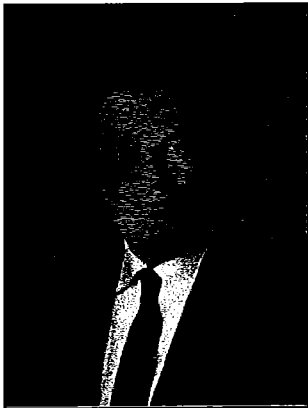
19

#5

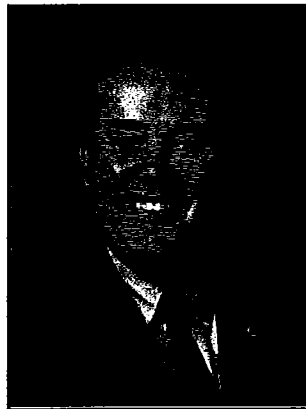
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey Plale



Assembly District 21
Representative Mark Honadel
(608) 266-0610
Email Representative Mark Honadel

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 1

Senator Russ Feingold

US Representative
Paul Ryan

and
Senator Herb Kohl

EXHIBIT J



3724 S 104th St

Greenfield, WI 53228-1304

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

19
#7

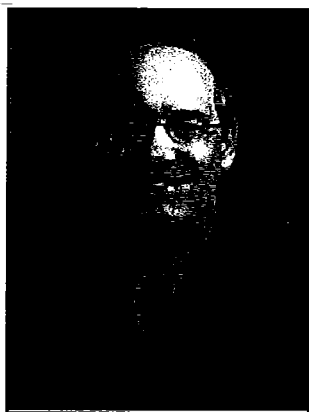
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 28
Senator Mary Lazich
(608) 266-5400
Email Senator Mary
Lazich



Assembly District 82
Representative Jeff
Stone
(608) 266-8590
Email Representative
Jeff Stone

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 1

Senator Russ Feingold

US Representative and
Paul Ryan Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE **EXHIBIT K** 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Omer Audi</i>	14975 W. Glencoe Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin WI	7-2-10
2. <i>Sam Audi</i>	2100 W. 167th Avenue	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Germantown	7-2-10
3. <i>[Signature]</i>	2234 S. 79 St West Allis, WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
4. <i>Monica Sley</i>	2145 S. 103rd West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
5. <i>Ray & Bruce</i>	17125 C. W. Bushnow Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	7/2/10
6. <i>[Signature]</i>	11112 S 56th West Allis 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
7. <i>Maureen Rogan</i>	1935 S 72nd West Allis WI 53228	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
8. <i>Monica Rogers</i>	1935 S 72nd West Allis WI 53218	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
9. <i>Anna Brown</i>	1935 S 72nd West Allis WI 53228	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
10. <i>Sam Perkins</i>	1935 S 72nd West Allis WI 53228	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10

I, Daniel Kyle (Name of circulator), certify:
I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/2/10 (Date) *[Signature]* (Signature of circulator)

EXHIBIT K



2145 S 63rd St
 West Allis, WI 53219-1428

This district determination is based on the most recent geographic data available for this address.

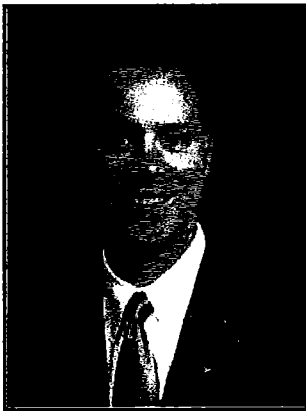
This address was matched to a Street Address, the center of which is located in the following legislative districts:

36
 #4

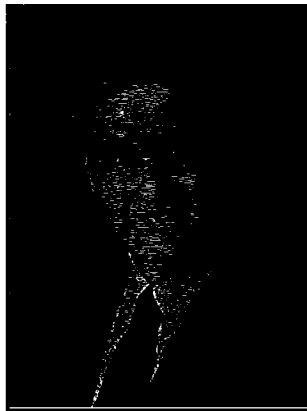
Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative
Gwen Moore

and

Senator Herb Kohl

EXHIBIT K



1012 S 56th St

West Allis, WI 53214-3329

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

36

#6

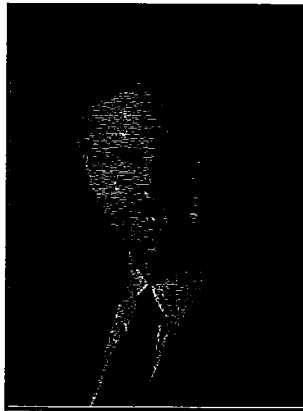
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

\

EXHIBIT K



1935 S 72nd St

West Allis, WI 53219-1206

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

36

#7

Wisconsin State Legislature

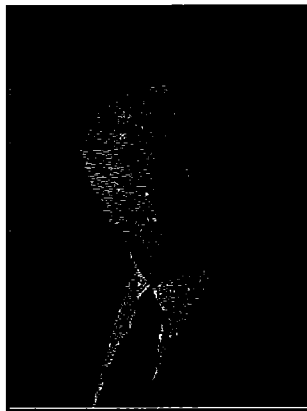
Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512

Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620

Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT K



1935 S 72nd St

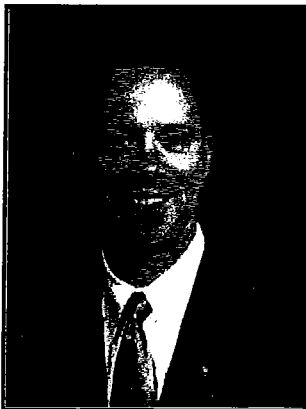
West Allis, WI 53219-1206

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

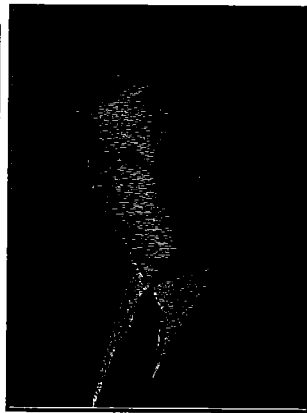
Wisconsin State Legislature

Wisconsin State Senate



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim Sullivan

Wisconsin State Assembly



Assembly District 15
Representative Anthony Staskunas
(608) 266-0620
Email Representative Anthony Staskunas

36

#8

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT K



1935 S 72nd St
 West Allis, WI 53219-1206

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

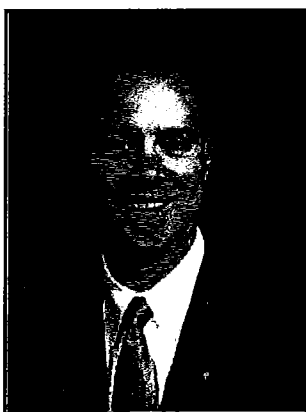
36

#9

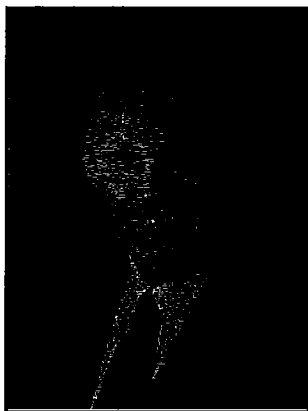
Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT K



1935 S 72nd St

West Allis, WI 53219-1206

This district determination is based on the most recent geographic data available for this address.

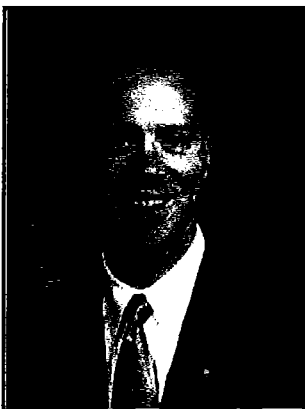
This address was matched to a Street Address, the center of which is located in the following legislative districts:

36
#10

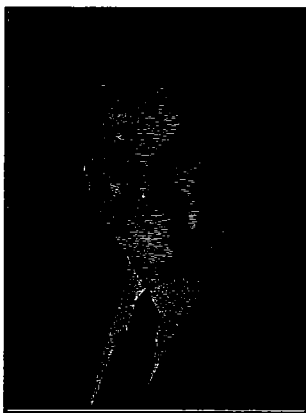
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT L 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative			District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Monica Papp</i>	<i>1008 Bristol Waukesha</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
2. <i>Sean Long Jr</i>	<i>50322 S 9703 WHITE MOUNTAIN RD</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Mukwonago</i>	<i>6/25/10</i>
3. <i>Edward Hoff</i>	<i>1010 Lakeside Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
4. <i>Nieves Perez</i>	<i>1916 West Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
5. <i>James STEPHAN</i>	<i>1226 THE STRAW Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25-10</i>
6. <i>Courtney Furer</i>	<i>30 S Zellen Dr Waukesha, WI 53188</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
7. <i>ISAAC Jimenez</i>	<i>1800 Shipler Ct #109 Waukesha, WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
8. <i>Loretta Hollis</i>	<i>1521 Big Bend Rd Waukesha WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
9. <i>Anita Andrason</i>	<i>1521 Big Bend Rd Waukesha WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
10. <i>Anita Curtin</i>	<i>514 W. College Waukesha</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25-10</i>

I, Daniel Kyle (Name of circulator) certify:

I reside at 9993 W. North Ave #243 Wauwatosa, WI (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6-25-10

Daniel Kyle
(Signature of circulator)

(Date)
GAB-168 (Rev. 09/2009) The information on this form is required by §§ 8.15, 8.20, 8.50, Wis. Stats. This form is prescribed by: Government Accountability Board, 212 East Washington Avenue, 3rd Floor, P.O. Box 7984, Madison, WI 53707-7984 608 266-8005 <http://gab.wi.gov> Email: gab@wi.gov

EXHIBIT L



80322 S 7703

Mukwonago WI

This address could not be found as a standard postal address.

Click the back button on your browser to try again, or Click here for advice on entering an address

37

#2

Wisconsin State Legislature

Wisconsin State Senate	Wisconsin State Assembly
Unknown	Unknown

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
-----------------------------	-----------

US Congressional District Unknown	Senator Russ Feingold and Senator Herb Kohl
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NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT M 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	N 79 W 15501 DEER FLD FRL.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7-8-10
2. <i>[Signature]</i>	175 E Fairmont Ave. Whitefish Bay	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7-8-10
3. <i>[Signature]</i>	8009 E Capitol drive	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-8-10
4. <i>[Signature]</i>	1805 E. PARK R MENAUCHE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MENAUCHE	7-8-10
5. <i>[Signature]</i>	3929 N. Murray Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SHOREWOOD	7-8-10
6. <i>[Signature]</i>	4601 N Prospect Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SHOREWOOD	7/8/10
7. <i>[Signature]</i>	2935 N. HARGREAVES R	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SHOREWOOD	7/8/10
8. <i>[Signature]</i>	9040 N. Redesign Dr. Bayshore WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Kaukaude	7/8/10
9. <i>[Signature]</i>	4471 N Woodburn Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-8-10
10. <i>[Signature]</i>	4162 N. Lake Grimes Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7.8.10

I, Sara Graves (Name of circulator) certify:
I reside at N61W15263 Wignam Dr. Menomonee Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/8/10 Sara Graves
(Date) (Signature of circulator)

EXHIBIT M



1805 E Park Pl

Milwaukee, WI 53211-3542

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

60

#4

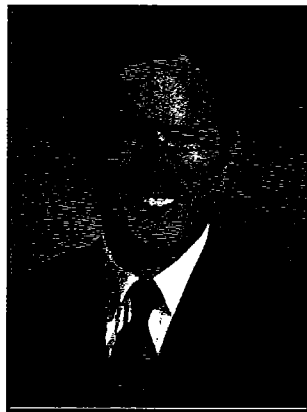
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey Plale



Assembly District 19
Representative Jon Richards
(608) 266-0650
Email Representative Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4

Senator Russ Feingold

US Representative
Gwen Moore

and

Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE *EXHIBIT N* 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Miguel Reyna</i>	<i>1412 W. Greenfield.</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Milwaukee</i>	<i>6-25-10</i>
2. <i>Rob McBurney</i>	<i>211 Morris St. Pewaukee WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Pewaukee</i>	<i>6-25-10</i>
3. <i>Blair Uff</i>	<i>W310 S1455 Florence Ct</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Mukwonago</i>	<i>6/25/10</i>
4. <i>Karl Cumbled</i>	<i>S15N2635 GTON PL</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
5. <i>Marie Jank</i>	<i>1097 Lake Shore Rd</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Grafton</i>	<i>6/25/10</i>
6. <i>Joseph Moore Jr.</i>	<i>1749 S. 70th Upper</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-10</i>
7. <i>Arthur Hoeg</i>	<i>10412 W Rogers St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-10</i>
8. <i>Paul C. Winkowski</i>	<i>2333 S. 65th</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-10</i>
9. <i>Shawn Schmitt</i>	<i>8235 S. 92 West Allis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-10</i>
10. <i>Meagan Bayer</i>	<i>4588 S. 78th St West Allis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2/10</i>

CERTIFICATION OF CIRCULATOR

I, *Sara Graves* (Name of circulator) certify:

I reside at *1661 W 5263 Wigwam Dr. Menomonee Falls WI 53057*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/2/2010

Sara Graves

(Date)

(Signature of circulator)

EXHIBIT N



1412 W Greenfield Ave
 Milwaukee, WI 53204-2764

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

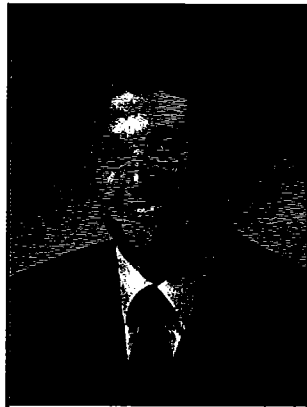
61

#1

Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 3
 Senator Tim Carpenter
 (608) 266-8535
 Email Senator Tim Carpenter

Assembly District 8
 Representative Pedro Colon
 (608) 267-7669
 Email Representative Pedro Colon

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT N



W310 57455 Florena Ct
 Mukwonago WI

This address could not be found as a standard postal address.
 Click the back button on your browser to try again, or Click here for advice on entering an address

61

#3

Wisconsin State Legislature

Wisconsin State Senate Unknown	Wisconsin State Assembly Unknown
--------------------------------------	--

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
--------------------------------	-----------

US Congressional District Unknown	Senator Russ Feingold and Senator Herb Kohl
---	--

EXHIBIT N



1749 S 70th St

West Allis, WI 53214-4850

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

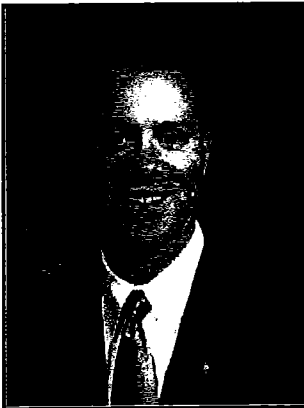
61

#6

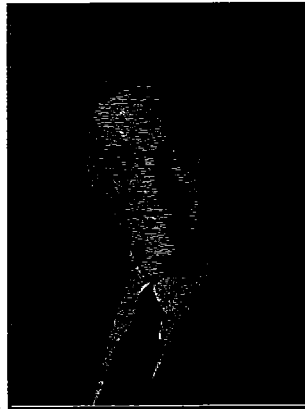
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl



2333 S 65th St

West Allis, WI 53219-2019

This district determination is based on the most recent geographic data available for this address.

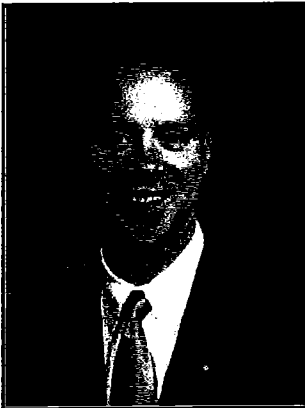
This address was matched to a Street Address, the center of which is located in the following legislative districts:

61
#8

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan

Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT 0 10

Candidate's name, no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Cynthia Thomas</i>	1444 So 70th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
2. <i>Patti Herzig</i>	10412 W Rogers St West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
3. <i>Stephanie Winkowich</i>	2333 S 65th St West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
4. <i>Amy Bauer</i>	3340 N 105th Wauwatosa WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7-2-10
5. <i>Terryl Young</i>	1613 S. 65th St West Allis, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
6. <i>Shirley Uehy</i>	2527 S. 89th St West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
7. <i>Burt</i>	6089 W Mitchell	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
8. <i>Morgan Lopez</i>	159 S. 120th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
9. <i>Ann Kish</i>	133 W Lapham West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
10. <i>[Signature]</i>	2138 S 5th Pl Milwaukee WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/2/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator), certify:
I reside at 161 W 5263 Wigwam Dr. Menomonee Falls WI 53057 (Circulator's residence - include number, street, and municipality).

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/2/2010

Sara Graves

(Date)

(Signature of circulator)

EXHIBIT 0



1444 S 70th St
 West Allis, WI 53214-4852

This district determination is based on the most recent geographic data available for this address.

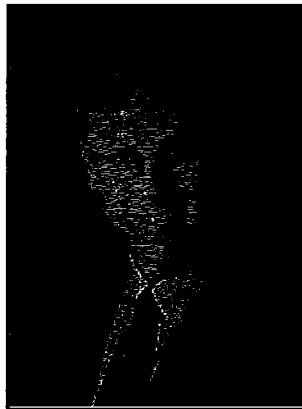
This address was matched to a Street Address, the center of which is located in the following legislative districts:

02 #1

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan

Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT O



2333 S 65th St
 West Allis, WI 53219-2019

C2 #3

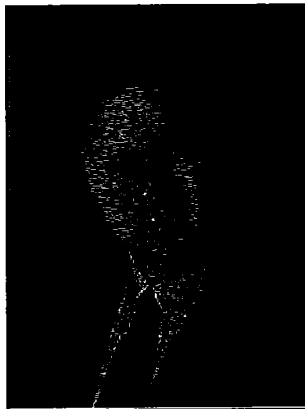
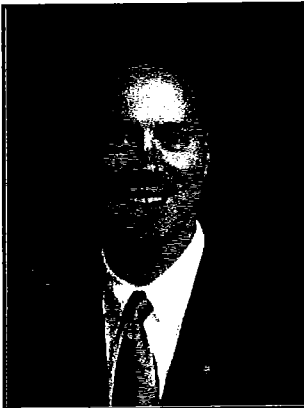
This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan

Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT 0



1613 S 65th St

West Allis, WI 53214-4911

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

62
#5

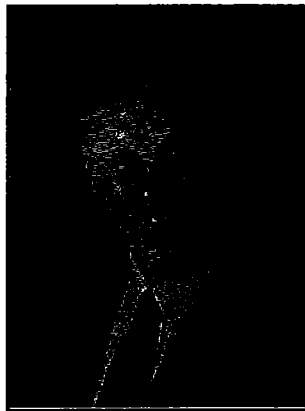
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT O



WISCONSIN STATE LEGISLATURE

6039 W Mitchell St

West Allis, WI 53214-5024

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

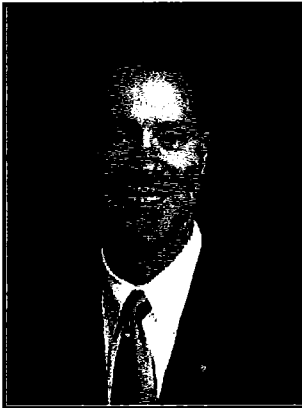
62

#7

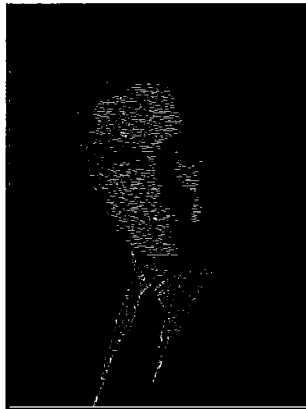
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT 2



1313 W Lapham Blvd
 Milwaukee, WI 53204

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

67
 #9

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 3
 Senator Tim
 Carpenter
 (608) 266-8535
 Email Senator Tim
 Carpenter

Assembly District 8
 Representative Pedro
 Colon
 (608) 267-7669
 Email Representative
 Pedro Colon

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT 0



2138 S 5th Pl

Milwaukee, WI 53207-1120

This district determination is based on the most recent geographic data available for this address.

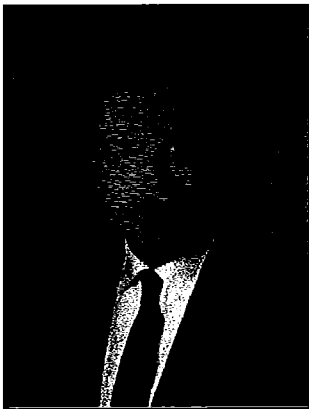
This address was matched to a Street Address, the center of which is located in the following legislative districts:

02
#10

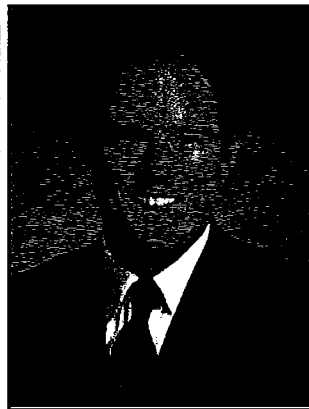
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey Plale



Assembly District 19
Representative Jon Richards
(608) 266-0650
Email Representative Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT P 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Walter G. [Signature]</i>	1279 W Suset	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	7/2/10
2. <i>Sharon [Signature]</i>	100401 [Signature] St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/2010
3. <i>ANDREINA [Signature]</i>	7915 W. HICKS W. ANIS	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	2/2/10
4. <i>Shelby Werner</i>	1417 S. 87 West Allis WI 53218	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
5. <i>Delaney [Signature]</i>	10810 S. 105 West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
6. <i>Patricia Wolf</i>	9428 W. Manitoba West Allis 53207	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
7. <i>[Signature]</i>	6039 W Mitchell St West Allis, WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
8. <i>[Signature]</i>	6102 W. Park Hill Ave Milwaukee, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7-2-10
9. <i>[Signature]</i>	2625 S 87 St West Allis WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-7-10
10. <i>Jaime Bremer</i>	1341 S. 62nd St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator) _____, certify:

I reside at 1601 W15263 Wigwam Dr. Menomonee Falls WI 53051
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/2/2010

Sara Graves

(Date)

(Signature of circulator)

EXHIBIT P



100401 graat st
West Allis WI

This address could not be found as a standard postal address. Click the back button on your browser to try again, or Click here for advice on entering an address

G3
#2

Wisconsin State Legislature

Wisconsin State Senate	Wisconsin State Assembly
Unknown	Unknown

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
-----------------------------	-----------

US Congressional District	Senator Russ Feingold and Senator Herb Kohl
Unknown	

EXHIBIT P



6039 W Mitchell St

West Allis, WI 53214-5024

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

03

#7

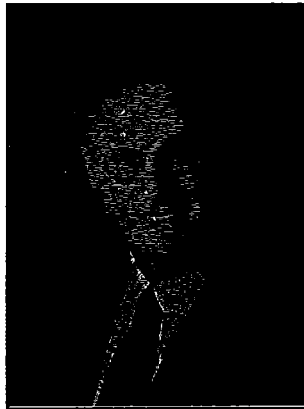
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT P



63 # 8

6102 W Park Hill Ave
Milwaukee, WI 53213-4122

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

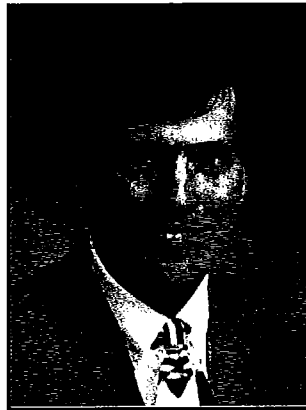
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 13
Representative David
Cullen
(608) 267-9836
Email Representative
David Cullen

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT P



1341 S 62nd St

West Allis, WI 53214-3221

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

03 #10

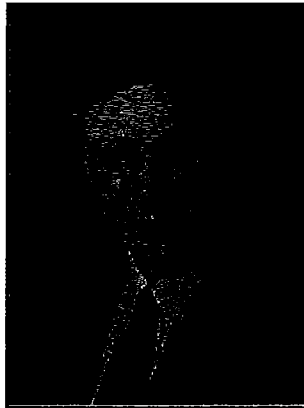
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT Q / 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Kristin Peterson</i>	<i>3929 N Harcourt Pl</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/11/10</i>
2. <i>Don Wein</i>	<i>W52 W14300 THORNHILL DR</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>MEMMONOEE FALLS</i>	<i>7/11/10</i>
3. <i>Gervis m/le</i>	<i>W134 N6614 Lilycreek</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Memmonoee Falls</i>	<i>7/11/10</i>
4. <i>Arnon Cross</i>	<i>5102 RD ST 2123 west Allis WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>west allis</i>	<i>7/11/10</i>
5. <i>Earl Murphy Jr</i>	<i>6868 N Green Bay Rd</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Glendale</i>	<i>7/11/10</i>
6. <i>Cassandra Murphy</i>	<i>6868 N Green Bay Rd</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Glendale</i>	<i>7/11/10</i>
7. <i>Rufus J.</i>	<i>N61 W14786 Wigan Dr.</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Memmonoee Falls M.F.</i>	<i>7/13/10</i>
8. <i>Stacey Leininger</i>	<i>W147 N8649 McKinley Dr.</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Memmonoee Falls</i>	<i>7/13/10</i>
9. <i>Cate Bellan</i>	<i>9031 E N 95th</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Milwaukee</i>	<i>7/13/10</i>
10. <i>John Peter</i>	<i>4333 N. OAKLAND</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/13/10</i>

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator) certify:
I reside at N61 W15263 Wigan Dr. Menomonee Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/13/10
(Date)

Sara Graves
(Signature of circulator)



903 N 95th
Milwaukee WI

This address could not be found as a standard postal address. Click the back button on your browser to try again, or Click here for advice on entering an address

Wisconsin State Legislature

Wisconsin State Senate	Wisconsin State Assembly
Unknown	Unknown

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
-----------------------------	-----------

US Congressional District	Senator Russ Feingold and Senator Herb Kohl
Unknown	

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT R 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	447 Merton ave. #3	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Hartland	7/10/10
2. <i>[Signature]</i>	4406 Herbertus Rd Herbertus WI 53033	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Richfield	7/10/10
3. <i>[Signature]</i>	W318 S318 W3129 Sawyer Rd WI 53189	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Genesee	7/10/10
4. <i>[Signature]</i>	W319 N7135 NORTHWOOD W	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City HARTLAND	7/10/10
5. <i>[Signature]</i>	2826 Willard Ln WAUKESHA WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Waukesha	7/10/10
6. <i>[Signature]</i>	W156 N5350 BETTE DR MONOMONEE FALLS, WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Falls	7/10/10
7. <i>[Signature]</i>	8702 W BOONE AVE WEST ALLIS WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS W. ALLIS	7/11/10
8. <i>[Signature]</i>	1509 E Kane Pl Apt 18	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MILWAUKEE	7/11/10
9. <i>[Signature]</i>	1234 N. 21st MILWAUKEE WI 53215	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MILWAUKEE Lake	7/11/10
10. <i>[Signature]</i>	4730 N 106 WAUWATOSA WI 53225	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUWATOSA	7/11/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves, certify:
 I reside at 161 W 5263 Wiggam Dr. Monomonee Falls WI 53051
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/11/10
(Date)

Sara Graves
(Signature of circulator)

EXHIBIT R



1509 E Kane Pl
Milwaukee, WI 53202-1759

This district determination is based on the most recent geographic data available for this address.

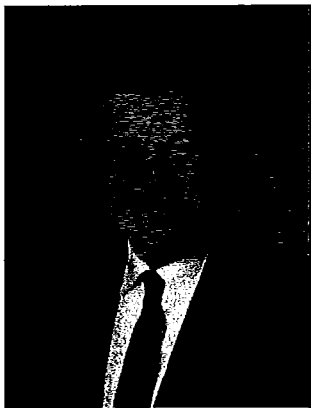
This address was matched to a Street Address, the center of which is located in the following legislative districts:

65
#8

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey Plale



Assembly District 19
Representative Jon Richards
(608) 266-0650
Email Representative Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT R



1234 N 21st St
 Milwaukee, WI 53205-2403

This district determination is based on the most recent geographic data available for this address.

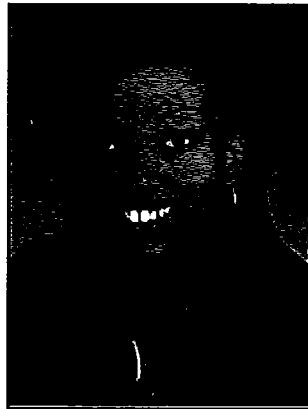
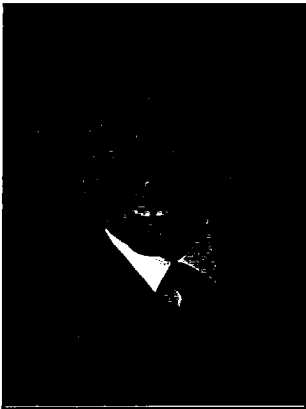
This address was matched to a Street Address, the center of which is located in the following legislative districts:

65
#9

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 6
 Senator Spencer
 Coggs
 (608) 266-2500
 Email Senator
 Spencer Coggs

Assembly District 18
 Representative
 Tamara Grigsby
 (608) 266-0645
 Email Representative
 Tamara Grigsby

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT S 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road. 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Jennifer Johnson	3939 N. Murray Ave. Shorewood, WI 53211	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
2. Susan Braun	4108 N Stowell Ave Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
3. Jim Johnson	4414 WILLOWOOD AVE. SHOREWOOD, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
4. Phil Schmitt	512 ROYAL PACE MILWAUKEE, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MILWAUKEE	7/8/10
5. Joan Kopper	1221 E. Courtland Pl. WFB WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/8/10
6. Kathy Kouzmanoff	2503 E Olive St Shorewood WI 53211	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood WI	7/8/10
7. Terrence Cooley	4462 N Frederick Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
8. Cheryl	3819 N. Oakland Ave SHOREWOOD, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SHOREWOOD	7/8/10
9. Gary S. G. Paul	4443 N. FREDERICK SHOREWOOD WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input checked="" type="checkbox"/> City Shorewood	7/8/10
10. Terrence	1708E Lafayette Pl Milwaukee, WI 53202	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/8/10

I, Sara Graves (Name of circulator) certify:
I reside at 1161 W 5263 Wiswan Dr. Monomence Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/8/10 Sara Graves

666

EXHIBITS



1512 E Royall Pl

Milwaukee, WI 53202-1818

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

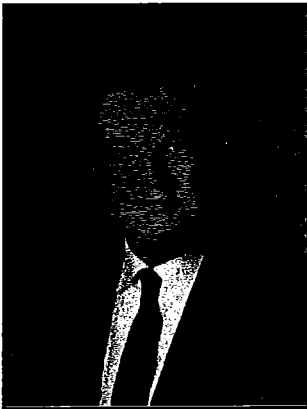
66

#4

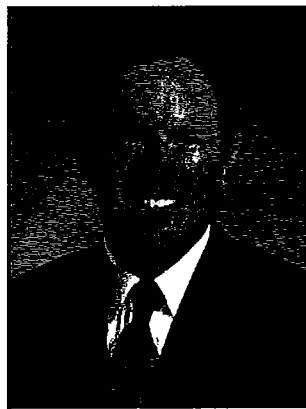
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey Plale



Assembly District 19
Representative Jon Richards
(608) 266-0650
Email Representative Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT 5



1708 E Lafayette Pl

Milwaukee, WI 53202-1176

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

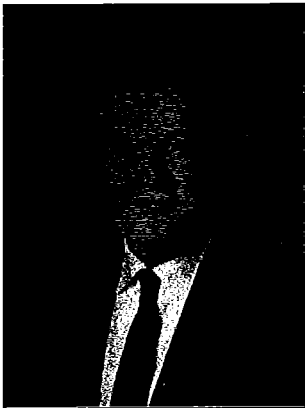
26

#10

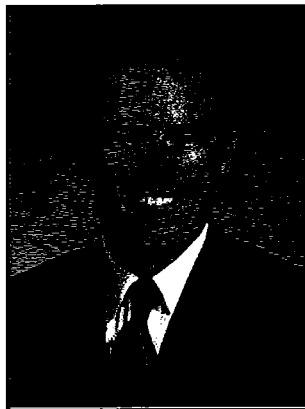
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey Plale



Assembly District 19
Representative Jon Richards
(608) 266-0650
Email Representative Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT T10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Dan Mille	3364 N. 96th St Milwaukee WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/5/10
2. DON SIKORSKI	2808 SO. 75th St West Allis WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/5/10
3. Robert Himm	4038 N Downer Ave NR Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	2/5/10
4. Bob Cook	1204 E KEN SMITH BLVD WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SHOREWOOD	7/6/10
5. Shannon Beyaker	1300 N. Prospect Ave #425 Milwaukee WI 53202	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/6/10
6. Emily Nasseini	4417 W. Marcellus Mequon WI 53072	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Mequon	7/6/10
7. Steve Fromm	W/92 N 84th Bryn Mawr Menomonee Falls, WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
8. Ann Korte	W142 N 1254 Menomonee Men. Falls, WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
9. Ann S	N53W15958 Creekwood Menomonee	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
10. Jane Zeffner	W180 N HAY Marey Rd.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10

CERTIFICATION OF CIRCULATOR

Sara Graves certify:
(Name of circulator)
I reside at N61 W15263 Wigwam Dr. Menomonee Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

Sara Graves
(Signature of circulator)

(Date)

EXHIBIT T



3364 N 96th St
 Milwaukee, WI 53222-3406

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

B7

#1

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim
 Sullivan



Assembly District 13
 Representative David
 Cullen
 (608) 267-9836
 Email Representative
 David Cullen

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

EXHIBIT T



1300 N Prospect Ave

Milwaukee, WI 53202-3022

This district determination is based on the most recent geographic data available for this address.

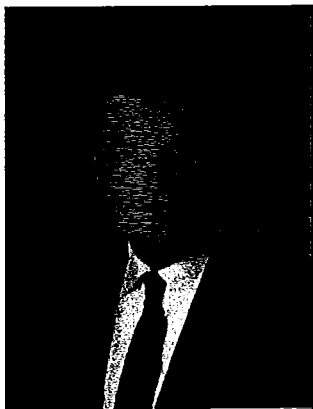
This address was matched to a Street Address, the center of which is located in the following legislative districts:

67 #5

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
Senator Jeffrey Plale
(608) 266-7505
Email Senator Jeffrey
Plale



Assembly District 19
Representative Jon
Richards
(608) 266-0650
Email Representative
Jon Richards

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT U 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Rail My</i>	921 Pleasant St. Waukesha WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10
2. <i>Martin Rodriguez</i>	700 Walton Av	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	5/31/86/10
3. <i>Steven Urbanski</i>	1417 Kostner	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton IL	06/25/10
4. <i>Arturo Alvarez</i>	1345 Waukesha Josephaint	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	06/25/10
5. <i>Joseph Vagan</i>	1190 W 149th Appleton Menomonie Falls, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonie Falls WI	6/25/10
6. <i>[Signature]</i>	60421 W. LeRoy Ave. Greenfield WI 53220	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Greenfield Milwaukee	6/25/10
7. <i>Raunro D. GBO</i>	2126 S 77 STREET WEST ALLIS	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis MILWAUKEE	6/25/10
8. <i>Alli Walsh</i>	4947 W. Jackson Park Milwaukee, WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	6/25/10
9. <i>Sheryl Gerstl</i>	1904 Harvest Ln. Waukesha WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10
10. <i>Carmen Gutierrez</i>	516 E. North St. Waukesha WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10

I, Sara Graves (Name of circulator) certify:
I reside at N61 W 5263 Wigan Dr. Menomonie Falls (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats. 6/25/10 Sara Graves

(Date) _____ (Signature of circulator)

EXHIBIT U



14417 Kostner
Middothian WI

This address could not be found as a
standard postal address.

Click the back button on your browser
to try again, or Click here for advice on
entering an address

68

#3

Wisconsin State Legislature

Wisconsin State Senate Unknown	Wisconsin State Assembly Unknown
--------------------------------------	--

Please include your mailing address in
your email to your legislator.

US Congress

US House of Representatives	US Senate
--------------------------------	-----------

US Congressional District Unknown	Senator Russ Feingold and Senator Herb Kohl
---	--

EXHIBIT U



6421 W Leroy Ave

Greenfield, WI 53220-3045

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

68

#6

Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 3
 Senator Tim Carpenter
 (608) 266-8535
 Email Senator Tim Carpenter

Assembly District 7
 Representative Peggy Krusick
 (608) 266-1733
 Email Representative Peggy Krusick

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 1

Senator Russ Feingold

US Representative
Paul Ryan

and
Senator Herb Kohl

EXHIBIT U



4947 W Jackson Park Dr
 Milwaukee, WI 53219-3246

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

68
 #8

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 3
 Senator Tim
 Carpenter
 (608) 266-8535
 Email Senator Tim
 Carpenter

Assembly District 9
 Representative Josh
 Zepnick
 (608) 266-1707
 Email Representative
 Josh Zepnick

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative			Name of jurisdiction or district in which candidate seeks office 5th Congressional District		
District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)					

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	5360 Hwy M West Bend	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Bend TRENTON	6/18/10
2. <i>[Signature]</i>	2445 Hwy CC Erin, WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City ERIN	6/18/10
3. <i>[Signature]</i>	5360 Hwy M West Bend	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Trenton West Bend	6/18/10
4. <i>[Signature]</i>	2445 Hwy CC Erin, WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City ERIN	6/18/10
5. <i>[Signature]</i>	5068 Wacker Dr West Bend WI 53095	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Bend	6/18/10
6. <i>[Signature]</i>	5805 Sunny Crest Dr Brookfield WI 53005	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield	6-18-10
7. <i>[Signature]</i>	3466 Lowers Ln Slinger WI 53086	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Slinger	6-18-10
8. <i>[Signature]</i>	11 Boyle Place Fond du Lac, WI 54935	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fond du Lac	6-18-10
9. <i>[Signature]</i>	4024 Hillside Rd. Slinger, WI 53086	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Slinger	6/18/10
10. <i>[Signature]</i>	229 CEDAR CT WEST BEND 53095	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City West Bend NEWBURG	6/18/10

CERTIFICATION OF CIRCULATOR _____, certify:

I, Sara Graves (Name of circulator)
I reside at N 61 WIS 263 Wiquan Dr. Menomonee Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
6/18/10
Sara Graves
(Signature of circulator)

EXHIBIT V



11 Boyle Pl

Fond du Lac, WI 54935-2501

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

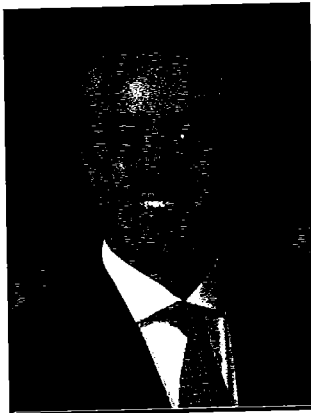
52

#7

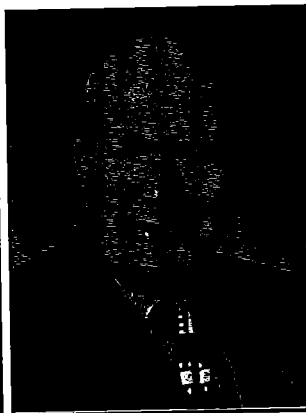
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 18
Senator Randy Hopper
(608) 266-5300
Email Senator Randy Hopper



Assembly District 52
Representative John Townsend
(608) 266-3156
Email Representative John Townsend

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 6

Senator Russ Feingold

US Representative
Thomas Petri

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT W 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	7069 SHADY LN RD WEST BEND, WI 53090	<input checked="" type="checkbox"/> Town Trotton <input type="checkbox"/> Village West Bend <input type="checkbox"/> City	June 18/10
2. <i>[Signature]</i>	1228 St Huberts Dr Hubertus, WI 53033	<input checked="" type="checkbox"/> Town Richfield <input type="checkbox"/> Village <input type="checkbox"/> City	6/19/10
3. <i>[Signature]</i>	1228 St Huberts Dr Hubertus, WI 53033	<input checked="" type="checkbox"/> Town Richfield <input type="checkbox"/> Village <input type="checkbox"/> City	6/19/10
4. <i>[Signature]</i>	719 S 84th St West Allis, WI 53214	<input type="checkbox"/> Town West Allis <input checked="" type="checkbox"/> Village Jeff Peters <input type="checkbox"/> City	6/19/10
5. <i>[Signature]</i>	719 S 84th St West Allis, WI 53214	<input type="checkbox"/> Town West Allis <input checked="" type="checkbox"/> Village Jim Peters <input type="checkbox"/> City	6/19/10
6. <i>[Signature]</i>	2128 S Livingston Ter West Allis WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	6/19/10
7. <i>[Signature]</i>	2007 N. Lakeside Wauwatosa, WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	6/19/2010
8. <i>[Signature]</i>	2220 E. Edgewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	6/22/2010
9. <i>[Signature]</i>	2312 E Edgewood Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	6/22/2010
10. <i>[Signature]</i>	3504 N. MARYLAND SHOREWOOD, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village SITORSWOOD <input type="checkbox"/> City	6/22/10

I, Sara Graves (Name of circulator), certify:
I reside at Sara Graves 161 WIS 263 Wigwam Dr. Menomonee Falls (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats.
6/22/2010 Sara Graves (Signature of circulator)

EXHIBIT W



2028 S livingston Ter
West Allis WI

This address could not be found as a
standard postal address.

Click the back button on your browser
to try again, or Click here for advice on
entering an address

54

#6

Wisconsin State Legislature

Wisconsin State Senate Unknown	Wisconsin State Assembly Unknown
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Please include your mailing address in
your email to your legislator.

US Congress

US House of Representatives	US Senate
--------------------------------	-----------

US Congressional District Unknown	Senator Russ Feingold and Senator Herb Kohl
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NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT X 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Manny Santos</i>	1600 Michael Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha 53189	6/25/10
2. <i>Jesús Mirer</i>	525 W26850 Winnebago Way	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Waukesha 53188	6/25/10
3. <i>F. C. TOMAS</i>	1424 Bedford Ct.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha 53186	6-25-10
4. <i>Abraham Torres</i>	12a Harrison av.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha 53186	6-25-10
5. <i>Clayton Norlope</i>	W225 5000th can rd	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Bend 53103	6-25-10
6. <i>Cesar Siles</i>	610 E Main St Waukesha WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha 53186	6-25-10
7. <i>Jay Wagner</i>	N90W16917 Appleton Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	6/25/10
8. <i>Marilyn Hagerstrom</i>	1140 Alder Dr. Waukesha WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha 53188	6/25/10
9. <i>David Lopez</i>	207 S. Grand Ave. #4 Waukesha, WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City 53186 Waukesha	6/25/10
10. <i>Olga J. Gutierrez</i>	234 W. Newhall Ave Waukesha, WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha 53186	6/25/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator) certify:
I reside at N61 W15263 Wigwam Dr. Menomonee Falls
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
6/25/2010 Sara Graves

(Date)

(Signature of circulator)

55

EXHIBIT X



W225 5900 mt
Big Bend WI

This address could not be found as a
standard postal address.

Click the back button on your browser
to try again, or Click here for advice on
entering an address

55

#5

Wisconsin State Legislature

Wisconsin State Senate	Wisconsin State Assembly
Unknown	Unknown

Please include your mailing address in
your email to your legislator.

US Congress

US House of Representatives	US Senate
--------------------------------	-----------

US Congressional District	Senator Russ Feingold
Unknown	and Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT 4 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	3259 N Maryland Ave Milwaukee, WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/10/10
2. <i>[Signature]</i>	107 W 25th Street Ct Waukesha WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Hartland	7/10/10
3. <i>[Signature]</i>	107 W 25th Street Ct 2430 Springdale Rd APT 108, Waukesha	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Geneseo	7/10/10
4. <i>[Signature]</i>	W318 S3124 Squire Rd Waukesha WI 53189	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Geneseo	7/11/10
5. <i>[Signature]</i>	N88 W17059 Elmwood Meno. Falls, WI 53051	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/11/10
6. <i>[Signature]</i>	W226 N2780 Foxwood Ln Waukesha, WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Pewaukee	7/11/10
7. <i>[Signature]</i>	N50 W19420 Fairmount Meno. Falls WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/11/10
8. <i>[Signature]</i>	807 S. Imperial Dr. 53029	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Hartland	7/11/10
9. <i>[Signature]</i>	8702 W. Bone Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/11/10
10. <i>[Signature]</i>	3712 W Prospect	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/11/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves, (Name of circulator) certify:
I reside at N61 W15263 Wigwam Dr. Menomonee Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/11/10
Sara Graves

(Date)

(Signature of circulator)

59

EXHIBIT Y



3259 N Maryland Ave
 Milwaukee, WI 53211-3102

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

57

#1

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 8
 Senator Alberta Darling
 (608) 266-5830
 Email Senator Alberta Darling

Assembly District 22
 Representative Sandy Pasch
 (608) 266-7671
 Email Representative Sandy Pasch

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT 2

10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative			District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Low Ann Mueller</i>	4022 N. Downer Ave Shorewood WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
2. <i>Robert M Wallace</i>	2503 E. Olive St. Shorewood, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
3. <i>Leslie Cooley</i>	4462 N. Frederick Ave Shorewood, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
4. <i>Janja Ciraldi</i>	W 299 S 8046 Hwy 83 Milwaukee, WI 53149	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/8/10
5. <i>[Signature]</i>	2673 N Bremen St Milwaukee, WI 53212	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/8/10
6. <i>[Signature]</i>	2406 E. Lake Blvd Shorewood WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
7. <i>A. Boyson</i>	4408 N. Lake Dr. Shorewood, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
8. <i>[Signature]</i>	4035 N Downer Shorewood	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7.8.10
9. <i>[Signature]</i>	2615 E. Menlo Blvd. Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
10. <i>Ric Huffman</i>	4982 Lake Dr. West Bend, WI 53095	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Bend	7/9/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator) certify:
I reside at N61 W15263 Wignam Dr Menomonee Falls WI 53051
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

11/9/10

Sara Graves

(Signature of circulator)

58

EXHIBIT Z



W299 58046 Hwy 83

Mukwonago WI

This address could not be found as a standard postal address.

Click the back button on your browser to try again, or Click here for advice on entering an address

58

#4

Wisconsin State Legislature

Wisconsin State Senate	Wisconsin State Assembly
Unknown	Unknown

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
-----------------------------	-----------

US Congressional District	Senator Russ Feingold and Senator Herb Kohl
Unknown	

EXHIBIT Z



2673 N Bremer ST
Milwaukee WI

This address could not be found as a standard postal address. Click the back button on your browser to try again, or Click here for advice on entering an address

58
5

Wisconsin State Legislature

Wisconsin State Senate Unknown	Wisconsin State Assembly Unknown
--------------------------------------	--

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
US Congressional District Unknown	Senator Russ Feingold and Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT AA 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road. 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1.	1700 Davidson Rd Brookfield WI 53005	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	7/10/10
2.	N68W256058 Hwy VV SUSSEX, WI 53089	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City SUSSEX	7/10/10
3.	4684 N. 127th St. Butler, WI 53007	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Butler	7/10/10
4.	W297N9550 Hartley Rd Hartland WI 53029	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Merton	7/10/10
5.	W290 N8275 Florence Hartland, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Merton	7/10/10
6.	147 Congress DR West Bend WI 53095	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Bend	7/10/2010
7.	W238N5954 Essex Cir. Sussex WI 53089	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Sussex	7/10/10
8.	6113 W. Plummer Rd #3 NEW WI 53213	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/11/10
9.	4730 N 100th Wauwatosa WI 53222	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	7/11/10
10.	1412 E Olive St.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/11/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator) _____, certify:
I reside at N61 W15263 Wigwam Dr. Monomonee Falls WI 53051
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

(Date) 7/11/10 _____ (Signature of circulator) Sara Graves



6113 W Bluemound Rd
 Milwaukee, WI 53213-4142

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

59

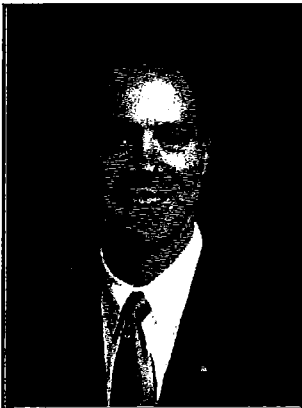
59

#8

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan

Assembly District 13
 Representative David Cullen
 (608) 267-9836
 Email Representative David Cullen

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT 339

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>DON PEASE III</i>	<i>2533 S. 76th</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>WEST ALLIS</i>	<i>7-2-10</i>
2. <i>Steve Griffiths</i>	<i>P.O. Box 14724</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>New Berlin</i>	<i>7-2-10</i>
3. <i>Mary Chonowski</i>	<i>69th West Orchard St. #207</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-10</i>
4. <i>Adolf Janynt</i>	<i>2105 S 83 St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>WEST ALLIS</i>	<i>7-2-2010</i>
5. <i>Michelle Schult</i>	<i>3248 S. 106th St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-2010</i>
6. <i>Daniel A. L.</i>	<i>3248 S. 106th St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-2010</i>
7. <i>Alan Dean</i>	<i>10605 108th Lot D5</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>WEST ALLIS</i>	<i>7-2-10</i>
8. <i>John Jurgan</i>	<i>7726 W. Ohio Ave</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9. <i>C.M. Breen</i>	<i>1455 S 70th St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-10</i>
10. <i>Cindy D. Young</i>	<i>1613 South 5th St West Allis, WI 53214</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7-2-10</i>

I, FRANK S. Kinateder (Name of circulator), certify:

I reside at 710 Oak Ridge Ct, Waukesha, WI 53188 (Circulator's residence/Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/5/10 (Date) Frank S. Kinateder (Signature of circulator)



PO Box 14724
New Berlin WI

This address could not be found as a standard postal address.

Click the back button on your browser to try again, or Click here for advice on entering an address

70
#7

Wisconsin State Legislature

Wisconsin State Senate Unknown	Wisconsin State Assembly Unknown
--------------------------------------	--

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives	US Senate
--------------------------------	-----------

US Congressional District Unknown	Senator Russ Feingold and Senator Herb Kohl
---	--

EXHIBIT BB



6911 W Orchard St

West Allis, WI 53214-4859

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

70
#3

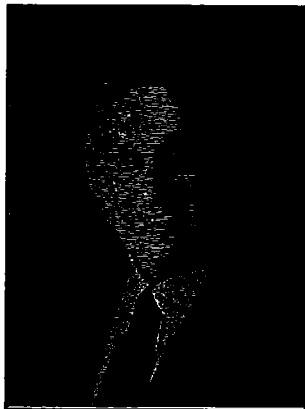
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Sean Anelli</i> SEAN ANELLI	2227 E. Edgewood Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
2. <i>Wally Savard</i>	2224 E. Edgewood Ave Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
3. <i>James Smith</i>	2224 E. Edgewood Ave Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
4. <i>KAY WOSEWICK</i>	2514 E Shorewood Blvd Shorewood W 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
5. <i>NICK DeVik</i> NICK DeVik	425807 W Greenfield Ave West Allis WI 53214	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City West Allis	7.10.10
6. <i>Mary P. Pardini</i>	4429 N. Marlborough Shorewood, WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
7. _____		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8. <i>DEK KUEHN</i>	2201 E. STRATFORD SHOREWOOD, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/11/10
9. <i>Janet Wilgus</i>	2301 E Stratford Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/11/10
10. <i>Robert Madigan</i>	2322 E. Edgewood Shorewood WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/11/10

CERTIFICATION OF CIRCULATOR

I, Todd P. Kolosso, certify:

(Name of circulator)

I reside at 2226 E. Edgewood Ave Shorewood WI 53211
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/12/10

(Date)

[Signature]

(Signature of circulator)

EXHIBIT CC



5807 W Greenfield Ave
 West Allis, WI 53214-5143

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

1
#5

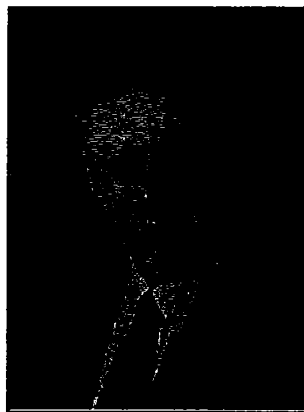
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT DD 9

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. ASHISH	2014 S. 102 nd ST. WEST ALLIS - 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	07/02/10
2. JONAS, Denise	1025 S. 72 nd ST. West Allis, WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
3. Sheff, Chris	1473 S. 8 th Street West Allis WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
4. Brown, Tere	3622 S 77 th Mil WI 53220	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/2/10
5. King, Marlon	2962 N 124 ST. Wauwatosa WI. 53222	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/2/10
6. Farrell, Victoria	1512 S. 92 WEST ALLIS WI.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
7. Jacqueline Deanna	7313 W. Lapham	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
8. Mark Duran SA	6705 W FAIRVIEW F.W AVE 53213	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/2/10
9. Jim Kappi	5010 W Belmont West Milwaukee WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City West Milwaukee	7/2/10
10. Etteimed	4038 N. DOWNER S	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/6/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves, certify:

(Name of circulator)

I reside at N61 W15263 Wigwam Dr Menomonee Falls WI 53051

(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/3/2010

(Date)

Sara Graves

(Signature of circulator)

EXHIBIT DD



1025 S 72nd St

West Allis, WI 53214-3117

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

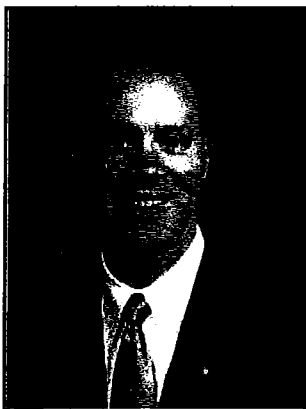
43

#2

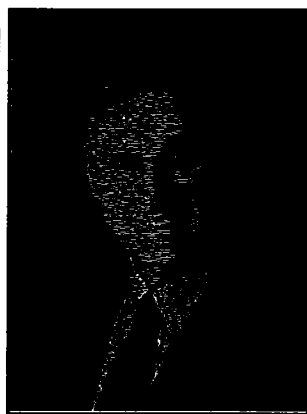
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4

Senator Russ Feingold

US Representative
Gwen Moore

and
Senator Herb Kohl

EXHIBIT DD



3622 S 77th St
 Milwaukee, WI 53220-1146

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

43

4

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 3
 Senator Tim
 Carpenter

Assembly District 7
 Representative Peggy
 Krusick

(608) 266-8535
 Email Senator Tim
 Carpenter

(608) 266-1733
 Email Representative
 Peggy Krusick

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl



7313 W Lapham St
West Allis, WI 53214-4731

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

43
#7

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim Sullivan

Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

EXHIBIT DD



6705 W Fairview Ave
 Milwaukee, WI 53213-3936

This district determination is based on the most recent geographic data available for this address.

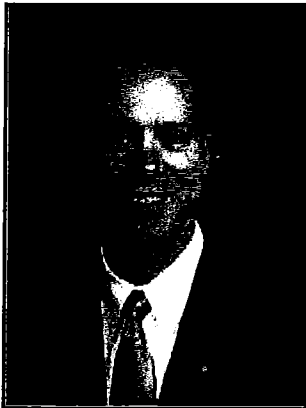
This address was matched to a Street Address, the center of which is located in the following legislative districts:

43
#8

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 13
 Representative David Cullen
 (608) 267-9836
 Email Representative David Cullen

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4

Senator Russ Feingold

US Representative and
Gwen Moore Senator Herb Kohl

.....

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT EE⁹

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
	5848 W. Scott West Allis, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
	1541 S 70th Street West Allis, WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
	1510 So. 6th West Allis, WI 53224	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
	3901 S. Moorland Rd New Berlin WI 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	7-2-10
	9822 W Oklahoma Ave #2 West Allis 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
	1212 S. 62nd West Allis 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2-10
		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
	2051 S. 83 W. Allis 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W. Allis	7-2-10
	1255 88th St West Allis WI 53214	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10
	2059 S 7th St West Allis WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2/10

CERTIFICATION OF CIRCULATOR

I, DUDLEY C. PALMER, certify:
(Name of circulator)

I reside at 5111 N. BAY RIDGE WHITEFISH BAY WI
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/2/10
(Date)

(Signature of circulator)

78



5848 W Scott St
 West Allis, WI 53214-3321
 This district determination is based
 on the most recent geographic data
 available for this address.
 This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

P. 78
 #1

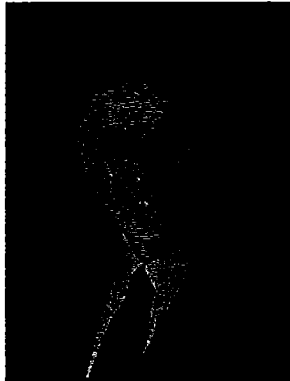
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim
 Sullivan



Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative
 Anthony Staskunas

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl



1541 S 70th St

West Allis, WI 53214-4821

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

P. 78
2

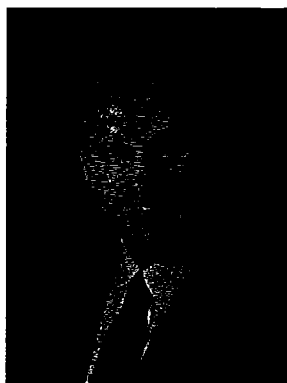
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4
US Representative
Gwen Moore

Senator Russ
Feingold
and
Senator Herb Kohl



1510 S 64th St
 West Allis, WI 53214-4901
 This district determination is based
 on the most recent geographic data
 available for this address.
 This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

P-78
 #3

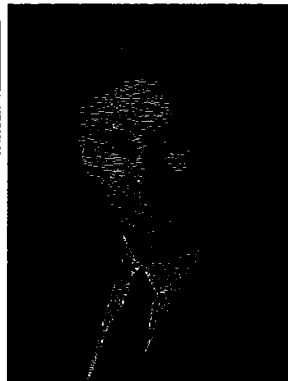
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim
 Sullivan



Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative
 Anthony Staskunas

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

EXHIBIT EE



1212 S 62nd St

West Allis, WI 53214-3217

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

p. 78
6

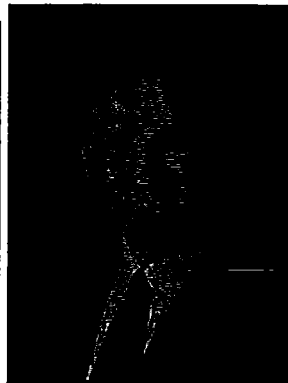
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4
US Representative
Gwen Moore

Senator Russ
Feingold
and
Senator Herb Kohl

EXHIBIT E'E



WISCONSIN STATE LEGISLATURE

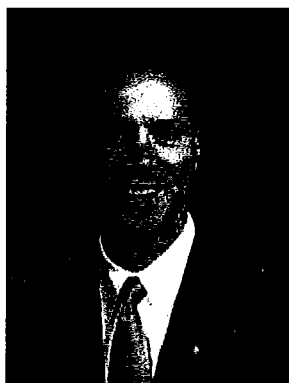
2059 S 71st St
 West Allis, WI 53219-1204
 This district determination is based on the most recent geographic data available for this address.
 This address was matched to a Street Address, the center of which is located in the following legislative districts:

P. 78
#10

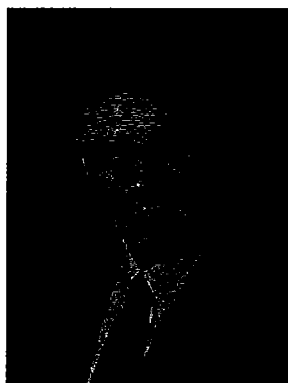
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

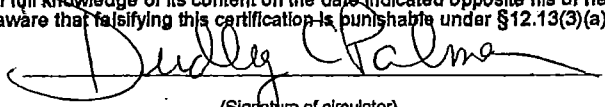
NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT FF 8

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Audra Guss</i>	<i>2433 S. 79th St West Allis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>WEST ALLIS</i>	<i>7/2/10</i>
2. <i>Brian Lencow</i>	<i>1968 S. 90th St. West Allis, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>WEST ALLIS</i>	<i>7/2/10</i>
3. <i>Kelly Albrick</i>	<i>1966 S. 90th West Allis WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7/2/10</i>
4. Thomas A. Silwan	1641 S. 69 St West Allis, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>WEST ALLIS</i>	7-2-10
5. <i>Joan Bleidorn</i>	<i>3909 N. Murray #78 Shorewood WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7-3-10</i>
6. <i>Julie Enslow</i>	<i>4142 N. Newhall</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7-3-10</i>
7. <i>Paul Key</i>	<i>PO Box 3 Kewaskum WI 53040</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Kewaskum</i>	<i>7/3/10</i>
8. <i>Bob Johnson</i>	<i>5443 Arlt Rd Slinger 53086</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Slinger</i>	<i>7/3/10</i>
9. <i>Robert White</i>	<i>12 C Pine Ridge Ct Watertown WI 53094</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>(Watertown)</i>	<i>7/3/10</i>
10. <i>Juan Dubra</i>	<i>548 May Knoll Watertown WI 53098</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>(Watertown)</i>	<i>7/3/10</i>

I, DUDLEY C. PALMER, certify:
(Name of circulator)
 I reside at 5111 N BAY RIDGE, WHITEFISH BAY, WI
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/3/10
(Date)

(Signature of circulator)



1641 S 69th St

West Allis, WI 53214-4806

This district determination is based on the most recent geographic data available for this address.

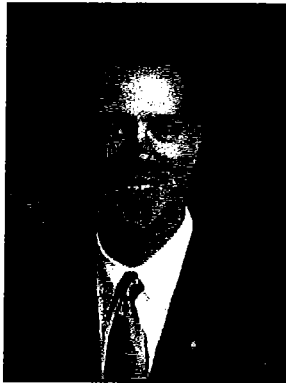
This address was matched to a Street Address, the center of which is located in the following legislative districts:

P. 93
#4

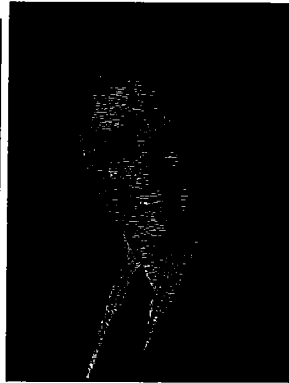
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4
US Representative
Gwen Moore

Senator Russ
Feingold
and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office U.S. House of Representatives		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Audrey Wotter	6882 Pleasant Ave	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Hartford	7/4/10
2. [Signature]	8392 W. Dreyer Pl	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Allis	7-11-10
3. Gary Gail	2857 S. 93 rd ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Allis	7/10/10
4. [Signature]	1423 S 93 rd ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City West Allis	7/10/10
5. Dan Reed	13500 W. Henschel	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City New Berlin	7-10-10
6. Ryan Blakely	1715 14 th Ave Green Bay WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Green Bay	7-10-10
7. [Signature]	2433 S. COYNE ST WEST ALLIS	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City WEST ALLIS	7-10-10
8. [Signature]	4367 S. GROFFER AVE WILWAUWATON	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MELWAUWATON	7-10-10
9. [Signature]	10114 W. WINDWARD ST WEST HILLS, WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10. [Signature]	1553 S. 96 ST WEST ALLIS WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7-10-10

CERTIFICATION OF CIRCULATOR

I, Leah P. Horn, (Name of circulator) _____, certify:
 I reside at 413 N 2nd St #480, Milwaukee, WI 53203
 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/10/10

(Date)

[Signature]

(Signature of circulator)

EXHIBIT 66



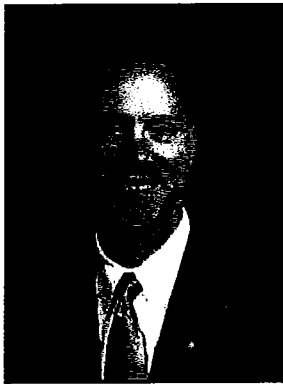
2458 S 60th St
 West Allis, WI 53219-2130
 This district determination is based
 on the most recent geographic data
 available for this address.
 This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

P. 89
#7

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim
 Sullivan



Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative
 Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT HH 7

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road. 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Janet Earl Beckm</i>	4238 N Larkin St Shorewood, WI 53081	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	7/6/10
2. <i>[Signature]</i>	5929 W Greenfield Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village West Allis <input type="checkbox"/> City	7/6/10
3. <i>Lena Ryrkin</i>	401 Madero Dr Thiensville WI 53091	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Thiensville <input type="checkbox"/> City	7/6/10
4. <i>Archi Lu</i>	4521 N. Bartlett Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	7/6/10
5. <i>Wana Nialok</i>	5313 N. 37th Milwaukee WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/6/10
6. <i>Cecilia Nijmuis</i>	2989 N 70th Milwaukee	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/6/10
7. <i>[Signature]</i>	3026 Stavel Milwaukee	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/6/10
8. <i>JANET HEBEL</i>	7627 N Fairchild Rd Box 74	<input type="checkbox"/> Town <input type="checkbox"/> Village Fox Point <input checked="" type="checkbox"/> City	7/6/10
9. <i>JAMES ANDRZEJCZYNSKI</i>	1206 E. Kensington Blvd Shorewood, WI 53081	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	7/6/10
10. <i>Jan C. [Signature]</i>	4051 N. Richland Ct. Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	7/6/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator), certify:
I reside at N61W15263 Wigwam Dr Menomonee Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/6/10

Sara Graves

(Date)

(Signature of circulator)



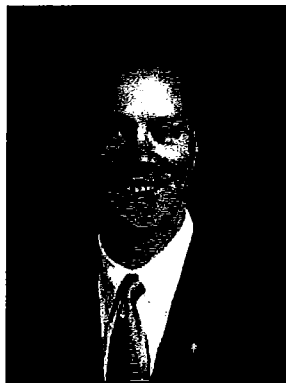
5929 W Greenfield Ave
 West Allis, WI 53214-5145
 This district determination is based
 on the most recent geographic data
 available for this address.
 This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

P. 44
 #2

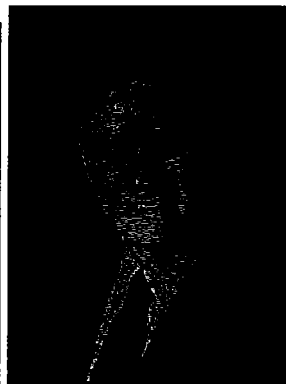
Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim
 Sullivan



Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative
 Anthony Staskunas

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT II 7

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Brian Hozemehl J.</i>	8528 N. 62nd St Brown Deer WI 53223	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brown Deer	7-9-10
2. <i>Loren Schoen</i>	6591 W. Goodrich Ln. Brown Deer, WI 53223	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brown Deer	7-9-10
3. <i>Barbara Fleming</i> <i>Barbara Fleming</i>	4995 W. Fairy Chasm Ct. Brown Deer WI 53223	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brown Deer	7-9-10
4. John A. Price	8564 N. 63rd St Brown Deer WI 53223	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brown Deer	7-10-10
5. John A. Price	8564 N. 63rd St Brown Deer WI 53223	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brown Deer	7-10-10
6. John A. Price	1192 W17367 Forest Dr Menomonee Falls WI 53251	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/10/10
7. John A. Price	N. 48 W. 16775 Main St. 3A# Menomonee Falls WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/10/10
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, Kathy Stresman (Name of circulator), certify:

I reside at 8561 N 63rds street Brown Deer
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7-9-10

Kathy Stresman

(Signature of circulator)

(Date)

GAB-168 (Rev. 09/2009) The information on this form is required by §§. 8.15, 8.20, 8.50, Wis. Stats.

This form is prescribed by:

Government Accountability Board
212 East Washington Avenue, 3rd Floor
P.O. Box 7984
Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@wi.gov

Page No. 2

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT JJ 7

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Brian Mariano</i>	2212 E Stratford Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-11-2010
2. <i>Wm. Schubert</i>	2309 E Stratford Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/11/2010
3. <i>Marie Bravich</i>	2309 E Stratford Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/12/2010
4. <i>Walt Kern</i>	2619 Wood Place	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/12 2010
5. <i>Walt H. K.</i>	2415 E Kensington Blvd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/12/10
6. <i>Frank Smith</i>	2419 W. Oakleaf Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City M. Leabree	7/12/10
7. <i>Carri Giles</i>	2411 E. Newton Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/12/10
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, *Todd P. Kolosso* **CERTIFICATION OF CIRCULATOR**, certify:
(Name of circulator)

I reside at 2226 E Edgewood Ave Shorewood WI 53211
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/12/10
(Date)

Todd P. Kolosso
(Signature of circulator)

GAB-168 (Rev. 09/2009) The information on this form is required by §§. 8.15, 8.20, 8.50, Wis. Stats.
This form is prescribed by: Government Accountability Board
212 East Washington Avenue, 3rd Floor
P.O. Box 7984
Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@wi.gov

EXHIBIT JJ



2419 N Wahl Ave
 Milwaukee, WI 53211-4514
 This district determination is based
 on the most recent geographic data
 available for this address.
 This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

P-3
#6

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
 Senator Jeffrey Plale
 (608) 266-7505
 Email Senator Jeffrey
 Plale



Assembly District 19
 Representative Jon
 Richards
 (608) 266-0650
 Email Representative
 Jon Richards

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT KK 7

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
<i>[Signature]</i>	2611 N. Baughman Fox Point WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Fox Point	7/10/10
2. <i>S. L. Tomasello</i>	4415 N. Marborough Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
3. <i>Carmie Lorino</i>	4353 N ALPINE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
4. <i>Maddie Kelley</i>	2216 E. Stratford Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
5. <i>[Signature]</i>	20 Box 05386 7061 N. Lygous Hope	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa 53205	7/10/10
6. <i>[Signature]</i>	2500 W. Glendale Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/10/10
7. <i>[Signature]</i>	4901 N. Ardmore	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	7/10/10
8. <i>[Signature]</i>	4164 N. Newhall	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
9. <i>[Signature]</i>	2843 W. STEPHAN BLVD	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/10/10
10. <i>[Signature]</i>	4848 N. Lydell #137	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/10/10

CERTIFICATION OF CIRCULATOR

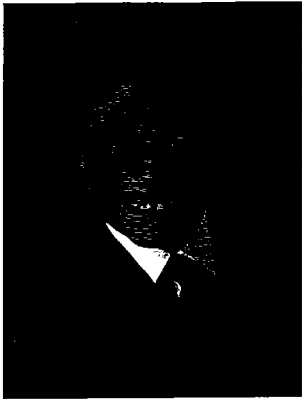
I, Katherine Brown (Name of circulator) certify:
I reside at 1500 E. Hilary Ln, Fox Point WI 53217 (Circulator's residency - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

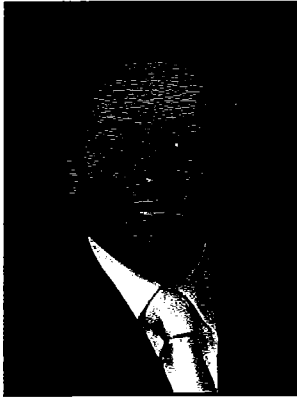
(Date) 7/10/10

(Signature of circulator) [Signature]

118



Senate District 6
Senator Spencer
Coggs
(608) 266-2500
Email Senator
Spencer Coggs



Assembly District 16
Representative Leon
Young
(608) 266-3786
Email Representative
Leon Young

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US
Congressional
District 4
US
Representative
Gwen Moore

US Senate


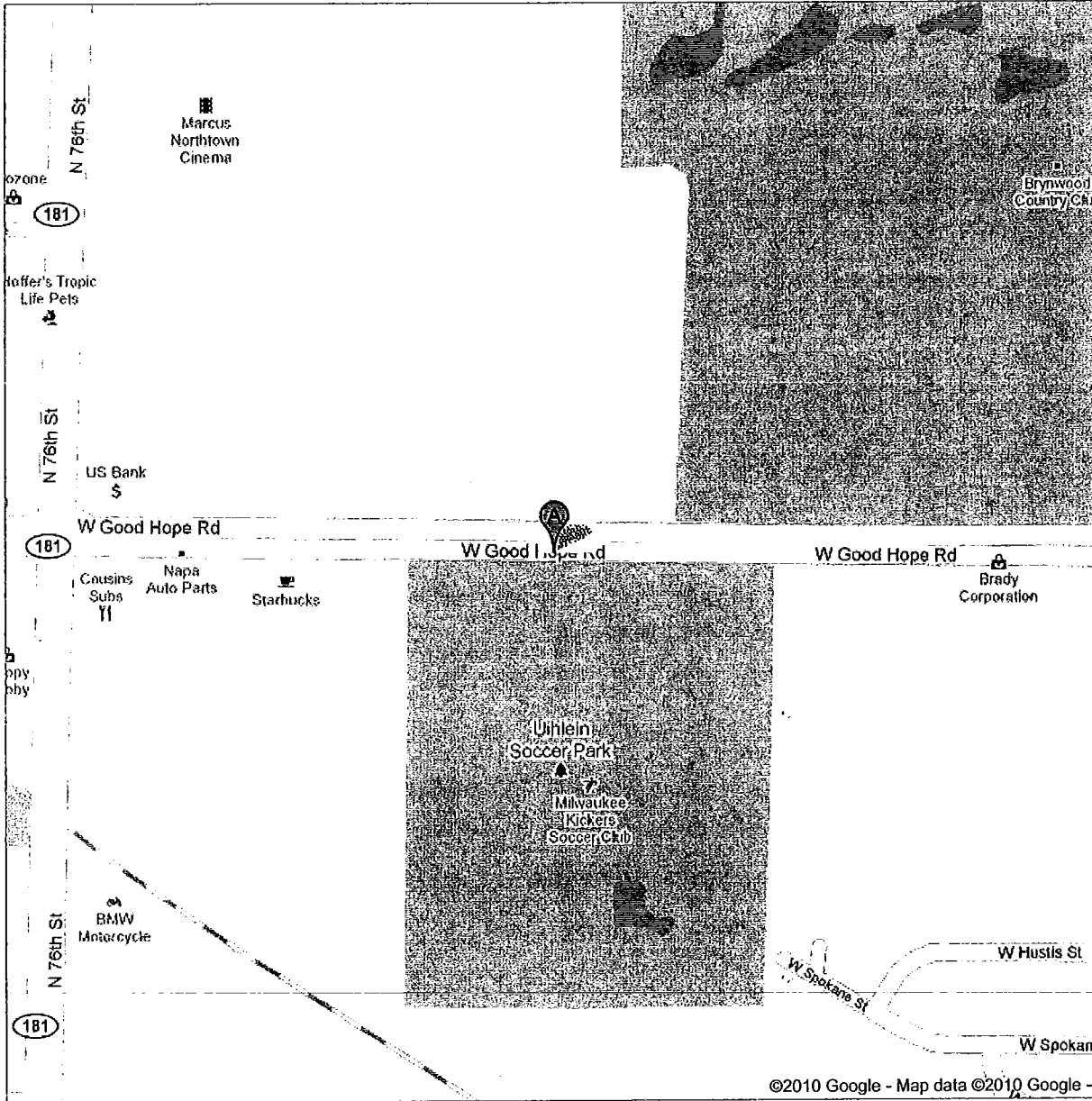
Senator Russ
Feingold
and
Senator Herb
Kohl

EXHIBIT KK

Google maps

Address 7061 W Good Hope Rd
Milwaukee, WI 53223

Get Google Maps on your phone
Text the word "GMAPS" to 466453

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT KK 7

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
<i>Baldwin Cul</i>	<i>2111N Bourget Ln Foxton WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>foxton WI</i>	<i>7/10/10</i>
<i>2. S L Tomassello</i>	<i>4415 N Marlborough Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
<i>3. Connie Lorino</i>	<i>4353 N ALPINE</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
<i>4. Madeline Kelley</i>	<i>2216 E Stratford Ct</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
<i>5. Sharral Robertson</i>	<i>PO Box 05386</i> <i>7061 N. Lincoln Hope</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Wauwatosa</i> <i>53205</i>	<i>7/10/10</i>
<i>6. Sharon</i>	<i>2500 W Glendale Ave</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Milwaukee</i>	<i>7/10/10</i>
<i>7. Maura Vertich</i>	<i>4901 N Ardmore</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Whitefish Bay</i>	<i>7/10/10</i>
<i>8. Jace Sauric</i>	<i>4164 N. Newhall</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
<i>9. [Signature]</i>	<i>2843 N STERMAN BLVD</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>7/10/10</i>
<i>10. Gatis [Signature]</i>	<i>4848 N. Lydell #137</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Milwaukee</i>	<i>7/10/10</i>

I, Katherine Brown (Name of circulator) certify:
 I reside at 1500 E. Lake Ln, Fox Point WI 53217 (Circulator's residence - include number, street, and municipality.)
 I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
 _____ (Signature of circulator)
 _____ (Date)

118



7061 n. good hope rd
milwaukee WI 53205

The address information supplied could only be matched to a ZIP code area.

P. 118
#5

These areas frequently overlap multiple districts. For better results, enter a whole street address or look up your legislator by municipality.

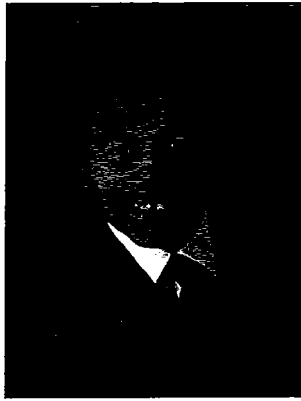
This district determination is based on the most recent geographic data available for this address.

This address was matched to a 5 digit zip code area, the center of which is located in the following legislative districts:

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 6
Senator Spencer
Coggs
(608) 266-2500
Email Senator
Spencer Coggs



Assembly District 16
Representative Leon
Young
(608) 266-3786
Email Representative
Leon Young

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US
Congressional
District 4
US
Representative
Gwen Moore


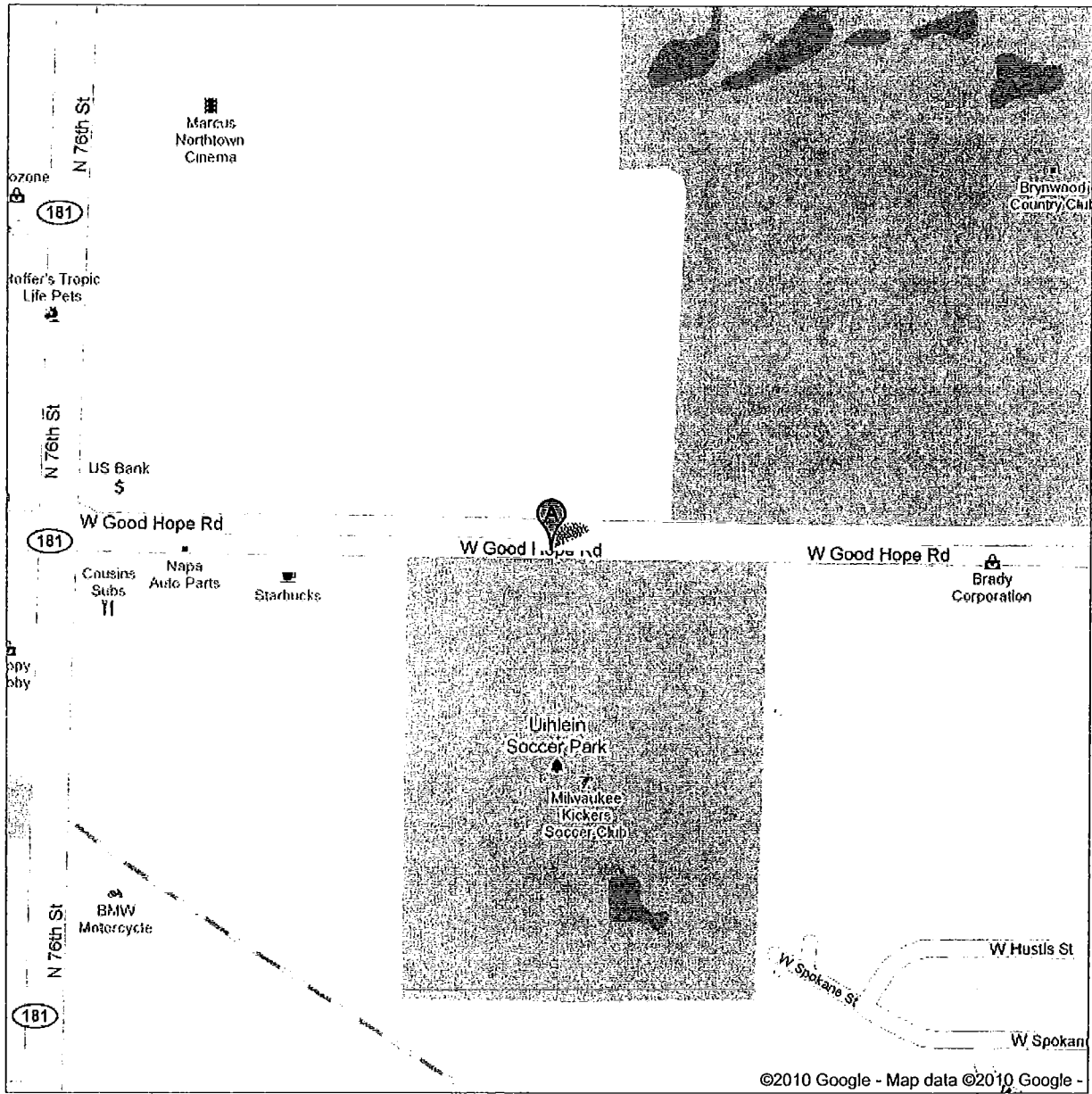
US Senate

Senator Russ
Feingold
and
Senator Herb
Kohl

EXHIBIT KK

Google maps Address 7061 W Good Hope Rd Milwaukee, WI 53223

Get Google Maps on your phone
 Text the word "GMAPS" to 466453

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT 4 X

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) Milwaukee		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Bernice B. Popelka</i>	7415 N. Braeburn Lane Glendale, WI 53209	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Glendale	7/22/10
2. <i>Geoffrey H. Cett</i>	2661 W. Green Brook Rd GLENDALE WI, 53209	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Glendale	7/22/10
3. <i>[Redacted]</i>	800 E. [Redacted] Ave Milwaukee WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	5/4/10
4. <i>Leo M. Jones</i>	500 E. Glen Ave Whitfish Bay, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WFB	7/4/10
5. <i>Michelle Kepp</i>	1169 Burr Oak Blvd. Waukesha, WI 53189	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10
6. <i>[Redacted]</i>	207 E Lake Bluff Shorewood WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Shorewood	7/4/10
7. <i>M. J. Reilly</i>	4071 N. Richland Shorewood, WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Shorewood	7/4/10
8. <i>Madeline Kelley</i>	2216 E. Stratford Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Shorewood	7/4/10
9. <i>[Redacted]</i>	8332 Gendry Ave, Waukesha	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	7/4/10
10. <i>[Redacted]</i>	4756 N. Oakland LFB	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City LFB	7/4/10

CERTIFICATION OF CIRCULATOR

I, Bernice B. Popelka, (Name of circulator) certify:
I reside at 7415 N. Braeburn Lane, Glendale, Wisconsin 53209
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/13/10

Bernice B. Popelka

(Signature of circulator)

Ex



800 E Glen Ave
 Milwaukee, WI 53217-5216
 This district determination is based on
 the most recent geographic data
 available for this address.
 This address was matched to a Street
 Address, the center of which is located
 in the following legislative districts:

P-110
#3

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 8
 Senator Alberta
 Darling
 (608) 266-5830
 Email Senator Alberta
 Darling

Assembly District 22
 Representative Sandy
 Pasch
 (608) 266-7671
 Email Representative
 Sandy Pasch

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 5
 US Representative
 F. Sensenbrenner

Senator Russ
 Feingold
 and
 Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT MM10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Kelly Ascherman	4873 Village Ct #2 Nashotah, WI 53063	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Delaford	06/12/10
2. Patricia Ymerald	1056 E. Circle Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6/11/10
3. Trisha Loebel	5550 N. Kent Ave.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6/12/10
4. Jim Loebel	5550 N. KENT AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay WFB	6/17/10
5. Richard D McTernish	5122 N. Bay Ridge	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6/14/10
6. Margy McCormick	5122 N. Bay Ridge	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6/14/10
Jim O'Toole	5122 N. Bay Ridge	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6/14/10
DUSTIN DREES	5155 N BAY RIDGE AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6-14-10
9. Sherie Drees	5155 N. Bay Ridge Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6-14-10
10. Wendy Smith	5117 N Bay Ridge Ave.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	6-14-10

CERTIFICATION OF CIRCULATOR

I, DUDLEY C. PALMER, certify:

I reside at 5111 N BAY RIDGE, WHITEFISH BAY
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6/19/10

Dudley C Palmer
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT NN 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	1111 50. 113 RD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7-6-10
2. <i>[Signature]</i>	1111 50. 113 ST.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7-6-10
3. <i>[Signature]</i>	14630 W. Oklahoma Ave.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	7/6/10
4. <i>[Signature]</i>	14630 W. Oklahoma Ave 53151	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	2/6/10
5. <i>[Signature]</i>	712 S 2008	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/6/10
6. <i>[Signature]</i>	2082 S 104	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/6/10
7. <i>[Signature]</i>	14305 W Humboldt Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	7/6/10
8. <i>[Signature]</i>	2345 S 107 th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7/6/10
9. <i>[Signature]</i>	2345 S 107 th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-6-10
10. <i>[Signature]</i>	10106 W Schlinger Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7/6/10

I, Dan Daniel Kyle CERTIFICATION OF CIRCULATOR, certify:
 I reside at 9993 W. North Ave #243 Wauwatosa, WI
 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
 7/6/10
 (Date) *[Signature]*
 (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT 00 9

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	4195 10 th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City O	6/25/10
2. <i>[Signature]</i>	154 Big Bend Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-25/10
3. <i>[Signature]</i>	1100 ROLLING GREEN BROOKFIELD	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield	6/25/10
4. <i>[Signature]</i>	2700 BOSTON CT WAUKESHA, WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10
5. <i>[Signature]</i>	619 DYKINS AVE WAUKESHA WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-25-10
6. <i>[Signature]</i>	304 W NORTH ST #145 WAUKESHA WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10
7. <i>[Signature]</i>	304 W North St #145 Waukesha WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City waukesha	6/25/10
8. <i>[Signature]</i>	521 Dunbar #1 Waukesha 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10
9. <i>[Signature]</i>	215 N Prairie Waukesha, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10
10. <i>[Signature]</i>	740 N. Grand Waukesha	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-25-10

I, Daniel Kyle CERTIFICATION OF CIRCULATOR certify:
(Name of circulator)
 I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
 Date: 6/25/10 *[Signature]*
(Date) (Signature of circulator)

GAB-168 (Rev. 09/2009) The information on this form is required by §§. 8.15, 8.20, 8.50, Wis. State.
 This form is prescribed by:
 Government Accountability Board
 212 East Washington Avenue, 3rd Floor
 P.O. Box 7984
 Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@wi.gov

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT PP 9

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Linda K Dombrow <i>Linda K Dombrow</i>	490 Elder Lane Allenton WI 53002	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Allenton</i>	6-15-10
2. Terri A Mennicke <i>Terri A Mennicke</i>	301 E. Commerce Blvd #39 Slinger WI 53086	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Slinger</i>	6-15-10
3. Erica Schwebel <i>Erica Schwebel</i>	774 N. Main St Hartford WI 53027	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Hartford</i>	6-15-10
4. Christina Curtis <i>Christina Curtis</i>	6198 N16960 Ridgeway Dr. Jackson, WI 53037	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Jackson</i>	6-15-10
5. Kim Peterson <i>Kim Peterson</i>	8349 Fairview Dr. Allenton WI 53002	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Weyne</i>	6-15-10
6. Christine Perkins <i>Christine Perkins</i>	427 n main st Hartford WI 53027	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Hartford</i>	6/15/10
7. Tracie Baker <i>Tracie Baker</i>	680 Edgewood Dr West Bend WI 53090	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Bend</i>	6/15/10
8. Chris Fleischmann <i>Chris Fleischmann</i>	414 Sand Drive West Bend, WI 53095	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Bend</i>	6-15-10
9. Jean Schwichtenberg <i>Jean Schwichtenberg</i>	3534 Stanford Lane West Bend WI	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>West Bend</i>	6-15
10. Wendy Fournier <i>Wendy Fournier</i>	1077 Summer St West Bend, WI 53090	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Bend</i>	6/15/10

CERTIFICATION OF CIRCULATOR

I, PAUL M. KOLOSSO (Name of circulator), certify:
I reside at 4320 CEDAR CREEK ROAD, SLINGER, WISCONSIN 53086 (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

17 JUNE 2010

Paul M. Kolosso
(Signature of circulator) PAUL M. KOLOSSO

(Date)

NOMINATION PAPER FOR PARTISAN OFFICE **EXHIBIT QQ 8**

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	1022 S 3rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waterford	7-3-10
2. <i>[Signature]</i>	20179 W. Good Hope	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Lannon	7/3/10
3. <i>[Signature]</i>	4140 Tree Marloss	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	7/3/10
4. <i>[Signature]</i>	4420 N Parkview	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Weyauwaton	5/30/10
5. <i>[Signature]</i>	W167 N9929 Cardinal Ct Gen Maroon	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Genoa	5/30/10
6. <i>[Signature]</i>	6221 N SANTA MONICA WHITEFISH BAY	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WHITEFISH BAY	5/32/10
7. <i>[Signature]</i>	516 N Powers St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Port Washington	5/30/10 7-4-2010
8. <i>[Signature]</i>	839 W Larche	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Port Washington	7/4/10
9. <i>[Signature]</i>	839 W Larche	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Port Washington	7/4/10 5/30/10
10. <i>[Signature]</i>	Bloncrest Ct Sa	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Seauville	7/4/10 5/30/10

CERTIFICATION OF CIRCULATOR

I, DUDLEY C. PALMER, certify:
(Name of circulator)
 I reside at 5111 N. BAY RIDGE, WHITEFISH BAY, WI 53217.
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/4/10
(Date)

[Signature]
(Signature of circulator)

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NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT RR 8

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1.	N377 W331N5947 CEDAR BAY DR.	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MERTON	6/8/10
2. Thom. D. Humm	N48W31390 St Hwy 83 Hartland	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Merton	6/8/10
3. Mary Hubbard	N 48 W 31390 St. Hwy 83	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Merton	6/11/10
4. Robert Kranti	W 302 N 7493 Hwy E HARTLAND	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Merton	6/12/10
5. May E Krasb	W302 N9483 Hwy E HARTLAND	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MERTON	6/12/10
6. Arnold Diebold	W301 N9537 O'Neil Rd Hartland	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Merton	6/12/10
7. Sally Doyle	N70 W 28315 Huntington 6778 Gertrude Ln J	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Merton	6/16/10
8.	Hartland W4 S325	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Merton	6/25/10
9. Tom Kycowski	N56 W15948 SCOTT	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MENOMONEE FALLS	6/24/10
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, Thomas D. Hubbard CERTIFICATION OF CIRCULATOR certify:
(Name of circulator)
 I reside at N48W31390 St Hwy 83 Town of Merton
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7-5-10 Thom. D. Humm
(Date) (Signature of circulator)

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NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT 556

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	7635 Kings Street Menasha WI 53221	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Menomonie	7/10/10
2. <i>[Signature]</i>	2931 N. Street Hawthorn, WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	
3. <i>[Signature]</i>	4304 N. Woodburn Shorewood WI 53211	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
4. <i>[Signature]</i>	4311 N. Maryland Ave.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
5. <i>[Signature]</i>	4428 N. Murray Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10/10
6. <i>[Signature]</i>	3945 N. Prospector	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
7. <i>[Signature]</i>	2813 N. Sherman Blvd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/10
8. <i>[Signature]</i>	2813 N. Street Sherman Blvd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/10
9. <i>[Signature]</i>	2825 N. 7	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10. <i>[Signature]</i>	4970 N. Woodburn	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/10

CERTIFICATION OF CIRCULATOR

I, Kelly L. Herda (Name of circulator), certify:

I reside at 8905 N. Froquois Rd. Bayside, WI 53217
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction of district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/10/10

[Signature]

(Date)

(Signature of circulator)

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NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT TT

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1.	6228 W Hayes Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2
2.	937 S. 72nd St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2
3.	1741 S 70th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2
4.	1741 S 70th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/2
5.	7018 W. Mitchell West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2
6.	7018 W Mitchell	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7-2
7. Jennifer Weis	4957 N. Howell Ave Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-4
8. K A Honek	4464 N. Bartlett Ave Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-24
9.	4464 N Bartlett Ave Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-4
10.	4068 N. Prosper	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-4

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle (Name of circulator), certify:
 I reside at 9993 W. North Ave #243 Wauwatosa, WI (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
 Date: 7-4-10
 Signature:

(Date)
 GAB-168 (Rev. 09/2009) The information on this form is required by §§. 8.15, 8.20, 8.50, Wis. Stats.
 This form is prescribed by: Government Accountability Board
 212 East Washington Avenue, 3rd Floor
 P.O. Box 7984
 Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@wi.gov

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EXHIBIT TT



7018 W Mitchell St
 West Allis, WI 53214-4841
 This district determination is based on the most recent geographic data available for this address.
 This address was matched to a Street Address, the center of which is located in the following legislative districts:

P. 12
#685

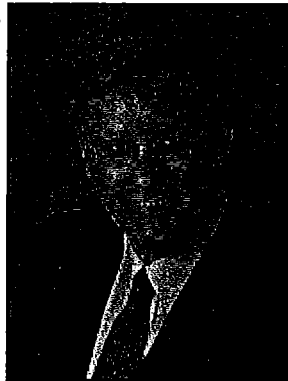
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4
 US Representative Gwen Moore

Senator Russ Feingold and Senator Herb Kohl

EXHIBIT TT



1741 S 70th St
 West Allis, WI 53214-4850
 This district determination is based on the most recent geographic data available for this address.

p.12
 #3*4

This address was matched to a Street Address, the center of which is located in the following legislative districts:

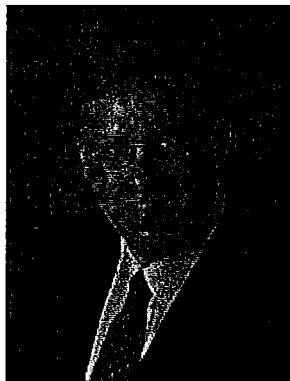
Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative
 Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

EXHIBIT TT



937 S 72nd St
 West Allis, WI 53214-3115
 This district determination is based on the most recent geographic data available for this address.
 This address was matched to a Street Address, the center of which is located in the following legislative districts:

P12 #2

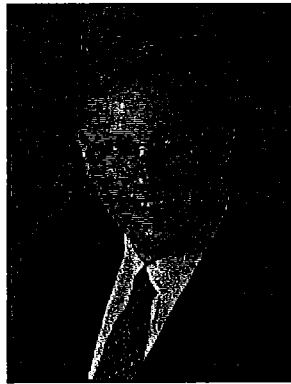
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4
 US Representative Gwen Moore

Senator Russ Feingold and Senator Herb Kohl

EXHIBIT TT



6728 W Hayes Ave
 West Allis, WI 53219-2051
 This district determination is based on the most recent geographic data available for this address.
 This address was matched to a Street Address, the center of which is located in the following legislative districts:

P.12
#1

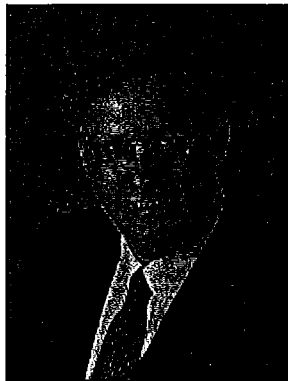
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4
 US Representative Gwen Moore

Senator Russ Feingold and Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE *EXHIBIT UU*

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Danny Williams</i>	<i>2151 S. 110th St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>West Allis</i>	<i>7/11/10</i>
2. <i>[Signature]</i>	<i>1421 S. 77th St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>West Allis</i>	<i>7/11/10</i>
3. <i>Kwilio</i>	<i>6147 N10938 Hickory Ct</i> <i>Greenwood</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Stoughton</i>	<i>7/11/10</i>
4. <i>James B. Wisch</i>	<i>1626 E. Newton Ave</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/11/10</i>
5. <i>Debra Hesketh</i>	<i>1020 E. Newton Ave</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/11/10</i>
6. <i>[Signature]</i>	<i>232A E. Washington Ave</i> <i>West Bend, WI 53090</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Bend</i>	<i>7/11/10</i>
7. <i>[Signature]</i>	<i>2778 N 2757 Rock</i> <i>Reporalike WI 53072</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Pewaukee</i>	<i>7/11/10</i>
8. <i>[Signature]</i>	<i>2206 S 67th Pl</i> <i>West Allis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7/11/10</i>
9. <i>Shirley Horn</i>	<i>1380 W West Ave</i> <i>apt 203</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Wauwatosa</i>	<i>7/11/10</i>
10. <i>Sharon Strauss</i>	<i>2169 S 66th St</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>West Allis</i>	<i>7/11/10</i>

CERTIFICATION OF CIRCULATOR

I, *Daniel Kyle* (Name of circulator), certify:
I reside at *9993 W. North Ave #243 Wauwatosa, WI*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

(Date)
7-10-10

(Signature of circulator)
[Signature]

EXHIBIT UU



2206 S 67th Pl

West Allis, WI 53219-2005

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

P.11
#6

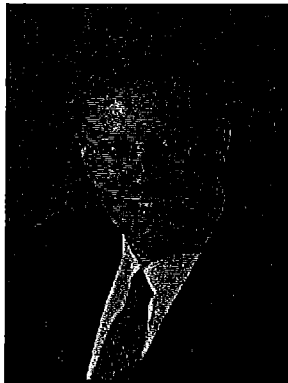
Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 15
Representative
Anthony Staskunas
(608) 266-0620
Email Representative
Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4
US Representative
Gwen Moore

Senator Russ
Feingold
and
Senator Herb Kohl

EXHIBIT UU



2169 S 66th St
 West Allis, WI 53219-1367
 This district determination is based on the most recent geographic data available for this address.

P. 11
 # 10

This address was matched to a Street Address, the center of which is located in the following legislative districts:

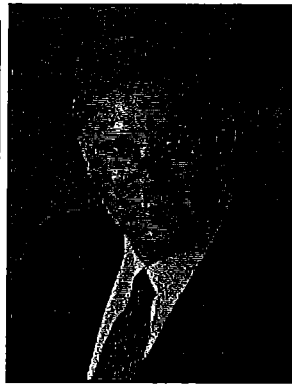
Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 5
 Senator Jim Sullivan
 (608) 266-2512
 Email Senator Jim Sullivan



Assembly District 15
 Representative Anthony Staskunas
 (608) 266-0620
 Email Representative Anthony Staskunas

Please include your mailing address in your email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT VV 0

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Erica Ingretson	2109 N. 117th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/10
2. James Ingretson	2109 N. 117th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAWWATOSA	7/10
3. Sherrill Ingersoll	2656 N. 89th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/10
4. [Signature]	2656 N 89th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City LAUWATOSA	7/10
5. [Signature]	5848 N. 114th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/10
6. Dennis Begor	3855 N. 121st	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City TOSA	7/10
7. Brian Greener	1940 N 121st	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	7/10
8. [Signature]	6617 VISTA	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUWATOSA	7/10
9. Carol Ottosen	6617 Vista Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/10
10. [Signature]	1940 N-121st	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAWWATOSA	7/10

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle, certify:

I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a); Wis. Stats.

7/10/10

(Date)

[Signature]

(Signature of circulator)

EXHIBIT VV



5848 N 114th St
 Milwaukee, WI 53225-2304
 This district determination is based on the most recent geographic data available for this address.
 This address was matched to a Street Address, the center of which is located in the following legislative districts:

P. 8 #5

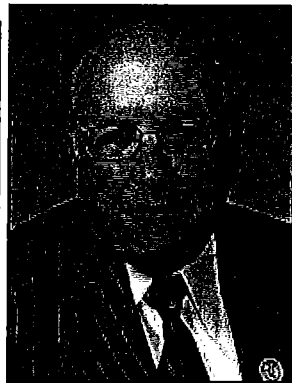
Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 4
 Senator Lena Taylor
 (608) 266-5810
 Email Senator Lena Taylor



Assembly District 12
 Representative Frederick Kessler
 (608) 266-5813
 Email Representative Frederick Kessler

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4
 US Representative Gwen Moore

Senator Russ Feingold and Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE *EXHIBIT WW 0*

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Michael Melross</i>	<i>2120 E Shorewood Blvd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10</i>
2. <i>Aimee Sellars</i>	<i>755 Sheffield Ct</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Grafton</i>	<i>7/10</i>
3. <i>[Signature]</i>	<i>5069 N Lake Dr</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>WFB</i>	<i>7/10</i>
4. <i>Roger McKeown</i>	<i>617 Waverly Ave Road</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>River Hills</i>	<i>7/10</i>
5. <i>William P. Muthy</i>	<i>814 Chestnut St Wauwatosa WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Wauwatosa</i>	<i>7/10</i>
6. <i>[Signature]</i>	<i>N 28 W 22570 Reschard Wauwatosa, WI 53186</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pewaukee</i>	<i>7/10</i>
7. <i>Jeanette Hinder</i>	<i>303 E Henry Hwy</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Whitefish Bay</i>	<i>7/10</i>
8. <i>Marifrances Cataldi</i>	<i>2516 E. Menlo</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10</i>
9. <i>[Signature]</i>	<i>3436 N. Munn m.w. WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>[unclear]</i>	<i>7/10</i>
10. <i>[Signature]</i>	<i>4385 Alpmo Madison, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10</i>

I, *Katherine Pown* **CERTIFICATION OF CIRCULATOR**, certify:
(Name of circulator)
 I reside at *1500 E. Ulaeln, Fox Point, WI 53207*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/10/10 *[Signature]*
(Signature of circulator)



3436 N Murray Ave
 Milwaukee, WI 53211-2817
 This district determination is based
 on the most recent geographic data
 available for this address.
 This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

P.S
 #9

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 8
 Senator Alberta
 Darling
 (608) 266-5830
 Email Senator Alberta
 Darling

Assembly District 22
 Representative Sandy
 Pasch
 (608) 266-7671
 Email Representative
 Sandy Pasch

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE *EXHIBIT XX* 0

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Mark Hatcher</i>	842 W. Riverview Glendale WI 53209	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Glendale	7/10
2. <i>Susan Hesch</i>	4209 N. Farwell Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
3. <i>John Pacheco</i>	2466 N. O'Malley Milwaukee WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/10
4. <i>Michael Dykme</i>	4763 N Olsen Ave Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
5. <i>Gregory G. G...</i>	2361 N. A. St Milwaukee	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/10
6. <i>Robert W. Taylor</i>	W246 N. 5th St Menom Falls	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Menom Falls, WI	7/10
7. <i>[Signature]</i>	3672 N. 40th Milwaukee, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/10
8. <i>[Signature]</i>	84116	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Milwaukee	7/10
9. <i>James Eisen</i>	3837 N. Crown	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
10. <i>Murad Yanebo</i>	2112 E. Duc Ridge	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Grafton	7/10

CERTIFICATION OF CIRCULATOR

I, Katherine Brown (Name of circulator) certify:

I reside at 1500 E. Ulae Ln Fox Point, WI, 53211
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/10 / 10 (Date) [Signature]
(Signature of circulator)

EXHIBIT XX



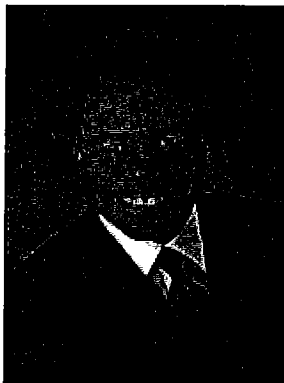
2466 N 1st St
 Milwaukee, WI 53212-2803
 This district determination is based on the most recent geographic data available for this address.
 This address was matched to a Street Address, the center of which is located in the following legislative districts:

P. 7
#3

Wisconsin State Legislature

Wisconsin State Senate

Wisconsin State Assembly



Senate District 6
 Senator Spencer Coggs
 (608) 266-2500
 Email Senator Spencer Coggs



Assembly District 16
 Representative Leon Young
 (608) 266-3786
 Email Representative Leon Young

Please include your mailing address in your email to your legislator.

US Congress

US House of Representatives

US Senate

US Congressional District 4
 US Representative Gwen Moore

Senator Russ Feingold and Senator Herb Kohl

EXHIBIT XX



2361 N 55th St
 Milwaukee, WI 53210-2742
 This district determination is based
 on the most recent geographic data
 available for this address.

P.7
 #5

This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 6
 Senator Spencer
 Coggs
 (608) 266-2500
 Email Senator
 Spencer Coggs

Assembly District 18
 Representative
 Tamara Grigsby
 (608) 266-0645
 Email Representative
 Tamara Grigsby

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

EXHIBIT X1



5672 N 40th St
 Milwaukee, WI 53209-3906
 This district determination is based
 on the most recent geographic data
 available for this address.

P. 7
 #728

This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

Wisconsin State Legislature

Wisconsin State
 Senate

Wisconsin State
 Assembly



Senate District 4
 Senator Lena Taylor
 (608) 266-5810
 Email Senator Lena
 Taylor



Assembly District 11
 Representative Jason
 Fields
 (608) 266-3756
 Email Representative
 Jason Fields

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
 Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT 44

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input checked="" type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Camie Prentice</i>	<i>4416 W. Marlborough</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
2. <i>Amy Wexler</i>	<i>W216 N5156 Taylors Ln</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Men. Falls</i>	<i>2-10</i>
3. <i>[Signature]</i>	<i>1028 E JUNEAU AV.</i> <i>APT 815</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>MILWAUKEE</i>	<i>7-10</i>
4. <i>Elaine Groen</i>	<i>N22 W216878 Knollwood</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Pewaukee</i>	<i>7/10</i>
5. <i>[Signature]</i>	<i>N22 W216878 Knollwood</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Pewaukee</i>	<i>7/10</i>
6. <i>[Signature]</i>	<i>W180 N5747 Mackey Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/11</i>
7. <i>[Signature]</i>	<i>W180 N5747 Mackey Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/11</i>
8. <i>[Signature]</i>	<i>2820 Mt Zion</i> <i>SANESVILLE</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>7/11</i>
9. <i>[Signature]</i>	<i>N5326 1647 Prairie</i> <i>Mt.</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/11</i>
10. <i>Randy D. David</i>	<i>8915 N. Iroquois</i> <i>Bayside WI 53217</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Bayside</i>	<i>7/11</i>

CERTIFICATION OF CIRCULATOR

I, *Kelly L. Herda*, certify: (Name of circulator)

I reside at *8905 N. Iroquois Rd. Bayside WI 53217* (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/11/10 *[Signature]*
(Date) (Signature of circulator)

GAB-168 (Rev. 09/2009) The information on this form is required by §§. 8.15, 8.20, 8.50, Wis. Stats.
This form is prescribed by: Government Accountability Board
212 East Washington Avenue, 3rd Floor
P.O. Box 7984
Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@wi.gov

EXHIBIT YY



1028 E Juneau Ave
 Milwaukee, WI 53202-2933
 This district determination is based
 on the most recent geographic data
 available for this address.

This address was matched to a
 Street Address, the center of which is
 located in the following legislative
 districts:

P.S
#3

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 7
 Senator Jeffrey Plale
 (608) 266-7505
 Email Senator Jeffrey
 Plale



Assembly District 19
 Representative Jon
 Richards
 (608) 266-0650
 Email Representative
 Jon Richards

Please include your mailing address in your
 email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
 District 4
 US Representative
 Gwen Moore

Senator Russ
 Feingold
 and
 Senator Herb Kohl




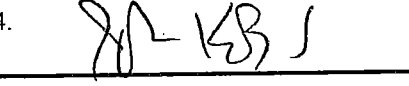
NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT ZZ 0

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. 	627 S 62nd St MILWAUKEE WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City NIKE	7/10
2. 	200 627 S 62nd St Milwaukee, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	7/10
	3700 S Milwaukee St Milwaukee WI 53220	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	7-10
4. 	N 38 W 27281 PARKSIDE Pewaukee WI 53072	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Pewaukee City	7/10
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

I, Leah P. Horn (Name of circulator), certify:

I reside at 4131V 2nd St #480 Milwaukee WI 53203 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/10/10 (Date)  (Signature of circulator)

GAB-168 (Rev. 09/2009) This form is prescribed by: Government Accountability Board 212 East Washington Avenue, 3rd Floor P.O. Box 7984 Madison, WI 53707-7984 608 266-8005 <http://gab.wi.gov> Email: gab@wi.gov

91



3700 S 61st St
 Milwaukee, WI 53220-1955

This district determination is based on the most recent geographic data available for this address.

This address was matched to a Street Address, the center of which is located in the following legislative districts:

P-7
#3

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 3
 Senator Tim Carpenter
 (608) 266-8535
 Email Senator Tim
 Carpenter

Assembly District 7
 Representative Peggy
 Krusick
 (608) 266-1733
 Email Representative
 Peggy Krusick

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4
US Representative
Gwen Moore

Senator Russ
Feingold
and
Senator Herb Kohl



627 S 62nd St

Milwaukee, WI 53214-1855

This district determination is based on the most recent geographic data available for this address.

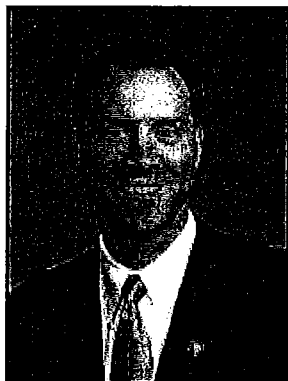
This address was matched to a Street Address, the center of which is located in the following legislative districts:

P.7
182

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 5
Senator Jim Sullivan
(608) 266-2512
Email Senator Jim
Sullivan



Assembly District 13
Representative David
Cullen
(608) 267-9836
Email Representative
David Cullen

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US Senate

US Congressional
District 4
US Representative
Gwen Moore

Senator Russ
Feingold
and
Senator Herb Kohl

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT AAA 0

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Verona Dorman</i>	<i>1205 Oakdale Ct Waukesha WI 5318</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25</i>
2. <i>Veronica Espinoza</i>	<i>PO Box 303 Dousman WI 53118</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Dousman</i>	<i>6-25</i>
3. <i>Carmen Ajello</i>	<i>283 Cardinal Place Pewaukee, WI 53101</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Pewaukee</i>	<i>6-25</i>
4. <i>Paul C. Camacho</i>	<i>6377 Waverly Ct. Jefferson</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Jefferson</i>	<i>6-25</i>
5. <i>Jan Camacho</i>	<i>6377 Waverly St Jefferson</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Jefferson</i>	<i>6-25</i>
6. <i>Elena Perez</i>	<i>1141 Wheelock Ave apt A</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25</i>
7. <i>Tawick Pocz</i>	<i>1141 Wheatport Ave</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25</i>
8. <i>Jody Payne</i>	<i>215 Randall St Waukesha, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25</i>
9. <i>Amy Reich</i>	<i>349 Coolidge Ave #11 Waukesha, WI 53188</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25</i>
10. <i>Vivian K...</i>	<i>516 Summit Ave #6 Waukesha WI 53188</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25</i>

CERTIFICATION OF CIRCULATOR

I, *Daniel Kyle*, certify:

I reside at *9993 W. North Ave #243 Wauwatosa, WI*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6-25-10

[Signature]
(Signature of circulator)



637 Riverview Ct
Jefferson, WI 53549-3006

P-13
4&5

The address information supplied could only be matched to a ZIP code area.

These areas frequently overlap multiple districts. For better results, enter a whole street address or look up your legislator by municipality.

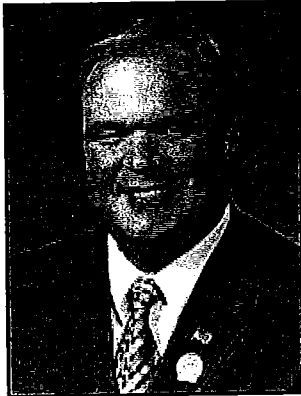
This district determination is based on the most recent geographic data available for this address.

This address was matched to a 9 digit zip code (Zip+4) area, the center of which is located in the following legislative districts:

Wisconsin State Legislature

Wisconsin State
Senate

Wisconsin State
Assembly



Senate District 13
Senator Scott
Fitzgerald
(608) 266-5660
Email Senator Scott
Fitzgerald

Assembly District 37
Representative Andy
Jorgensen
(608) 266-3790
Email Representative
Andy Jorgensen

Please include your mailing address in your email to your legislator.

US Congress

US House of
Representatives

US
Congressional
District 2
US
Representative
Tammy Baldwin

US Senate

Senator Russ
Feingold
and
Senator Herb
Kohl

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT BB

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road. 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1.	1601 River Ln Grafton	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Grafton	7/3/10
2.	Menomonee Falls, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	07/03/10
3.	W157 N5839 CHELSEA DR MENOMONEE FALLS	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/3/10
4.	N47 W2740 Greenfield PEWAUKEE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Pewaukee	7/3/10
5.	W157 N5792 Chelsea Drive Menomonee Falls WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/3/10
6.	Jeff Mitchell NSUM15110 KNOLL TER	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/3/10
7.	Joe Prupas W164 N10609 Tumbulwood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Pewaukee	7/3/10
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, Leah P. Horn, (Name of circulator) _____, certify:
 I reside at 483 N 2nd St #480, Milwaukee WI 53203
 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats. 7/3/10

(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT CCE 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Andrey Krausen</i>	<i>W 186 N 6997 Marcy Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	<i>6/11/10</i>
2. <i>Jol Krausen</i>	<i>W 186 N 6997 Marcy Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	<i>6/11/10</i>
3. <i>John W.</i>	<i>137 Pheasant Run</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	<i>6/11/10</i>
4. <i>Keith Schmitz</i>	<i>2020 R Kenmore Pl.</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	<i>6/11/10</i>
5. <i>Charles J. Yangies</i>	<i>3183 Waterford Ct</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>6/11/10</i>
6. <i>Heidi M. Nida</i>	<i>2109 N 73 St. Wauwatosa WI 53213</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>6/11/10</i>
7. <i>Edy Higgins</i>	<i>2109 N 73 WAWATOSA WI 53213</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>6-11-10</i>
8. <i>Richard T. Cas</i>	<i>667 East Johnson Ave Oconomowoc WI 53066</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>6/11/10</i>
9. <i>Ronald M. Woodh.</i>	<i>5326 W. Lake Dr.</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	<i>6/11/10</i>
10. <i>Elizabeth Grke</i>	<i>120 Hoover Ave Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>6/11/10</i>

CERTIFICATION OF CIRCULATOR

I, Leah P. Horn (Name of circulator), certify:
I reside at 413 N 2nd St #400 Milwaukee WI 53203 (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6/11/10

Leah P. Horn
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT DDD 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Edward K... [Signature]</i>	4756 N. Oakland UPB 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village UPB <input type="checkbox"/> City	7/4/10
2. <i>John E. Fair</i>	7861 N. 46th St	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village BROWN DEER <input type="checkbox"/> City	7/4/10
3. <i>Matt Oster</i>	2700 E. Beaver	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village SHOREWOOD <input type="checkbox"/> City	7/4/10
4. <i>David Oscar Wille</i>	2626 E. Newton	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	7/4/10
5. <i>Jean Champion</i>	4426 N. Sheffield	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	7/4/10
6. <i>M. Sue Armstrong</i>	3909 W. Murray #810	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	7/4/10
7. <i>Dennis Kowalec</i>	9240 N. Bethanne Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Brown Deer <input type="checkbox"/> City	7/8/10
8. <i>Carol Pawlak</i>	7647 N. 44 St Brown Deer	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Brown Deer <input type="checkbox"/> City	7/8/10
9. <i>Lucy Friedrichs</i>	8076 N. 64th St. Brown Deer	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Brown Deer <input type="checkbox"/> City	7/8/10
10. <i>Marita Rotsche</i>	1521 West County Line Rd Rivers Hills	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Rivers Hills <input type="checkbox"/> City	7/8/10

CERTIFICATION OF CIRCULATOR

I, Bernice Popelka (Name of circulator), certify:
I reside at 7415 N. Braunbarn Lane, Glendale, WI 53209 (Circulator's residence - Include number, street, and municipality).

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/13/10

Bernice Popelka

(Signature of Circulator)

(Date)

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT EEGO

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Diela Galk</i>	<i>N 885 WILLOW HILL APT 104</i>	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menom Falls	<i>6-16-10</i>
2. <i>[Signature]</i>	<i>1226 Lombardi way Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	<i>6-16-10</i>
3. <i>Klaryn Bryan</i>	<i>1803 Shepherd Ct #333 Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	<i>6/25/10</i>
4. <i>Seegio Ramirez</i>	<i>1803 Shepherd Ct #333 Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	<i>6/25/10</i>
5. <i>[Signature]</i>	<i>W 239 N 2768 MADISON SUSSEX WI 53089</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Sussex	<i>6/25/10</i>
6. <i>[Signature]</i>	<i>1424 Bedford Ct Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	<i>6/25/10</i>
7. <i>[Signature]</i>	<i>572 N GRAND VIEW</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waukesha	<i>6/25/10</i>
8. <i>[Signature]</i>	<i>122 Harrison Ave. Waukesha, WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	<i>6/25/10</i>
9. <i>[Signature]</i>	<i>501 Wisconsin Ave #203 Waukesha, WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	<i>6/25/10</i>
10. <i>Lorena Nila</i>	<i>2137 B Kensington #10</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Waukesha	<i>6/25/10</i>

I, Sara Graves (Name of circulator) certify:
I reside at N61 W15263 Wigwam Dr - Menomonee Falls (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
6/25/2010 Sara Graves

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT FFF 7

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1.	1965 S. 94th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City W-A	7/10/2010
2.	147 W 2133 Waukegan	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Lisbon	7/10/2010
3.	9266 N. 70th Milwaukee, WI 53227	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7-10-2010
4.	1485 S. 95 Waukegan	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/10/2010
5.	West Waukegan Milwaukee	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/10/2010
6.	1946 S. Whitewater Brookfield, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	7/10/10
7.	1946 S. Whitewater Brookfield, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	7/10/10
8.	451 S. 91st St Milwaukee, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	7/10/10
9.	12520 W. Honey Ln New Berlin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	7-10-10
10.	9425 W. Horizon West Allis	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/10/2010

CERTIFICATION OF CIRCULATOR

I, Leah P. Horn (Name of circulator) certify:

I reside at 413 N 2nd St. #480, Milwaukee WI 53203
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/10/2010

(Date)

(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT GG-6

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. PAUL DEBRAUX	1160 DENKARA AVE. WAUKESHA WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/25/10
2. RANDY THOMAS	W332RD.472 Rtl Oconomowoc WI 53060	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Oconomowoc	6/25/10
3. Don Holtzman	8404 Lakeshore Dr Waukesha WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	4/26/10
4. Hector Angel	1900 Paradise St Waukesha WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-26-10
5. [Signature]	1182 Liveview Dr. Kewaskum, WI 53140	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Kewaskum	6/26/10
6. Cheryl Stark	1611 Dover Dr Waukesha WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-26-10
7. Robert Stark	1611 DOVER DR WAUKESHA, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10
8. Ryan Marguard	1611 DOVER DR. WAUKESHA WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-26-10
9. [Signature]	2002 Rubin Dr WAUKESHA, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Waukesha	6/26/10
10. [Signature]	2025 East Ave Waukesha WI 53189	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Waukesha	6/26/10

CERTIFICATION OF CIRCULATOR

I, Leah Horn _____, certify:
(Name of circulator)

I reside at 413 N 2nd St - Milwaukee _____
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

(Date) _____
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT H H H 10

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Cesar G. Pergoles	1604 Murray Ave. Waukesha WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	06-25-2010
2. [Signature]	446 W. College Ave Waukesha WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-25-10
3. [Signature]	446 W. College Ave Waukesha WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10
[Signature]	2025 S. EAST AVE WAUKESHA, WI 53189	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10
5. D. Hughes	910 Niagara St Waukesha	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10
6. Melissa Hughes	1900 Santa Barbara Dr. Waukesha, WI 53189	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10
7. Nicole [Signature]	1512 B. Camden Ct. Waukesha, WI 53186	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Waukesha	6/26/10
8. Armelle Monson	2702 Summit Ave WAUKESHA WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10
9. Alicia A. [Signature]	1205. P. HOLEY DR WAUKESHA, WI 53186	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6-26-10
10. Carlos J. Rivera	500 N Washington Ave Waukesha, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	6/26/10

I, Leah Horn (Name of circulator) certify:
I reside at 413 N 2nd St - Milwaukee (Circulator's residence - include number, street, and municipality).

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under § 12.13(3)(a), Wis. Stats.

6/26/10 (Date) [Signature] (Signature of circulator)

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NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT III¹⁰

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Christina Lutz</i>	<i>218 W Beech St</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/4/10</i>
2. <i>Jillie Poulakos</i>	<i>1100 W 16949 REVERE LN</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>GERMANTOWN</i>	<i>7/4/10</i>
3. <i>John Poulakos</i>	<i>1100 W 16949 REVERE LN</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>GERMANTOWN</i>	<i>7/4/10</i>
4. <i>Roger Stottmann</i>	<i>200 Deer Ridge RD</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>WEST BEND</i>	<i>7/4/2010</i>
5. <i>Sylvia Adair</i>	<i>1101 W 15945 Santa Fe</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>GERMANTOWN</i>	<i>7/4/2010</i>
6. <i>Douglas D. Wagner</i>	<i>W 241 N 5748 BIRCHWOOD 5455X, WIS 53089</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Sussex</i>	<i>7/4/10</i>
7. <i>Kevin Madson</i>	<i>2150 Sherman Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Singer</i>	<i>7/4/10</i>
8. <i>Carol Lynn</i>	<i>W 169 M 11450 5155 Sycamore</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>GERMANTOWN</i>	<i>7/4/10</i>
9. <i>Rose Tenske</i>	<i>1081 W 16201 Roberthood Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/4/10</i>
10. <i>David Deibert</i>	<i>N 88 W 17991 Christman Menomonee Falls, WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>7/4/10</i>

CERTIFICATION OF CIRCULATOR

I, *DUDLEY C. PALMER*, certify:
(Name of circulator)

I reside at *5111 N BAY RIDGE SCHWITZFISCH BAY, WI*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/4/10 (Date) *Dudley C Palmer*
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT JJJ 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Todd Kolosso</i>	1111 S. 110TH WEST ALLIS, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7-6-10
2. <i>Karl Trever</i>	1419 1672 S 116th St. WEST ALLIS	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WEST ALLIS	7-9-10
3. <i>Kelly Resul</i>	4537 N. Newhall St Shorewood, WI 53211	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Shorewood	7/9/10
4. <i>Shirley</i>	1245 N 67th PARADISE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SUSSEX	7/9/10
5. <i>Nathan Jonelth</i>	2376 N-115 Street Wauwatosa, WI 53226	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	7/9/10
6. <i>Christa Clark</i>	604 N. 59th St Wauwatosa, WI 53212	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/9/10
7. <i>Maria Kostenko</i>	1806 Madison St W	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/9/10
8. <i>Melody Wukmeyer</i>	523 DARWIN DR. Stinger WI 53086	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Stinger	7/9/10
9. <i>MIKE CONWAY</i>	1007 N 124th St C	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City elm GROVE	7/9/10
10. <i>SHANNON WILSON</i>	4519 N Woodburn St Shorewood 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/9/10

I, DANIEL KYIE (Name of circulator), certify:
I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/9/10
(Date)

[Signature]
(Signature of circulator)

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NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT KKK/10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
<i>Mary Wright</i>	2406 E. Lake Bluff	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-8-10
<i>Madeline Winter</i>	2406 E. Lake Bluff	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-8-10
<i>D. P. Bousounis</i>	4408 N. Lake Drive	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
<i>Val U</i>	2117 E Jarvis	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
<i>Breaght Mon</i>	N 65 W 5481 Cedar	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Cedarburg	7/10/10
<i>John D. Neuman</i>	W 51 N 1013 Keep	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Cedarburg	7/10/10
<i>Joanne Kark</i>	1136 Sunset Ln. Grafton WI 53024	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Grafton	7/10/10
<i>John Hayden</i>	N57 W5247 Highland Crossings Circle	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Cedarburg WI 53012	7/10/10
<i>Marlene Rogan</i>	1121 Crestview Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Port Wash. WI 53074	7/10/10
<i>Juliana Rogan</i>	1121 CRESTVIEW DR.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City PORT WASHINGTON	7/10/10

CERTIFICATION OF CIRCULATOR

Sara Graves _____, certify:
(Name of circulator)
I reside at N61 W15263 Wigram Dr. Monomance Falls WI 53051
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/10/10
(Date)

Sara Graves
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT LLL 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road. 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>[Signature]</i>	N87 W18026 Greenway Menomonee Falls	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
2. <i>[Signature]</i>	W159 N9460 Cherokee Menomonee Falls WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	8/20/10
3. <i>[Signature]</i>	N79 W15561 Deerfield Menomonee Falls WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
4. <i>[Signature]</i>	N61 W15333 Wigwam Menomonee Falls WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
5. <i>[Signature]</i>	W180 N7272 Town Hall Rd Menomonee Falls	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
6. <i>[Signature]</i>	W152 N8361 Elm Lane Menomonee Falls	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
7. <i>[Signature]</i>	N81 W1511 Appleton Ave Menomonee Falls, WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
8. <i>[Signature]</i>	N79 W16265 Longwood St Menomonee Falls WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
9. <i>[Signature]</i>	N73 W17331 Wildwood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10
10. <i>[Signature]</i>	N85 W16238 May Ave Menomonee Falls WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/8/10

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator) certify:
I reside at N161 W15263 Wigwam Dr. Menomonee Falls WI 53051
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/8/10

Sara Graves


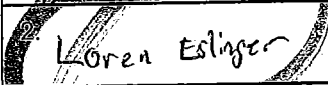


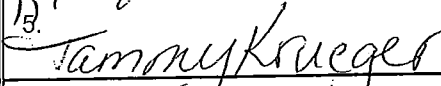

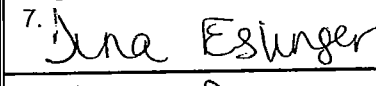

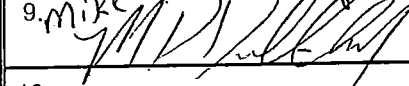

(Signature of circulator)

(Date)

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

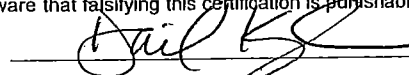
THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
	2347 N. 64 th Street Wauwatosa	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/11/2010
	3064 Cone View Ln Waukesha	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Waukesha	7/11/2010
	2344 S. 77 th St. West Allis WI 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Allis	7/11/10
	NS2 WISCONSIN ELRIO FR. MEMO. FALLS	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/11/10
	1301 OAK CT. PORT WASHINGTON, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Port Washington	7/11/10
	19795 Heron Pass Brookfield, WI 53045	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	7/11/10
	3064 Cone View Ln WAUKESHA 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	7/11/10
	N17W27310 Lakefield Dr. Pewaukee WI 53072	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Pewaukee	7/11/10
	N83W18025 LeMans Dr. Menomonee Falls, WI 53071	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/11/10
	4711 N Elkhart Ave Whitefish Bay, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/11/10

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle, certify:
 (Name of circulator)
 I reside at 9993 W. North Ave #243 Wauwatosa, WI
 (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/11/10
 (Date)


 (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT ANN 10

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Danielle Lyle</i>	<i>500 N Washington Ave Waukesha WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
2. <i>James V. Palka</i>	<i>539 W 27833 Geneva Rd. Waukesha, WI 53189</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
3. <i>DARREL SAUGARD</i>	<i>7908 HUBERTUS RD BERMANTOWN WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>German town</i>	<i>6-26-10</i>
4. <i>Arthur M...</i>	<i>2453 SPARTAN RD WAUKESHA, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
5. <i>Yvonne Dale</i>	<i>1203A Woodbury Cir Waukesha, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
6. <i>Ann Zile</i>	<i>1203A Woodbury Cir Waukesha, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
7. <i>Beth Giese</i>	<i>1927 Harvest Lane Waukesha, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
8. <i>Tom Giesse</i>	<i>1927 Harvest Lane Waukesha WI 53146</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
9. <i>Ann Lemus</i>	<i>1536 DUND LN Waukesha WI 53189</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
10. <i>Sue Smith</i>	<i>110 Corrina Blvd</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/26/10</i>

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle, certify:
I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6/26/10
(Date)

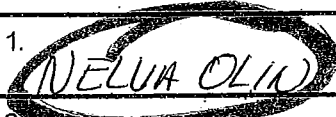


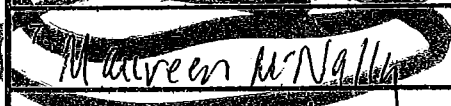

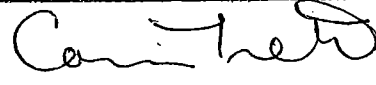
[Signature]
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT 00010

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. 	9119 N. White Oak Ln Bayside WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Bayside	6/12/10
2. Kelvin Olin	9119 N. White Oak Ln Bayside WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Bayside	6/14/10
3. Terri Jelinske Kense	130 E Lancaster Wauwatosa WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City White Fish Bay	7/8/10
4. Katie Anderson	8599 N 71st St Wauwatosa, WI 53218	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/8/10
5. 	3512 N. Maryland Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/8/10
6. 	2657 N. Mohawk Ave Glendale WI 53217	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Glendale	7/8/10
7. 	6029 N Shoreland Whitefish Bay, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/8/10
8. Nathanael Matthe	8030 N. Mohawk Rd Fox Point, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Fox Point	7/8/10
9. 	4475 N. Woodruff WFB, WI 53217	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/8/10
10. 	4475 N. Woodruff Whitefish Bay, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/8/10

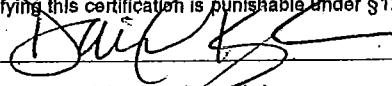
CERTIFICATION OF CIRCULATOR

I, Daniel Kyle, certify:

I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/8/10
(Date)


(Signature of circulator)

43

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT PPP

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>John Beck</i>	8905 N. Iroquois Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BAYSIDE	7/4/2010
2. <i>Chadler Mesala</i>	8905 N. Iroquois Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BAYSIDE	7/4/2010
3. <i>Liche Robinson</i>	5001 N. UNIVERSITY BLVD.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Whitefish Bay	7/4/2010
4. <i>Malley White</i>	4400 30 N. Macanick Glendale, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input checked="" type="checkbox"/> City Glendale	7/6/10
5. <i>Kelly G. Herda</i>	8905 N. Iroquois Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BAYSIDE	7/9/10
6. <i>Wanda Johnson</i>	3775 E. Dayton Ave 44 Farwell with box 5322	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City St. Francis	7/11/10
7. <i>Henry Althoen</i>	6919 N. Milw. Riv. Park 53209	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Glendale	7-11-10
8. <i>Elinor Kostic</i>	2901 E. Lake Bluff Blvd 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-11-10
9. <i>Cynthia Petrick</i>	3837 N Farwell 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7-11-10
10. <i>Wendy Sale</i>	2800 E. Menk Blvd Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/11/10

CERTIFICATION OF CIRCULATOR

I, Kelly L. Herda (Name of circulator) certify:
I reside at 8905 N. Iroquois Rd. Bayside, WI 53217 (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/11/10 (Date) *Kelly L. Herda* (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT QQ Q

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road. 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Maria Kuhlmann</i>	<i>3320 N Prospect Ave Shorewood, WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
2. <i>Kimmy Herder</i>	<i>3945 N Prospect Ave Shorewood WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>2/20/10</i>
3. <i>H. Brown</i>	<i>1500 E. Lilac Ln</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Fox Point</i>	<i>7/10/10</i>
4. <i>ROBERT WOSSEWICZ</i>	<i>2514 E. Shorewood Dr Shorewood 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
5. <i>Kris Travers</i>	<i>4551 N. Maryland Shorewood</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
6. <i>R. Eidenberg</i>	<i>854 W. La Salle</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Glendale</i>	<i>7/10/10</i>
7. <i>E. Polonsky</i>	<i>4812 N Woodhill Ave Shorewood, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
8. <i>A. W. ...</i>	<i>1260 N Prospect Milwaukee WI 53212</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Milwaukee</i>	<i>7/10/10</i>
9. <i>April ...</i>	<i>4450 N. Prospect Shorewood, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>
10. <i>[Signature]</i>	<i>4450 N. Prospect Ave Shorewood WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Shorewood</i>	<i>7/10/10</i>

CERTIFICATION OF CIRCULATOR

I, *Katherine Proun* (Name of circulator) certify:
 I reside at *1500 E. Lilac Ln, Fox Point, WI 53217*
 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/10/10 (Date) *[Signature]* (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT RRR

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>José Morales</i>	<i>633 Dapkinst St Delafield WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>DELAFIELD</i>	<i>6/25/10</i>
2. <i>Guadalupe Alonso</i>	<i>633 Dapkinst St Delafield WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
3. <i>Laurie Turkmann</i>	<i>1400 E. North St. Waukesha, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
4. <i>Billy S. Andrews</i>	<i>1400 E. North St. Waukesha, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
5. <i>Jacqueline White</i>	<i>609 S GRANDVIEW WAUKESHA, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
6. <i>John Hintz</i>	<i>609 S. GRANDVIEW WAUKESHA, WI 53188</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25-10</i>
7. <i>Michael Hamberlin</i>	<i>9901 West Hampton Ave Milwaukee, WI</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>MKE</i>	<i>6-25-10</i>
8. <i>Wayne Tokye</i>	<i>100 Corrina Blvd 203 Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25-10</i>
9. <i>Fred A. Cruz</i>	<i>100 Corrina Blvd. 203 Waukesha, WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-25-10</i>

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle (Name of circulator), certify:
I reside at 9993 W. North Ave #243 Wauwatosa, WI (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

(Date) 6/25/10
Daniel Kyle (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE *EXHIBIT 555* 8

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Aleyda Stewart</i>	<i>2816 N. University Drive, Waukesha</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>waukesha</i>	<i>06/25/2010</i>
2. _____	WI 53188	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____
3. <i>Jenny Rodriguez</i>	<i>225 Frame Ave Waukesha 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/2010</i>
4. <i>Joe Rodriguez</i>	<i>225 Frame Ave Waukesha 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
5. <i>Joe Rodriguez</i>	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	<i>6/25/2010</i>
6. <i>Margarita Olallo</i>	<i>1202 Raymond St Waukesha, 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/2010</i>
7. <i>Specioza oblagira</i>	<i>349 Howell Ave Waukesha, WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>waukesha</i>	<i>6/25/10</i>
8. <i>Pedro Gomez</i>	<i>330 Farnett Ct Waukesha</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>waukesha</i>	<i>6/25/10</i>
9. <i>Liliana Garcia</i>	<i>4201 Washington Ave Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/25/10</i>
10. <i>Paul Gutierrez</i>	<i>147 Randall St Waukesha WI 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>waukesha</i>	<i>6/25/10</i>

I, *Daniel Kyle* **CERTIFICATION OF CIRCULATOR** _____ certify:

I reside at *9993 W. North Ave #2103 Wauwatosa, WI*
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6/25/10 _____
(Date) (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT TTT 7

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Gordon D. Meina</i>	5761 N. SANTA MONICA	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Whitefish Bay</i> <input type="checkbox"/> City	7/12/10
2. <i>Kate Neitzel</i>	5747 N. SANTA MONICA	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Whitefish Bay</i> <input type="checkbox"/> City	7/12/10
3. <i>Susan McKay</i>	5565 N. Kent Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Whitefish Bay</i> <input type="checkbox"/> City	7/12/10
4. <i>Syed Ali</i>	5565 N KENT AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Whitefish Bay</i> <input type="checkbox"/> City	7/12/10
5. <i>Jennifer Hoffmann Jones</i>	1116 E Sylvan Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Whitefish Bay</i> <input type="checkbox"/> City	7/12/10
6. <i>Robert S. Cizak</i>	1122 E. SYLVAN AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Whitefish Bay</i> <input type="checkbox"/> City	7/12/10
7. <i>Julie [unclear]</i>	524 1/2 N. Shoreland Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <i>Whitefish Bay</i> <input type="checkbox"/> City	7/12/10
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, *Trischa Loebel*, (Name of circulator) certify:
I reside at *5550 N. Kent Ave. Whitefish Bay*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/12/10
(Date)

Trischa Loebel
(Signature of circulator)

GAB-168 (Rev. 09/2009) The information on this form is required by §§ 8.15, 8.20, 8.50, Wis. Stats.
This form is prescribed by:
Government Accountability Board
212 East Washington Avenue, 3rd Floor
P.O. Box 7984
Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@wi.gov

NOMINATION PAPER FOR PARTISAN OFFICE EXHIBIT UUU6

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road. 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. J. Patterson	517 WINDSOR WOOD, WI 53184	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waukesha	7/11/10
2. H. Weiss	N52W14300 Thornhill Dr Men Falls, WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/11/10
MARIE MYLES	W134N6614 LILLY CREEK DR MEN. FALLS WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Men Falls <input type="checkbox"/> City Menomonee Falls	7/11/10
4. K. Myles	W134 N6614 Lilly Creek Menom. Falls, WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Menom. Falls <input type="checkbox"/> City	7/11/10
5. F. Hatchell	W152N7789 Countryside Dr Men. Falls, WI 53051	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Menomonee Falls	7/13/10
6. J. Smith	W140 N. 8194 Lilly Creek Men. Falls WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Menomonee Falls	7/13/10
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, Sara Graves (Name of circulator), certify:
I reside at N61 W15263 Wigwam Dr, Menomonee Falls WI 53051 (Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/13/10
(Date)

Sara Graves
(Signature of circulator)

EXHIBIT VVV5

NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Rebekah Progn</i>	<i>N46W23777 Woods Edge Ct</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pewaukee</i>	<i>7/11/10</i>
2. <i>Eric Progn</i>	<i>N46W23777 Woods Edge Ct</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pewaukee</i>	<i>7/11/10</i>
3. <i>Judy Kitt</i>	<i>1788 Laura Ln Pt Wash WI 53074</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Pt Wash.</i>	<i>7/11/10</i>
4. <i>Andre King</i>	<i>3543 S Moorland Rd</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>New Berlin</i>	<i>7/11/10</i>
5. <i>Tom Johns</i>	<i>10529 W. Garland Ave Wauwatosa 53226</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Wauwatosa</i>	<i>07/11/10</i>
6. <i>Val Kid</i>	<i>20035 W Greenfield</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>New Berlin</i>	<i>07/11/10</i>
7. <i>John St. Stocker</i>	<i>N110 W15438 CATSKILL LN GERMANTOWN</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>GERMANTOWN</i>	<i>7/11/10</i>
8. <i>Alice Madlaff</i>	<i>4230 N. Oakland Ave #20 Shorewood WI</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>SHOREWOOD</i>	<i>7/11/10</i>
9. <i>Don L. Jones</i>	<i>5253 W. Westfield MEQUON</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>MEQUON</i>	<i>7/11/10</i>
10. <i>FRED KEDERNA</i>	<i>5253 W WESTFIELD MEQUON</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>MEQUON</i>	<i>7/11/10</i>

CERTIFICATION OF CIRCULATOR

I, Daniel Kyle, certify:
I reside at 9993 W. North Ave #243 Wauwatosa, WI
(Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/11/10
(Date)

Daniel Kyle
(Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE *EXHIBIT WW 4*

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route), and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county) _____		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>[Signature]</i>	<i>Andrea Davato N46 W2850 Willow Brook Ct Hartland</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Dalefield Hartland</i>	<i>6/26/10</i>
2. <i>TERRY FOST</i>	<i>2809 Chancery Ln Waukesha Wis</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6-26-10</i>
3. <i>[Signature]</i>	<i>PO BOX 135 Pewaukee 53072</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Waukesha</i>	<i>6/26/2010</i>
4. <i>Marlene Ortiz</i>	<i>1021 E. Roberta Waukesha 53186</i>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <i>Waukesha</i>	<i>6/26/10</i>
5.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, *Daniel Kyle*, certify:
(Name of circulator)
 I reside at *9993 W. North Ave #243 Wauwatosa, WI*
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

6/26/10 (Date) *[Signature]* (Signature of circulator)

GAB-168 (Rev. 09/2009) The information on this form is required by §§. 8.15, 8.20, 8.50, Wis. Stats.
 This form is prescribed by: Government Accountability Board
 212 East Washington Avenue, 3rd Floor
 P.O. Box 7984
 Madison, WI 53707-7984 608 266-8005
<http://gab.wi.gov> Email: gab@m.gov

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT XXX 0

Candidate's name; no titles may be used Todd Kolosso		Street, fire, or rural route number, box number (if rural route); and name of street or road 2226 E Edgewood Ave		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. Evelyn Deering	5901 W. Brown Deer Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brown Deer	7/10
2. Marie [unclear]	3909 N. Murray Ave #104	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
3. Elaine Spiller	3715 N. Morris	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
4. Eric Gal	3733 N. Morris	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
5. K. Brady	4545 N. Sheffield Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
6. E. Liew	4076 N. Danner Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
7. M. Nelson	2618 E. Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
8. R. Sma	3915 N. Lake Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
9. [unclear]	1600 E. River Park Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10
10. J. [unclear]	3909 N. Murray Ave Milw	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	7/10

I, Katherine Probst certify: (Name of circulator)
I reside at 1500 E. Lilac Ln, OX Point, WI 53217 (Circulator's residence - include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.
7/10/10 (Date)
[Signature] (Signature of circulator)

NOMINATION PAPER FOR PARTISAN OFFICE

EXHIBIT 444 7

Candidate's name; no titles may be used. Todd Kolosso		Street, fire, or rural route number; box number (if rural route); and name of street or road 2226 Edgewood Ave.		Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Shorewood <input type="checkbox"/> City	
Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> general <input type="checkbox"/> special	Election date 11/02/2010	Name of Party or Statement of Principle (5 words or less) Democratic
Title of office United States Congressional Representative		District or Jurisdiction <input checked="" type="checkbox"/> District number 5 <input type="checkbox"/> Jurisdiction (county)		Name of jurisdiction or district in which candidate seeks office 5th Congressional District	

I, the undersigned, request that the candidate, whose name and address are listed above, be placed on the ballot at the election described above as a candidate representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Cameron Tracy</i>	1930 Menomonee Falls wa	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/5/10
2. <i>[Signature]</i>	1730 Menomonee Falls Pkwy	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/5/10
3. <i>Tom Hobe</i>	7909 W NORTH	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUWATOSA	7/5/10
4. <i>Joe K Ke</i>	7437 W. North Oak	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wauwatosa	7/5/10
5. <i>Bill Smith</i>	1103 Moore Ave WB	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City West Bend	7/5/10
6. <i>Joseph J. Janczowski</i>	7904 W. NORTH AVE, APT. 1 WAUWATOSA, WI 53213	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUWATOSA WI, 53213	7/5/10
7. <i>Frank Kwaszabek</i>	13505 West Square Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City New Berlin	7/5/10
8.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, FRANK S. MILWAUKEE, certify:
(Name of circulator)
I reside at 710 Oak Ridge Ct, Waukesha, WI 53188
(Circulator's residence - Include number, street, and municipality.)

I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under §12.13(3)(a), Wis. Stats.

7/5/10
(Date)

Frank S. Kwaszabek
(Signature of circulator)

CONGRESSIONAL DISTRICT 5 EXHIBIT ZZZ

