

FOR OFFICE USE ONLY

Declaration of Candidacy

School Board Candidates

(See instructions for preparation on back)

Is this an amendment?

Yes (if you have already filed a DOC for this election)

No (if this is the first DOC you have filed for this election)

I, Sam Hughes, being duly sworn, state that
Candidate's name

I am a candidate for the office of School Board Member Elm Grove School District School Board At-Large
Include seat number or name of apportioned area, if applicable

and, at the time of filing this document, I will meet the applicable age, citizenship, residency and voting qualification requirements, if any, prescribed by the constitutions and laws of the United States and the State of Wisconsin, and that I will otherwise qualify for office, if nominated and elected.

I have not been convicted of a felony in any court within the United States for which I have not been pardoned.¹

My present address, including my municipality of residence for voting purposes is:

14050	St. George Ct	Elm Grove, WI	53122	Town of <input type="checkbox"/>	Village of <input checked="" type="checkbox"/>	City of <input type="checkbox"/>	Elm Grove
House or fire no.	Street Name	Mailing Municipality and State	Zip code	Municipality of Residence for Voting			

My name as I wish it to appear on the official ballot is as follows:

Sam Hughes

(Any combination of first name, middle name or initials with surname. A nickname may replace a legal name.)

STATE OF WISCONSIN

ss.

County of Waukesha
(County where oath administered)

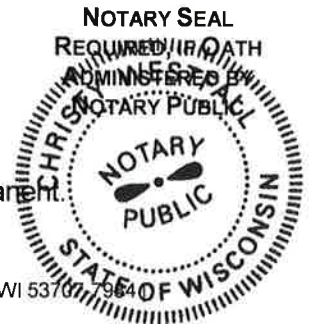
[Signature]
(Signature of candidate)

Subscribed and sworn to before me this 3 day of January, 2023.

[Signature]
(Signature of person authorized to administer oaths)

Notary Public or other official _____
(Official title, if not a notary)

If Notary Public: My commission expires 10/27/2024 or is permanent.
(date commission expires)



¹ A 1996 constitutional amendment bars any candidate convicted of a misdemeanor which violates the public trust from running for or holding a public office. However, the legislature has not defined which misdemeanors violate the public trust. A candidate convicted of any misdemeanor is not barred from running for or holding a public office until the legislature defines which misdemeanors apply.

Instructions for Completing the Declaration of Candidacy

All candidates seeking ballot status for election to school district office in the State of Wisconsin must properly complete and file a **Declaration of Candidacy**. This form must be **ON FILE** with the proper school district clerk no later than the deadline for filing nomination papers or the candidate's name will not appear on the ballot. A facsimile will be accepted if the FAX copy is received by the school district clerk no later than the filing deadline **and** the signed original declaration is received by the school district clerk with a postmark no later than the filing deadline.

Information to be provided by the candidate:

- Type or print your name on the first line.
- The title of the office and **any seat number or apportioned district** for which you are seeking election must be inserted on the second line.
- **Felony convictions: Your name cannot appear on the ballot if you have been convicted of a felony in any court in the United States for which you have not been pardoned. Please see footnote on page 1 for further information with respect to convictions for misdemeanors involving a violation of public trust. These restrictions only apply to candidates for state and local office.**
- Your current address, including your municipality of residence for voting purposes, must be inserted on the fourth line. This must include your entire mailing address (**street and number, municipality where you receive mail**) and the name of the municipality in which you reside and vote (town, village, or city of). If your address changes before the election, an amended Declaration of Candidacy must be filed with the School District Clerk. Wis. Stat. §.8.21.
- Type or print your name on the fifth line as you want it to be printed on the official ballot. You may use your full legal name, former surname, or any combination of first name, middle name, and initials, surname or nickname with last name.

Note: The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as "Red" or "Skip" are permitted, but names which have an apparent electoral purpose or benefit, such as "Lower taxes," "None of the above" or "Lower Spending" are not permitted. It is also not permissible to add nicknames in quotes or parentheses between first and last names. For example, John "Jack" Jones or John (Jack) Jones are not acceptable, but John Jones, Jack Jones or John Jack Jones are acceptable.

This form must be sworn to and signed in the presence of a notary public or other person authorized to administer oaths, such as a county, municipal or school district clerk. Wis. Stat. §§ 8.21(2), 887.01(1).

Information to be provided by the person administering the oath:

- The county where oath was administered.
- The date the Declaration of Candidacy was signed and the oath administered.
- The signature and title of the person administering the oath. If signed by a notary public, the date the notary's commission expires must be listed, and *the notary seal is required*.

All school district candidates must file this form with the appropriate school district clerk no later than the deadline for filing nomination papers. Wis. Stats. §§ 8.10 (5), 8.15 (4)(b), 8.20 (6), 8.21, 8.50 (3)(a), 120.06 (6)(b).



CAMPAIGN FINANCE REGISTRATION STATEMENT —
 LOCAL CANDIDATE COMMITTEE
 STATE OF WISCONSIN

1. Is this an Amendment? No Yes

SECTION A: GENERAL INFORMATION

A1. Committee Name (Required for all Candidates - must be included in disclaimer on all communications)

Sam For Elm Brook

A2. Email

Sam@SamForElmBrook.com

A3. Phone

414-331-0397

A4. Mailing Address

14050 St. George Ct

A5. City

Elm Grove

A6. State

WI

A7. Zip

53122

Depository Institution Information

A8. Institution Name

Town Bank

A9. Street Address

13150 Watertown Plank Rd

A10. City

Elm Grove

A11. State

WI

A12. Zip

53122

Treasurer/Administrator Information

A13. Name

David Leverenz

A14. Email

David.Leverenz@yahoo.com

A15. Phone

262-~~232~~-2599

A16. Mailing Address

4470 Hidden Creek Trail

A17. City

Brookfield

A18. State

WI

A19. Zip

53005

Other Officers (Optional)

A20. Name

A21. Title

A22. Email

A23. Phone

A24. Name

A25. Title

A26. Email

A27. Phone

Filing Exemption

Registrants which do not anticipate accepting or making contributions, making disbursements, or incurring obligations in an aggregate amount exceeding \$2,500 in a calendar year may claim an exemption from filing campaign finance reports. This exemption applies until the registrant exceeds the \$2,500 aggregate activity threshold, amends its registration, or is terminated.

A28. Exemption Affirmation

Yes, this registrant is eligible for exemption.

No, this registrant is not eligible for exemption.

SECTION B: CANDIDATE INFORMATION

B1. Office Sought (include District/Branch)

Elm Brook School District

School Board At-Large

B2. Political Party

B3. Election Date

April 4, 2023

Candidate Information

B4. Name

Sam Hughes

B5. Email

Sam@SamForElmBrook.com

B6. Phone

414-331-0397

B7. Mailing Address

14050 St. George Ct.

B8. City

Elm Grove

B9. State

WI

B10. Zip

53122

Second Candidate Committee

An individual who holds a state or local elective office may establish a second candidate committee to pursue another state or local office.

B11. Is this your only registered candidate committee in Wisconsin?

Yes, this is my only candidate committee in Wisconsin.

No, this is my second candidate committee in Wisconsin.

B12. Other Office Held or Sought (include District/Branch) Only complete B12 if you responded "No" to B11.

COPY w/
treas. signature

SECTION C: CERTIFICATION

Accurate Information

I certify that I am an authorized representative of the candidate committee and that to my knowledge all of the information contained within this registration is true, correct, and complete.

Timely Amendments

I am aware of the requirement to amend this registration statement within 10 days of any change of information contained within, including any change to the candidate committee's eligibility for exemption from campaign finance reporting.

Records Retention

I acknowledge the requirement to maintain the records of the candidate committee in an organized and legible manner for three years from the close of the most recent contribution limit period (June 30 following the April election, 12/31 following the November election).

Continuing Compliance

I acknowledge that I am required to continue to comply with all applicable requirements under Chapter 11 of the Wisconsin Statutes until this registration is terminated. I understand that I am not released from any liability simply because the election date has passed.

Treasurer

C1. Printed Name	C2. Signature	C3. Date
David Levenenz		1/3/23
Candidate		
C4. Printed Name	C5. Signature	C6. Date
Sam Hughes		1/3/2023

Form Instructions

Candidates must complete all sections A, B, and C.

Item 1. Is this an amendment? Have you registered with this local clerk to run for office in a prior election?

Item A1: Committee Name. All candidates are required to register a committee. It is not required that the name include the candidate's name, but it is recommended. This committee name is required to be part of the disclaimer on all communications with express advocacy: 'Paid for by ...'

A28: Exemption. Candidates claiming exemption may not have more than \$2,500 of activity, in the aggregate per year. In a calendar year, if you raise \$1,600 and spend \$1,000 you have \$2,600 of aggregate activity and are not eligible to claim exemption.

Depository Institution Information. All candidates must designate a depository institution. While it is recommended that all candidates have a designated campaign depository account, candidates who will serve as their own treasurer may designate a single personal account to serve as the committee depository account while claiming a filing exemption and may intermingle personal and campaign funds (Wis. STAT. § 11.0201(2)(b)).

Treasurer Information. Each committee must appoint a treasurer. Any adult may serve as a treasurer. A candidate may serve as his or her own treasurer. If a candidate is serving as their own treasurer, please indicate 'Self' or 'Candidate', you do not need to list your complete name, address and contact information here, that will be listed in section B.

Section B: Candidate Information

B1. Be sure to include the name of the county, municipality, or school district. There are 72 counties with county supervisors, 100's of school boards, and 1000's of municipal boards.

B2. Party - NA or None for nonpartisan offices (April); Democrat, Republican, Constitution, Green, Independent, or other ballot status party for partisan (fall) primary/election.

Section C: Certification. All candidates must complete section C. If the candidate is serving as their own treasurer, they would only need to sign once, as either the candidate or treasurer.



**CAMPAIGN FINANCE REGISTRATION STATEMENT —
LOCAL CANDIDATE COMMITTEE
STATE OF WISCONSIN**

1. Is this an Amendment? No Yes

SECTION A: GENERAL INFORMATION

A1. Committee Name (Required for all Candidates - must be included in disclaimer on all communications)

Sam For Elm Brook

A2. Email

Sam@SamForElmBrook.com

A3. Phone

414-331-0397

A4. Mailing Address

14050 St. George Ct

A5. City

Elm Grove

A6. State

WI

A7. Zip

53122

Depository Institution Information

A8. Institution Name

Town Bank

A9. Street Address

13150 Watertown Plank Rd

A10. City

Elm Grove

A11. State

WI

A12. Zip

53122

Treasurer/Administrator Information

A13. Name

David Leverenz

A14. Email

DavidC.Leverenz@yahoo.com

A15. Phone

262-~~232~~-2599

A16. Mailing Address

4470 Hidden Creek Trail

A17. City

Brookfield

A18. State

WI

A19. Zip

53005

Other Officers (Optional)

A20. Name

A21. Title

A22. Email

A23. Phone

A24. Name

A25. Title

A26. Email

A27. Phone

Filing Exemption

Registrants which do not anticipate accepting or making contributions, making disbursements, or incurring obligations in an aggregate amount exceeding \$2,500 in a calendar year may claim an exemption from filing campaign finance reports. This exemption applies until the registrant exceeds the \$2,500 aggregate activity threshold, amends its registration, or is terminated.

A28. Exemption Affirmation

Yes, this registrant is eligible for exemption.

No, this registrant is not eligible for exemption.

SECTION B: CANDIDATE INFORMATION

B1. Office Sought (include District/Branch)

Elm Brook School District

School Board At-Large

B2. Political Party

B3. Election Date

April 4, 2023

Candidate Information

B4. Name

Sam Hughes

B5. Email

Sam@SamForElmBrook.com

B6. Phone

414-331-0397

B7. Mailing Address

14050 St. George Ct.

B8. City

Elm Grove

B9. State

WI

B10. Zip

53122

Second Candidate Committee

An individual who holds a state or local elective office may establish a second candidate committee to pursue another state or local office.

B11. Is this your only registered candidate committee in Wisconsin?

Yes, this is my only candidate committee in Wisconsin.

No, this is my second candidate committee in Wisconsin.

B12. Other Office Held or Sought (include District/Branch) Only complete B12 if you responded "No" to B11.

SECTION C: CERTIFICATION

Accurate Information

I certify that I am an authorized representative of the candidate committee and that to my knowledge all of the information contained within this registration is true, correct, and complete.

Timely Amendments

I am aware of the requirement to amend this registration statement within 10 days of any change of information contained within, including any change to the candidate committee's eligibility for exemption from campaign finance reporting.

Records Retention

I acknowledge the requirement to maintain the records of the candidate committee in an organized and legible manner for three years from the close of the most recent contribution limit period (June 30 following the April election, 12/31 following the November election).

Continuing Compliance

I acknowledge that I am required to continue to comply with all applicable requirements under Chapter 11 of the Wisconsin Statutes until this registration is terminated. I understand that I am not released from any liability simply because the election date has passed.

Treasurer

C1. Printed Name	C2. Signature	C3. Date

Candidate

C4. Printed Name	C5. Signature	C6. Date
SAM Hughes		1/3/2023

Form Instructions

Candidates must complete all sections A, B, and C.

Item 1. Is this an amendment? Have you registered with this local clerk to run for office in a prior election?

Item A1: Committee Name. All candidates are required to register a committee. It is not required that the name include the candidate's name, but it is recommended. This committee name is required to be part of the disclaimer on all communications with express advocacy: 'Paid for by ...'

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Section B: Candidate Information

B1. Be sure to include the name of the county, municipality, or school district. There are 72 counties with county supervisors, 100's of school boards, and 1000's of municipal boards.

B2. Party - NA or None for nonpartisan offices (April); Democrat, Republican, Constitution, Green, Independent, or other ballot status party for partisan (fall) primary/election.

Section C: Certification. All candidates must complete section C. If the candidate is serving as their own treasurer, they would only need to sign once, as either the candidate or treasurer.



CAMPAIGN FINANCE REGISTRATION STATEMENT

STATE OF WISCONSIN

Note: An amended registration statement must be filed within 10 days of any changes in information.

1. Is this an Amendment? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, please enter your committee number:	Committee Number
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SECTION A: GENERAL INFORMATION

A1. Candidate Committee/Committee/Conduit Name Sam For Elmbrook		A2. Registrant Type (Choose One) <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Referendum <input type="checkbox"/> Recall <input type="checkbox"/> Conduit <input type="checkbox"/> Political Action (PAC) <input type="checkbox"/> Independent Expenditure (IEC) <input type="checkbox"/> Political Party <input type="checkbox"/> Legislative Campaign Committee	
A3. Email Sam@SamForElmbrook.com	A4. Phone 414-331-0397		
A5. Mailing Address 14050 St. George Ct	A6. City Elm Grove	A7. State WI	A8. Zip 53122
Depository Institution Information			
A9. Institution Name Town Bank	A10. Street Address 13150 Watertown Plank Rd	A11. City Elm Grove	A12. State WI
A13. Zip 53122			
Treasurer/Administrator Information			
A14. Name David Leverenz	A15. Email DavidC.Leverenz@yahoo.com	A16. Phone 262-232-2599	
A17. Mailing Address 4470 Hidden Creek Trail	A18. City Brookfield	A19. State WI	A20. Zip 53005
Other Officers (Optional) <i>Independent and local non-partisan candidates: Indicate by an asterisk (*) which officers are authorized to fill a vacancy in nomination due to death of candidate.</i>			
A21. Name	A22. Title	A23. Email	A24. Phone
A25. Name	A26. Title	A27. Email	A28. Phone
Filing Exemption <i>Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.</i>		A29. Exemption Affirmation <input type="checkbox"/> Yes, this registrant is eligible for exemption <input checked="" type="checkbox"/> No, this registrant is not eligible for exemption	

SECTION B: CANDIDATE COMMITTEES

B1. Office Sought (include District/Branch) Elmbrook School Board At Large	B2. Political Party	B3. Election Date April 4, 2023	
Candidate Information			
B4. Name Sam Hughes	B5. Email Sam@SamForELMBROOK.com	B6. Phone 414-331-0397	
B7. Mailing Address 14050 St. George Ct	B8. City Elm Grove	B9. State WI	B10. Zip 53122
Second Candidate Committee <i>An individual who holds a state or local elective office may establish a second candidate committee to pursue another state or local office.</i>	B11. Is this your only registered candidate committee in Wisconsin? <input checked="" type="checkbox"/> Yes, this is my only candidate committee in Wisconsin <input type="checkbox"/> No, this is my second candidate committee in Wisconsin		
B12. Other Office Held or Sought (include District/Branch) Only complete B12 if you responded "No" to B11.			

SECTION C: RECALL COMMITTEES

C1. Name of Official Subject to Recall	C2. Office of Official Subject to Recall	C3. <input type="checkbox"/> Support <input type="checkbox"/> Oppose
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CAMPAIGN FINANCE REGISTRATION STATEMENT

STATE OF WISCONSIN

Note: An amended registration statement must be filed within 10 days of any changes in information.

SECTION D: PAC, IEC, AND CONDUITS

D1. Sponsoring Organization	D2. Email	D3. Phone		
D4. Mailing Address	D5. City	D6. State	D7. Zip	

SECTION E: POLITICAL PARTY & LEGISLATIVE CAMPAIGN COMMITTEES

E1. Political Party (Name candidates appear under on a ballot)		E2. Does the Committee have a Segregated Fund? <input type="checkbox"/> No <input type="checkbox"/> Yes		
Segregated Fund Depository Institution Information (if applicable)				
E3. Institution Name	E4. Street Address	E5. City	E6. State	E7. Zip

SECTION F: REFERENDA COMMITTEES

F1. Nature of Referendum (if applicable)	F2. <input type="checkbox"/> Support <input type="checkbox"/> Oppose
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SECTION G: CERTIFICATION

Accurate Information

I certify that I am an authorized representative of the registrant and that to my knowledge all of the information contained within this registration is true, correct, and complete.

Timely Amendments

I am aware of the requirement to amend this registration statement within 10 days of any change of information contained within, as well as the requirement to register within 10 days of meeting the requirements to register under Chapter 11 of Wisconsin Statutes.

Records Retention

I further acknowledge the requirement to maintain the records of the registrant in an organized and legible manner for three years from the date of the most recent election in which this registrant participated.

Ongoing Compliance

This registrant shall continue to maintain its registration and comply with all applicable reporting requirements under Chapter 11 of Wisconsin Statutes.

Treasurer/Administrator

G1. Printed Name David Leverenz	G2. Signature 	G3. Date 1/2/23
Candidate (if applicable)		
G4. Printed Name Sam Hughes	G5. Signature 	G6. Date 1/2/2023

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number, box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required) Do not use primary date.
 Town
 Village
 City
 Elm Grove

Title of office (required)
Board of Education

State (required)
WI

Zip code
53122

Branch, district or seat number (required if applicable)
At-Large Seat

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

Type of election (required)
 spring
 special

Election date (required) Do not use primary date.
 Mo/DaY/Year
April 4, 2023

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
<i>Robert DiVito</i>	Robert DiVito	14175 ST. GEORGE CT	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/2023
<i>Richard Eisenmann</i>	Richard Eisenmann	1095 HIGHLAND	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/2023
<i>Melissa Eisenmann</i>	MELISSA EISENMANN	1095 HIGHLAND DR	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/2023
<i>Samuel Rimes</i>	SAMUEL RIMES	1085 HIGHLAND DR	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
<i>Leanne Walz</i>	Leanne Walz	1075 Highland Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
<i>John Kannah</i>	JOHN KANNAH	1045 HIGHLAND	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
<i>Liam Kelly</i>	Liam Kelly	14800 Lata Vista Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
<i>Alison Kelly</i>	Alison Kelly	14800 Lata Vista Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
<i>Tara Coates</i>	TARA COATES	1005 Woodley Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR
 I, Sam Hughes (Name of circulator) certify: I reside at 14050 St. George Ct Elm Grove
(Circulator's residential address - Include number, street, and municipality).

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(a).

1-2-2023 (Date)
 (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Sam Hughes	Candidate's residential address (required) No P.O. box addresses Street, fire, or rural route number; box number (if rural route); and name of street or road 14050 St George Ct, Elm Grove	Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	Election date (required) Do not use primary date. Mo/Day/Year April 4, 2023
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 14050 St George Ct, Elm Grove	State (required) WI	Zip code 53122	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special
Title of office (required) Board of Education	Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input type="checkbox"/> District <input checked="" type="checkbox"/> Seat At-Large Seat	Name of jurisdiction or district in which candidate seeks office (required) School District of Elm Brook	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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.

Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Mark D. Fozz	1045 Woodland Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
	THOMAS F MULVANEY	1065 WOODLAND AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City ELM GROVE	1-2/23
	TERESA GRUNKE	1050 WOODLAND AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City ELM GROVE	1-2/23
	Judy Narlock	1080 Woodland Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
	Kathi Stephen	1105 Woodland Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
	Melissa Theesfeld	1120 Lone Tree Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Jeremy Newman	1140 Lone Tree Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Monica Goldammer	1575 Terrace Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Thomas Koops	1125 Terrace Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Joy Koops	1120 Terrace Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23

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.

CERTIFICATION OF CIRCULATOR certify: I reside at 1700 St. George Ct, Elm Grove
(Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. §12.33(1)(a).

1-2-2023 (Date)

 Sam Hughes (Name of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) *No P.O. box addresses*
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town Village City **Elm Grove**
 (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

Branch, district or seat number (required if applicable)
 Branch District Seat
At-Large Seat

State (required)
WI

Zip code
53122

Type of election (required)
 spring special

Election date (required) *Do not use primary date.*
April 4, 2023

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes. <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	Date of Signing Mo/Day/Year
	Donna Pellegrini	20545 Chadwick Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1-7-23
	Alex Pellegrini	20545 Chadwick Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1-2-23
	Jacobelyn Hinkle	1140 Terrace Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
	Maria Maister	1005 Terrace Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
	Richard Kowalski	960 Terrace Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Donna Marks	2835 Norman Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1-2-23
	Peter Conroy	885 Brinsmere Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Katherine Connelly	885 Brinsmere Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Joanna Hughes	14050 St. George Ct.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	Zanna Hughes	14050 St. George Ct.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23

CERTIFICATION OF CIRCULATOR
 certify: I reside at **14050 St. George Ct, Elm Grove**
(Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.31(3)(a).

1/2/2023
(Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Sam Hughes		Candidate's residential address (required) No P.O. box addresses Street, fire, or rural route number; box number (if rural route), and name of street or road 14050 St George Ct, Elm Grove		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 14050 St George Ct, Elm Grove		State (required) WI		Election date (required) Do not use primary date. Mo./Day/Year April 4, 2023	
Title of office (required) Board of Education		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input type="checkbox"/> District <input checked="" type="checkbox"/> Seat At-Large Seat		Name of jurisdiction or district in which candidate seeks office (required) School District of Elmbrook	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo./Day/Year
	Jack Pitzo	3695 Mary Cliff Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/20/22
	Garrett Smith	2025 Carrington Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1/2/23
	Ian Smith	2025 Carrington Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1/2/23
	Gagey S Smith	2025 Carrington Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1/2/23
	Michele K Smola	2025 Carrington Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1/2/23
	Tricia Maederer	2050 Carrington Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1-2-23
	Joel Maederer	2050 Carrington Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1-2-23
	Tom Beaman	905 KURTIS	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1-2-23
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR
I, Sam Hughes (Name of circulator) certify: I reside at 14050 St. George Ct, Elm Grove (Circulator's residential address - include number, street, and municipality).

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

Must be taken from last page
(Date) 1/2/2023
 (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

Candidate's municipality for voting purposes (required) Do not use primary date.
 Town
 Village
 City
Elm Grove (name of municipality)

Type of election (required)
 spring
 special

Election date (required) Do not use primary date.
April 4, 2023

State (required)
WI

Zip code
53122

Branch, district or seat number (required if applicable)
At-Large Seat

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	CHERYL DANILSON	3940 BROOK LAKE BROOKFIELD, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/21/2022
	Kaylee Rachtke	1320 Barrington Woods Dr. Brookfield, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/21/2022
	Peter Cobb	3860 Fiebrantz Dr Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/21/2022
	Mary F Cobb	3800 Fiebrantz Dr. Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/21/2022
	Thomas Cobb	3860 Fiebrantz Dr. Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/21/2022
	Steve Deck	17900 Knoll Ct Brookfield, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/22/22
	Sarah Decker	17900 Knoll Ct Brookfield, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/22/22
	JEFFREY SYSLACK	1785 COLLIER VUE CT BROOKFIELD, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/26/22
	MARY Syslack	17855 Colline Vue Ct Brookfield, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/26/22
	Melanie Muthrak	6055 Smith Dr. Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22

CERTIFICATION OF CIRCULATOR

I certify: I reside at 2330 Le Chateau Drive, Brookfield
 (Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

1/1/23 (Date)
 (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's municipality for mailing purposes (required if different than residential address or voting municipality)
WI

Candidate's municipality for voting purposes (required)
 Town Village City **Elm Grove** (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

State (required)
WI

Zip code
53122

Type of election (required)
 spring special

Election date (required) Do not use primary date.
April 4, 2023

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

Branch, district or seat number (required if applicable)
 Branch District Seat
At-Large Seat

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Kristin Kuhl	2200 Le Chateau Dr. Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
	Peter Kuhl	2200 Le Chateau Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
	Mary Fenelon	2440 Lilly Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/28/22
	Lisa Price	17835 Collins Vuelte	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	01/01/23
	Steve Raysen	17905 Collins Vee	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	01/01/23
	Erin Hawkins	17905 Collins Vee Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	01/01/23
	Jessica Posnik	2230 Le Chateau Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	01/01/23
	Anthony Posnik	2230 Le Chateau Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	01/01/23

CERTIFICATION OF CIRCULATOR

I certify: I reside at 2230 Le Chateau Dr. Brookfield
 (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

1/1/23 (Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. Box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
Elm Grove (name of municipality)

Type of election (required)
 spring
 special

Zip code
53122

State (required)
WI

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
At-Large Seat

Election date (required) Do not use primary date.
 Mo/Dav/Year
April 4, 2023

Title of office (required)
Board of Education

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elm Brook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
<i>Thomas Harmeyer</i>	Thomas Harmeyer	3195 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/27/2022
<i>Brigid Harmeyer</i>	Brigid Harmeyer	3195 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/27/2022
<i>Jennifer Keipper</i>	Jennifer Keipper	3255 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/28/22
<i>Belene DiAmato</i>	Belene DiAmato	3235 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/28/22
<i>Sean Keipper</i>	Sean Keipper	3255 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/28/22
<i>Alexandra Keipper</i>	Alexandra Keipper	3255 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/28/22
<i>Scott J. Keipper</i>	Scott J. Keipper	3255 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/28/22
<i>Elizabeth Spener</i>	Elizabeth Spener	3220 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/28/22
<i>Allison Spener</i>	Allison Spener	3220 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/28/22
<i>Paul W. Harmeyer</i>	Paul W. Harmeyer	3195 Cherry Hill Dr.	Brookfield <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/29/2022

CERTIFICATION OF CIRCULATOR
 certify: I reside at 3195 Cherry Hill Brookfield, WI
 (Circulator's residential address - Include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

Brigid E. Harmeyer
 (Name of circulator)
 12-29-22
 (Date)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Sam Hughes		Candidate's residential address (required) No P.O. box addresses Street, fire, or rural route number; box number (if rural route), and name of street or road 14050 St George Ct, Elm Grove		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 14050 St George Ct, Elm Grove		Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		Election date (required) Do not use primary date. Mo/Day/Year April 4, 2023	
Title of office (required) Board of Education		State (required) WI		Name of jurisdiction or district in which candidate seeks office (required) School District of Elm Brook	
Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input type="checkbox"/> District <input checked="" type="checkbox"/> Seat At-Large Seat		Zip code 53122			

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Municipality of Residence Check the type and write the name of your municipality for voting purposes.
1. <i>Amy Wroblewski</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove 12-31-22
2. <i>Kate Wroblewski</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove 12-31-22
3. <i>Tom Wroblewski</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove 12-31-22
4. <i>Susan Kahler</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield 01/02/23
5. <i>William Kahler</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield 01/02/23
6. <i>Russell Kahler</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield 01/02/23
7. <i>Emily Donohue</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove 11/2/23
8. <i>Max Donohue</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove 11/2/23
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
 certify: I reside at 3195 Cherry Hill Bkfst 53005
 (Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

1-2-23 (Date) Brigid E. Harneser (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Sam Hughes		Candidate's residential address (required) No P.O. box addresses Street, fire, or rural route number; box number (if rural route); and name of street or road 14050 St George Ct, Elm Grove		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 14050 St George Ct, Elm Grove		State (required) WI		Election date (required) Do not use primary date. Mo/Day/Year April 4, 2023	
Title of office (required) Board of Education		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input type="checkbox"/> District <input checked="" type="checkbox"/> Seat At-Large Seat		Name of jurisdiction or district in which candidate seeks office (required) School District of Elmbrook	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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.

Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	NANCY KORMANIK	17445B W WISCONSIN AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/2022
	Laurel Mellone	16950 Ruby Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	GERALD MELLONE	16950 RUBY LANE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	William Abu-Hamdan	200 N. Holland St.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	Deborah Abu-Hamdan	200 N. Holland Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	CURT KLADE	17020 Deer Park Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	Judy Klade	17020 Deer Park Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	JUSTA TOMASI	16430 Gillen Road.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	Ignathus Jucraon	1735 Elizabeth Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22
	Renee Lower	17075 Elizabeth Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/28/22

CERTIFICATION OF CIRCULATOR
 I, GERALD MELLONE (Name of circulator)
 certify: I reside at 16950 Ruby Lane Brookfield 53005
 (Circulator's residential address - include number, street, and municipality)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

12/28/22 (Date)
Gerald Mellone (Signature of circulator)
 Page No. 19

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Sam Hughes Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 14050 St George Ct, Elm Grove Title of office (required) Board of Education	Candidate's residential address (required) No P.O. box addresses Street, fire, or rural route number, box number (if rural route), and name of street or road 14050 St George Ct, Elm Grove State (required) WI Branch, district or seat number (required if applicable) At-Large Seat	Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove (Name of municipality) Election date (required) Do not use primary date. Mo/Day/Year April 4, 2023 Name of jurisdiction or district in which candidate seeks office (required) School District of Elmbrook
--	---	---

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
1.		Brianne Lewers	17075 Elizabeth	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/28/2022
2.		Sudheer Dampoddy	16480 Deerbeck Hwy	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/29/2022
3.		Jen Mellone	19205 Edmonton Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/29/2022
4.		Jeffrey Mellone	19205 Edmonton Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/29/2022
5.		GARY PEAVLER	875 Tanglewood Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/30/22
6.		Kris Seak	12845 Falcon Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/30/22
7.		Lindsey Kopps	170 S 167th St	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/22
8.		Robert Moore	155 S. 167th St	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/22
9.		PATRICIA M. BASTING	3005 H.N. RIVERBURN	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/22
10.		Steve Eisenman	16545 Golf Parkway	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/2022

CERTIFICATION OF CIRCULATOR
 I, GERARD MELLENE (Name of circulator)
 certify: I reside at 16980 Rusby Ave E Brookfield, WI 53005 (Circulator's residential address - Include number, street, and municipality).

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.33(3)(a).

12/31/22 (Date)

 (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) **No P.O. box addresses**
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
At-Large Seat

State (required)
WI

Zip code
53122

Type of election (required)
 spring
 special

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
Elm Grove (name of municipality)

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
<i>Michael P. Dugan</i>	M. Ko Degenhardt	185 N. 167th	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/22
<i>Al Z...</i>	KALLEN LEWIS	145 N 167 TH ST	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/2022
<i>Laurie A Blascike</i>	Laurie A Blascike	205 N 167th St	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/2022
<i>B Bitter</i>	B Bitter	255 N 167th	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/2022
<i>Jennifer Verden-Bothe</i>	Jennifer Verden-Bothe	16675 Lillian Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12-31-22
<i>Pamela Verden-Bothe</i>	Pamela Verden-Bothe	16675 Lillian M.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12-31-22
<i>Melanie Zimmer</i>	Melanie Zimmer	17040 Ruby Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/22
<i>John Zimmer</i>	John Zimmer	17040 Ruby Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/22
<i>Jacob Liesemeyer</i>	Jacob Liesemeyer	18150B Hoffman Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	11/23
<i>Patricia Williams</i>	PATRICIA WILLIAMS	3035 Broadview	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	11/23

CERTIFICATION OF CIRCULATOR

I, GERARD MCELWAIN (Name of circulator)
 certify: I reside at 16930 Ruby Lane Brookfield WI 53005 (Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

11/23 (Date)
Gerard McElwain (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) *No P.O. box addresses*
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
 Elm Grove (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

State (required)
WI

Zip code
53122

Type of election (required)
 spring
 special

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
At-Large Seat

Election date (required) *Do not use primary date.*
 Mo./Day/Year
April 4, 2023

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Diane Schlosser	18515 St. Andrew Ct. Unit C	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/20/22 ✓
	John Schlosser	18515 St. Andrew Ct Unit C	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/22/22 ✓
	Hope Schlosser	18515 St. Andrew Ct. Unit C	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/22/22 ✓
	Anne Schlosser	140135 Brookdale Dr. Apt 2	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/30/22 ✓
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____ ✓
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____ ✓
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____ ✓
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____ ✓
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____ ✓
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____ ✓

CERTIFICATION OF CIRCULATOR
 certify: I reside at 18515 St. Andrew Ct. Brookfield WI 53005
(Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

(Name of circulator)

 (Date)

(Signature of circulator)

Page No. 1 of 12

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

This is a sample nomination paper form. It conforms to the statutory requirements for nomination papers for nonpartisan office. All information concerning the candidate must be completed in full before circulating this form to obtain signatures of electors. All information concerning the signing electors and the circulator must be completed in full before filing with the appropriate filing officer. This form may be reproduced in any way. A candidate's picture and biographical data may also be added to this form. The Wisconsin Elections Commission has determined that no disclaimer or other attribution statement is required on nomination papers. Candidates are advised to send a sample of their completed form to the filing officer for review before circulation.

Page Numbers – Number each page consecutively, beginning with “1”, before submitting to the filing officer. A space for page numbers has been provided in the lower right-hand corner of the form.

Candidate's Name - Insert the candidate's name. A candidate may use his or her full legal name, or any combination of first name, middle name, and initials or nickname with last name. The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as “Red” or “Skip” are permitted, but names which have an apparent electoral purpose or benefit, such as “Lower taxes,” “None of the above” or “Lower Spending” are not permitted. It is also not permissible to add nicknames in quotes or parentheses between first and last names. For example, John “Jack” Jones or John (Jack) Jones are not acceptable, but John Jones, Jack Jones or John Jack Jones are acceptable.

Candidate's Address – Insert the candidate's residential address (*no P.O. Box addresses*) and the municipality for voting purposes. Indicate if the municipality of residence is a town, village, or city. If a candidate's mailing address is different from the residential address or voting municipality, a complete mailing address must also be given.

Date of Election - Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office - The name of the office must be listed **along with any branch, district, or seat number** (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction - The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

Signatures and Printed Name of Electors - Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their **residential address (no P.O. Box addresses)**, including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

Signature of Circulator - The circulator should carefully read the language of the *Certification of Circulator*. **THE CIRCULATOR MUST PERSONALLY PRESENT THE NOMINATION PAPER TO EACH SIGNER. THE NOMINATION PAPER MAY NOT BE LEFT UNATTENDED ON COUNTERS OR POSTED ON BULLETIN BOARDS.** The circulator's complete residential address including municipality of residence must be listed in the certification. After obtaining signatures of electors, the circulator must sign and date the certification.

Other Instructions - Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, Wis. Adm. Code.

- *Original* nomination papers must be in the physical custody of the appropriate filing officer by the filing deadline. A postmark on the filing deadline is **NOT** sufficient. Nomination papers **CANNOT** be faxed to the filing officer. Ch. Wisconsin Elections Commission § 6.04(2), Wis. Adm. Code.
- Nomination papers with the required number of signatures must be filed with the appropriate filing officer **no later than 5:00 p.m.** on the first Tuesday in January (or the next day if the first Tuesday is a holiday) before the spring election. Special elections may have different filing deadlines. Check with the filing officer.
- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

10

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

State (required)
WI

Zip code
53122

Type of election (required)
 spring
 special

Branch, district or seat number (required if applicable)
At-Large Seat

Election date (required) Do not use primary date.
April 4, 2023

Municipality for voting purposes (required)
 Town
 Village
 City
Elm Grove

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elm Brook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
<i>Jay Hafemeister</i>	Jay Hafemeister	3615 Holly wood Ln	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12-31-22
<i>Rachelle Otis</i>	Rachelle Otis	3460 Hollywood Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12-31-22
<i>Rose M Neitzel</i>	Rose M Neitzel	3400 Hollywood Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22
<i>ROBERT SCHOONOVER</i>	ROBERT SCHOONOVER	4760 NOTTINGHAM CT	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22
<i>Cynthia Schoonover</i>	Cynthia Schoonover	4700 Nottingham Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22
<i>Donald Basting</i>	DONALD BASTING	3275 BERMUDA BLVD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22
<i>Meghan Vilcins</i>	Meghan Vilcins	3385 Bermuda Blvd.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22
<i>GUYARD VILCINS</i>	GUYARD VILCINS	3385 BERMUDA BLVD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22
<i>Miko Anderson</i>	Miko Anderson	17540 Windmere Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22
<i>MaryKay Lavehead</i>	MaryKay Lavehead	3485 Nassau Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/31/22

CERTIFICATION OF CIRCULATOR
 certify: I reside at **18525 C St. Andrew Ct. Brookfield WI 53005**
(Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

Diane T. Schlusser
 (Name of circulator)

Diane T. Schlusser
 (Signature of circulator)

1/2/23
 (Date)

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

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Date of Election – Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office – The name of the office must be listed **along with any branch, district, or seat number** (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction – The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

Signatures and Printed Name of Electors – Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their **residential** address (*no P.O. Box addresses*), including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

Signature of Circulator – The circulator should carefully read the language of the *Certification of Circulator*. **THE CIRCULATOR MUST PERSONALLY PRESENT THE NOMINATION PAPER TO EACH SIGNER.** **THE NOMINATION PAPER MAY NOT BE LEFT UNATTENDED ON COUNTERS OR POSTED ON BULLETIN BOARDS.** The circulator's complete residential address including municipality of residence must be listed in the certification. After obtaining signatures of electors, the circulator must sign and date the certification.

Other Instructions – Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, 2.07, Wis. Adm. Code.

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- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

Repealed 9

Candidate's name (required); no titles may be used. Sam Hughes	Candidate's residential address (required) <i>No P.O. box addresses</i> Street, fire, or rural route number; box number (if rural route); and name of street or road 14050 St George Ct, Elm Grove	Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	Election date (required) <i>Do not use primary date</i> Mo/Day/Year April 4, 2023
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 14050 St George Ct, Elm Grove	State (required) WI	Zip code 53122	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special
Title of office (required) Board of Education	Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input type="checkbox"/> District <input checked="" type="checkbox"/> Seat At-Large Seat	Name of jurisdiction or district in which candidate seeks office (required) School District of Elmbrook	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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.

Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Kathleen M. Grasse	1550 Barrington Woods	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/2022
	Susan D. Daigneau	17365 Alvin Ln	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/2022
	Maurice Daigneau	17365 Alvin Ln	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/2022
	CHERI MASTEL	14640 Eastview Ct.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12-28-2022
	Larry Mastel	14640 Eastview Ct.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12-28-2022
	Chuck Bloom	20855 Macaulay Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City " OK	12-28-2022
	Sharon Bloom	20855 Macaulay Dr	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City " OK	12-28-2022
	Richard Farrell	1940 Westmeadow Ter	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	12/31/22
	EVELYNN FARRELL	1960 Westmeadow Ter EG	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City ELM GROVE	12/31/22
	Diane T. Schlusser	18575 C St Andrew Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/31/22

CERTIFICATION OF CIRCULATOR
 certify: I reside at _____
 (Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

12/31/22 (Date) Diane T. Schlusser (Signature of circulator)

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

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Page Numbers – Number each page consecutively, beginning with “1”, before submitting to the filing officer. A space for page numbers has been provided in the lower right-hand corner of the form.

Candidate's Name - Insert the candidate's name. A candidate may use his or her full legal name, or any combination of first name, middle name, and initials or nickname with last name. The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as “Red” or “Skip” are permitted, but names which have an apparent electoral purpose or benefit, such as “Lower taxes,” “None of the above” or “Lower Spending” are not permitted. It is also not permissible to add nicknames in quotes or parentheses between first and last names. For example, John “Jack” Jones or John (Jack) Jones are not acceptable, but John Jones, Jack Jones or John Jack Jones are acceptable.

Candidate's Address – Insert the candidate's residential address (*no P.O. Box addresses*) and the municipality for voting purposes. Indicate if the municipality of residence is a town, village, or city. If a candidate's mailing address is different from the residential address or voting municipality, a complete mailing address must also be given.

Date of Election - Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office - The name of the office must be listed **along with any branch, district, or seat number** (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction - The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

Signatures and Printed Name of Electors - Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their **residential address** (*no P.O. Box addresses*), including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

Signature of Circulator - The circulator should carefully read the language of the *Certification of Circulator*. **THE CIRCULATOR MUST PERSONALLY PRESENT THE NOMINATION PAPER TO EACH SIGNER. THE NOMINATION PAPER MAY NOT BE LEFT UNATTENDED ON COUNTERS OR POSTED ON BULLETIN BOARDS.** The circulator's complete residential address including municipality of residence must be listed in the certification. After obtaining signatures of electors, the circulator must sign and date the certification.

Other Instructions - Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, Wis. Adm. Code.

- *Original* nomination papers must be in the physical custody of the appropriate filing officer by the filing deadline. A postmark on the filing deadline is **NOT** sufficient. Nomination papers **CANNOT** be faxed to the filing officer. Ch. Wisconsin Elections Commission § 6.04(2), Wis. Adm. Code.
- Nomination papers with the required number of signatures must be filed with the appropriate filing officer **no later than 5:00 p.m.** on the first Tuesday in January (or the next day if the first Tuesday is a holiday) before the spring election. Special elections may have different filing deadlines. Check with the filing officer.
- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. ~~Sam Hughes~~ **9**

Candidate's residential address (required) *No P.O. box addresses*
 Street, fire, or rural route number, box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town Village City
 Elm Grove (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

Branch, district or seat number (required if applicable)
 Branch District Seat
At-Large Seat

State (required)
WI

Zip code
53122

Type of election (required)
 spring special

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

Election date (required) *Do not use primary date*
 Mo/Day/Year
April 4, 2023

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
<i>Glenda Prom-Stanlick</i>	<i>Glenda R Prom-Stanlick</i>	<i>17990 St James Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>12-31-2022</i>
<i>Michael Schmainda</i>	<i>Michael Schmainda</i>	<i>12905 Dunwoody Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/23</i>
<i>Kathleen Schmainda</i>	<i>Kathleen Schmainda</i>	<i>12905 Dunwoody Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/23</i>
<i>Andrew Swietlik</i>	<i>Andrew Swietlik</i>	<i>1315 Crescent Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/23</i>
<i>Jeanne Cherne</i>	<i>Jeanne Cherne</i>	<i>3440 Ten Oaks Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/23</i>
<i>Larry Cherne</i>	<i>Larry Cherne</i>	<i>3440 Ten Oaks Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/23</i>
<i>Mike Cregan</i>	<i>Mike Cregan</i>	<i>1370 Crescent Dr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Elm Grove</i>	<i>1/2/23</i>
<i>John S. Scott</i>	<i>John S. Scott</i>	<i>17615 Royalcrest</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/23</i>
<i>John S. Scott</i>	<i>John S. Scott</i>	<i>17615 Royalcrest</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/23</i>
<i>Leo V. Pappalardo</i>	<i>Leo V. Pappalardo</i>	<i>W1925066 One Mile Rd</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Menomonee Falls</i>	<i>1/2/23</i>

CERTIFICATION OF CIRCULATOR
 certify: I reside at **18515 C St. Andrew St - Brookfield, WI 53005**
(Circulator's residential address - Include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

1/2/23
(Date)

Diane T. Schlosser
(Name of circulator)

Diane T. Schlosser
(Signature of circulator)

Page No. **4** *15*

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

This is a sample nomination paper form. It conforms to the statutory requirements for nomination papers for nonpartisan office. All information concerning the candidate must be completed in full before circulating this form to obtain signatures of electors. All information concerning the signing electors and the circulator must be completed in full before filing with the appropriate filing officer. This form may be reproduced in any way. A candidate's picture and biographical data may also be added to this form. The Wisconsin Elections Commission has determined that no disclaimer or other attribution statement is required on nomination papers. Candidates are advised to send a sample of their completed form the filing officer for review before circulation.

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Candidate's Address – Insert the candidate's residential address (*no P.O. Box addresses*) and the municipality for voting purposes. Indicate if the municipality of residence is a town, village, or city. If a candidate's mailing address is different from the residential address or voting municipality, a complete mailing address must also be given.

Date of Election – Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office – The name of the office must be listed **along with any branch, district, or seat number** (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

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Signatures and Printed Name of Electors – Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their **residential** address (*no P.O. Box addresses*), including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

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NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Sam Hughes		Candidate's residential address (required); No P.O. box addresses Street, fire, or rural route number; box number (if rural route); and name of street or road 14050 St George Ct, Elm Grove		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 14050 St George Ct, Elm Grove		State (required) WI		Election date (required) Mo/Day/Year April 4, 2023	
Title of office (required) Board of Education		Zip code 53122		Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	
Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input type="checkbox"/> District <input checked="" type="checkbox"/> Seat At-Large Seat		Name of jurisdiction or district in which candidate seeks office (required) School District of Elmbrook			

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Joshua Brooks	18500 Tamarak Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/28/22
	Lisa Huber	21000 Brook Park Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/29/22
	Karen Regner	18560 Middleton Pl	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	1/2/23
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____
_____	_____	_____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	_____

CERTIFICATION OF CIRCULATOR

I, **Diane Schlosser** (Name of circulator) certify: I reside at **18575 E St Andrew Ct, Brookfield, WI 53005** (Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

1/2/23 (Date) (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) *No P.O. box addresses*
 Street, fire, or rural route number, box number (if rural route), and name of street or road
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town Village City
 Elm Grove (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

State (required)
WI

Zip code
53122

Type of election (required)
 spring special

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

Branch, district or seat number (required) if applicable
 Branch District Seat
At-Large Seat

Election date (required) *Do not use primary date.*
 Mo./Day/Year
April 4, 2023

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo./Day/Year
<i>Barbara C. Hesselben</i>	<i>Barbara A. Hesselben</i>	<i>19215 N Hills Dr. Brookfield WI 53045</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Brookfield</i>	<i>1/2/2023</i>
<i>Carrie Jensen</i>	<i>Carrie Jensen</i>	<i>18515 St. Andrews Ct Brookfield</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>BROOKFIELD</i>	<i>1/2/23</i>
<i>Larry Bartling</i>	<i>LARRY BARTLING</i>		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
<i>_____</i>			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
<i>_____</i>			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
<i>_____</i>			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
<i>_____</i>			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
<i>_____</i>			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
<i>_____</i>			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
<i>_____</i>			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, *Diane T. Schlaser* (Name of circulator) certify: I reside at *18515 C St. Andrew Ct. Brookfield WI 53045* (Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.15(3)(a).

1/2/23 (Date) *Diane T. Schlaser* (Signature of circulator)

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

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Candidate's Name – Insert the candidate's name. A candidate may use his or her full legal name, or any combination of first name, middle name, and initials or nickname with last name. The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as “Red” or “Skip” are permitted, but names which have an apparent electoral purpose or benefit, such as “Lower taxes,” “None of the above” or “Lower Spending” are not permitted. It is also not permissible to add nicknames in quotes or parentheses between first and last names. For example, John “Jack” Jones or John (Jack) Jones are not acceptable, but John Jones; Jack Jones or John Jack Jones are acceptable.

Candidate's Address – Insert the candidate's residential address (*no P.O. Box addresses*) and the municipality for voting purposes. Indicate if the municipality of residence is a town, village, or city. If a candidate's mailing address is different from the residential address or voting municipality, a complete mailing address must also be given.

Date of Election – Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office – The name of the office must be listed **along with any branch, district, or seat number** (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction – The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

Signatures and Printed Name of Electors – Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their **residential address** (*no P.O. Box addresses*), including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

Signature of Circulator – The circulator should carefully read the language of the *Certification of Circulator*. **THE CIRCULATOR MUST PERSONALLY PRESENT THE NOMINATION PAPER TO EACH SIGNER. THE NOMINATION PAPER MAY NOT BE LEFT UNATTENDED ON COUNTERS OR POSTED ON BULLETIN BOARDS.** The circulator's complete residential address including municipality of residence must be listed in the certification. After obtaining signatures of electors, the circulator must sign and date the certification.

Other Instructions – Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, Wis. Adm. Code.

- *Original* nomination papers must be in the physical custody of the appropriate filing officer by the filing deadline. A postmark on the filing deadline is **NOT** sufficient. Nomination papers **CANNOT** be faxed to the filing officer. Ch. Wisconsin Elections Commission § 6.04(2), Wis. Adm. Code.
- Nomination papers with the required number of signatures must be filed with the appropriate filing officer **no later than 5:00 p.m.** on the first Tuesday in January (or the next day if the first Tuesday is a holiday) before the spring election. Special elections may have different filing deadlines. Check with the filing officer.
- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
Elm Grove (name of municipality)

Type of election (required)
 spring
 special

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

Title of office (required)
Board of Education

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
WI State (required)
53122 Zip code
At-Large Seat

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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.

Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Carmen Leverenz	4470 Hidden Creek Trail Brookfield WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/20/22
	Alex Leverenz	4470 Hidden Creek Trail Brookfield WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/20/22
	Jack Leverenz	4470 Hidden Creek Trail Brookfield WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/20/22
	David Leverenz	4470 Hidden Creek Trail Brookfield WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/20/22
	ANTHONY GRACE	2665 N 130th Street Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/25/2022
	Marcie Grace	2665 N 130th St Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/25/2022
	Ryan J. Lemke	17040 Prairie League Ct. Brookfield, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/20/2022
	TYLER FINK	17750 ROYALCREST DR. BROOKFIELD, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	01/01/2023
	CARA LOTEGETLUAKI	4280 PENN CT BROOKFIELD, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1/1/2023
	Amani Lotegeluaki	4280 Penn ct Brookfield, WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1/1/2023

CERTIFICATION OF CIRCULATOR
 certify: I reside at **4470 Hidden Creek Trail Brookfield WI**
 (Circulator's residential address - include number, street, and municipality.)
53005

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(1a).

David Leverenz (Name of circulator)

 (Signature of circulator)

1/2/23 (Date)

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

This is a sample nomination paper form. It conforms to the statutory requirements for nomination papers for nonpartisan office. All information concerning the candidate must be completed in full before circulating this form to obtain signatures of electors. All information concerning the signing electors and the circulator must be completed in full before filing with the appropriate filing officer. This form may be reproduced in any way. A candidate's picture and biographical data may also be added to this form. The Wisconsin Elections Commission has determined that no disclaimer or other attribution statement is required on nomination papers. Candidates are advised to send a sample of their completed form to the filing officer for review before circulation.

Page Numbers – Number each page consecutively, beginning with "1", before submitting to the filing officer. A space for page numbers has been provided in the lower right-hand corner of the form.

Candidate's Name – Insert the candidate's name. A candidate may use his or her full legal name, or any combination of first name, middle name, and initials or nickname with last name. The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as "Red" or "Skip" are permitted, but names which have an apparent electoral purpose or benefit, such as "Lower taxes," "None of the above" or "Lower Spending" are not permitted. It is also not permissible to add nicknames in quotes or parentheses between first and last names. For example, John "Jack" Jones or John (Jack) Jones are not acceptable, but John Jones, Jack Jones or John Jack Jones are acceptable.

Candidate's Address – Insert the candidate's residential address (no P.O. Box addresses) and the municipality for voting purposes. Indicate if the municipality of residence is a town, village, or city. If a candidate's mailing address is different from the residential address or voting municipality, a complete mailing address must also be given.

Date of Election – Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office – The name of the office must be listed along with any branch, district, or seat number (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction – The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

Signatures and Printed Name of Electors – Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their residential address (no P.O. Box addresses), including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

Signature of Circulator – The circulator should carefully read the language of the *Certification of Circulator*. THE CIRCULATOR MUST PERSONALLY PRESENT THE NOMINATION PAPER TO EACH SIGNER. THE NOMINATION PAPER MAY NOT BE LEFT UNATTENDED ON COUNTERS OR POSTED ON BULLETIN BOARDS. The circulator's complete residential address including municipality of residence must be listed in the certification. After obtaining signatures of electors, the circulator must sign and date the certification.

Other Instructions – Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, Wis. Adm. Code.

- *Original* nomination papers must be in the physical custody of the appropriate filing officer by the filing deadline. A postmark on the filing deadline is NOT sufficient. Nomination papers CANNOT be faxed to the filing officer. Ch. Wisconsin Elections Commission § 6.04(2), Wis. Adm. Code.
- Nomination papers with the required number of signatures must be filed with the appropriate filing officer **no later than 5:00 p.m.** on the first Tuesday in January (or the next day if the first Tuesday is a holiday) before the spring election. Special elections may have different filing deadlines. Check with the filing officer.
- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's municipality for mailing purposes (required) if different than residential address or voting municipality
WI

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
 Elm Grove (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality
14050 St George Ct, Elm Grove

Zip code
53122

Type of election (required)
 spring
 special

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

Title of office (required)
Board of Education

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
At-Large Seat

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	William Martin	10105 Webster Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
	Evelyn Martin	1005 Webster Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/28/22
	Susan Olbrantz	14525 W Bluemound Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/28/22
	Laura Maslowski	370 S. Beaumont Beaumont Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/28/22
	Dimitra Lemberak	10805 Leach	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	1/2/23
	MARY A. MARTIN	14915 Palms NARA	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1-2-23
			<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, William Martin (Name of circulator) certify: I reside at 1005 Webster Ave Brookfield WI 53005 (Circulator's residential address - Include number, street, and municipality).

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

(Signature of circulator)
 1/2/23 (Date)

W

W

W

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) **No P.O. box addresses**
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

State (required)
WI

Zip code
53122

Branch, district or seat number (required if applicable)
At-Large Seat

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

Election date (required) **Do not use primary date.**
 Mo/Day/Year
April 4, 2023

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
Elm Grove (name of municipality)

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	David Regner	18560 Midland Pl	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	12/27/22
	Andrew Jensen	2660 Anita Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	1-1-23
	Amanda Jensen	2660 Anita Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	1-1-23
	Julie Katsaros	18520 Midland Place	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Brookfield	1-1-23
	GEORGE G. KATSAROS	18520 MIDLAND PLACE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City BROOKFIELD	01/01/23
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR
 certify: I reside at 18560 Midland Place Brookfield
(Circulator's residential address - Include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

Jan 1, 2023 (Date)
Karen Regner (Signature of circulator)
(Name of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) *No P.O. box addresses*
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town Village City
Elm Grove

Branch, district or seat number (required if applicable)
 Branch District Seat
At-Large Seat

State (required)
WI

Zip code
53122

Type of election (required)
 spring special

Election date (required) *Do not use primary date.*
 Mo/Day/Year
April 4, 2023

Title of office (required)
Board of Education

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Lucy Shady	18970 Marvajo Ct Apt 2	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield	11/23
	Angela LoCoco	12700 Meadow Dr	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	11/23
	Mark J. Andros	14625 Club Drive	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	11/23
	Anne Nodan	14025 Club Dr.	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	11/23
	Stefanie Tripoli	1405 Churan St.	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	11/23
	John Tripoli	1405 Church St.	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	11/23
	Bethany Gutoski	1600 Lindhurst Dr	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	11/23
	Joseph Gutoski	1600 Lindhurst Dr	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Elm Grove	11/23
	Rita Keller	2240 Michelle Ct	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield	11/23
	MARY HARMON	1829 SWAMP HILL CT	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	11/23

CERTIFICATION OF CIRCULATOR
 certify: I reside at **1829 SWAMP HILL CT, BROOKFIELD**
(Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 42.13(3)(a).

11/23
(Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

State (required) **WI** Zip code **53122**

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
At-Large Seat


Candidate's municipality for voting purposes (required)
 Town
 Village
 City
Elm Grove (name of municipality)

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Nicholas Harmon	18295 Lampington St Brookfield, WI 53005	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Brookfield	1/1/23
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR
 I, MARY HARMON (Name of circulator) certify: I reside at 18295 LAMPINGTON ST, BROOKFIELD (Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

MARY HARMON (Signature of circulator)
 1/1/23 (Date)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
 Elm Grove (name of municipality)

Type of election (required)
 spring
 special

State (required) **WI** Zip code **53122**

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
At-Large Seat

Title of office (required)
Board of Education

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	WENDE FEDLER	3040 Bradford Brookfield WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	12-26-2022
	ANN FEDLER	3285 Parkview Drive Brookfield WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	12/26/22
	RON FESPER	3285 Brookfield St Brookfield WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	12/26/22
	Rashmi Singh	8505 Kegons Ct Brookfield WI 53045	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	12-27-22
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR
 certify: I reside at _____
 (Circulator's residential address - include number, street, and municipality)

Wende Fedler
 (Name of circulator)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.43(3)(a).

Dec 29, 2022
 (Date)

(Signature of circulator)

53045

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

This is a sample nomination paper form. It conforms to the statutory requirements for nomination papers for nonpartisan office. All information concerning the candidate must be completed in full before circulating this form to obtain signatures of electors. All information concerning the signing electors and the circulator must be completed in full before filing with the appropriate filing officer. This form may be reproduced in any way. A candidate's picture and biographical data may also be added to this form. The Wisconsin Elections Commission has determined that no disclaimer or other attribution statement is required on nomination papers. Candidates are advised to send a sample of their completed form the filing officer for review before circulation.

Page Numbers – Number each page consecutively, beginning with "1", before submitting to the filing officer. A space for page numbers has been provided in the lower right-hand corner of the form.

Candidate's Name - Insert the candidate's name. A candidate may use his or her full legal name, or any combination of first name, middle name, and initials or nickname with last name. The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as "Red" or "Skip" are permitted, but names which have an apparent electoral purpose or benefit, such as "Lower taxes," "None of the above" or "Lower Spending" are not permitted. It is also not permissible to add nicknames in quotes or parentheses between first and last names. For example, John "Jack" Jones or John (Jack) Jones are not acceptable, but John Jones, Jack Jones or John Jack Jones are acceptable.

Candidate's Address – Insert the candidate's residential address (no P.O. Box addresses) and the municipality for voting purposes. Indicate if the municipality of residence is a town, village, or city. If a candidate's mailing address is different from the residential address or voting municipality, a complete mailing address must also be given.

Date of Election - Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office - The name of the office must be listed along with any branch, district, or seat number (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction - The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

Signatures and Printed Name of Electors - Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their residential address (no P.O. Box addresses), including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

Signature of Circulator - The circulator should carefully read the language of the *Certification of Circulator*. **THE CIRCULATOR MUST PERSONALLY PRESENT THE NOMINATION PAPER TO EACH SIGNER. THE NOMINATION PAPER MAY NOT BE LEFT UNATTENDED ON COUNTERS OR POSTED ON BULLETIN BOARDS.** The circulator's complete residential address including municipality of residence must be listed in the certification. After obtaining signatures of electors, the circulator must sign and date the certification.

Other Instructions - Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, Wis. Adm. Code.

- **Original** nomination papers must be in the physical custody of the appropriate filing officer by the filing deadline. A postmark on the filing deadline is not sufficient. Nomination papers CANNOT be faxed to the filing officer. Ch. Wisconsin Elections Commission § 6.04(2), Wis. Adm. Code.
- Nomination papers with the required number of signatures must be filed with the appropriate filing officer **no later than 5:00 p.m.** on the first Tuesday in January (or the next day if the first Tuesday is a holiday) before the spring election. Special elections may have different filing deadlines. Check with the filing officer.
- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

State (required)
WI

Zip code
53122

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
At-Large Seat

Candidate's municipality for voting purposes (required) Do not use primary date.
 Town
 Village
 City
Elm Grove

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

School District of Elm Brook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
<i>Nathleen Schreiner</i>	Nathleen Schreiner	2805 N Barker Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
<i>Steven Schreiner</i>	Steven Schreiner	2805 N Barker Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
<i>Caroline Schreiner</i>	Caroline Schreiner	2905 N Barker Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
<i>Jennifer Doyle</i>	Jennifer Doyle	2210 LaFontaine Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
<i>Marcia P. Saer</i>	Marcia P. Saer	2230 LaFontaine Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
<i>James R. Saer</i>	James R. Saer	2230 LaFontaine Ct	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
<i>John F. Reilly</i>	JOHN F. REILLY	17560 W. NORTH AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/27/22
<i>Debbie Seymour</i>	Debbie Seymour	16555 Cavela Cir Upper	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/27/22
<i>Robert Durham</i>	Robert Durham	2640 Wynfield Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/28/22
<i>Caroline Durham</i>	Caroline Durham	2640 Wynfield Lane	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12/28/22

CERTIFICATION OF CIRCULATOR

I, Amy Durham (Name of circulator) certify: I reside at 2640 Wynfield Lane (Circulator's residential address include number, street, and municipality).
Brookfield

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

12/28/22 (Date)
Amy Durham (Signature of circulator)

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NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required): no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's municipality for mailing purposes (required) if different than residential address or voting municipality
14050 St George Ct, Elm Grove

Title of office (required)
Board of Education

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
 Elm Grove (name of municipality)

Type of election (required)
 spring
 special

State (required)
WI

Zip code
53122

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
<i>Amy Durham</i>	Amy Durham	2640 Wynfield Lane Brookfield, WI 53005	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	1/1/23
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR
 I, Amy Durham (Name of circulator) certify: I reside at 2640 Wynfield Lane Brookfield (Circulator's residential address - include number, street, and municipality).

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

1/28/23 (Date) Amy Durham (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
Elm Grove (name of municipality)

Title of office (required)
Board of Education

Branch, district or seat number (required if applicable)
 Branch
 District
 Seat
WI
At-Large Seat

State (required)
WI

Zip code
53122

Type of election (required)
 spring
 special

Election date (required) Do not use primary date.
 Mo/Day/Year
April 4, 2023

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	MARY KLEMM	18830 Lothmoor DE Lower	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/27/22
	NICOLE KANDEBERA	18830 LOTHMOOR DE LOWER	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/27/22
	KARI DIVER	530 S. Elm Grove Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/27/22
	Bert Diver	530 S. Elm Grove Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12-27-22
	Melissa Page	830 S. Parkway Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12-27-22
	Chad Page	830 S. Parkway Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12-27-22
	Doris Borenz	815 S. Parkway Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/27/22
	Kyle Filber	2460 Kevenauer Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12/27/22
	Peter Filber	2460 Kevenauer Dr.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BROOKFIELD	12-27-22
	Karen Regner	18560 Midland Pl.	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Brookfield	12-27-22

WENDY BORN (Name of circulator)
 CERTIFICATION OF CIRCULATOR
 certify: I reside at **19020 LOTHMOOR DR. LOWER BROOKFIELD**
(Circulator's residential address - include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

12/27/22 (Date)

 (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used.
Sam Hughes

Candidate's residential address (required) No P.O. box addresses
 Street, fire, or rural route number; box number (if rural route); and name of street or road
14050 St George Ct, Elm Grove

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)
14050 St George Ct, Elm Grove

Candidate's municipality for voting purposes (required)
 Town
 Village
 City
 Elm Grove (name of municipality)

Title of office (required)
Board of Education

State (required)
WI











Zip code
53122

Type of election (required)
 spring
 special

Election date (required) Do not use primary date.
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April 4, 2023

Name of jurisdiction or district in which candidate seeks office (required)
School District of Elmbrook


I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate 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	Printed Name of Electors
	ROBERT R. GRASSE
	Megan Grasse
	Jill Pasqua
	Kevin J. Pasqua
	Michael Pasqua
	Maureen E.O. Fiedler
	Patrick Sturm
	Amy Wucherer
	Peyton Wucherer
	ELLIOTT WUCHERER

CERTIFICATION OF CIRCULATOR

I, Kathleen Grasse (Name of circulator) certify: I reside at 1550 Barrington Woods Dr. Brookfield, WI (Circulator's residential address - include number, street, and municipality).

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this 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 Wis. Stat. § 12.13(3)(a).

January 1, 2023 (Date)
 (Signature of circulator)

