

**NOMINATION PAPER FOR NONPARTISAN OFFICE**

Candidate's name (required); no titles may be used. <b>ANNE O'CONNOR</b>		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 <b>5838 N SHORE DRIVE</b>		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <b>WHITEFISH BAY</b> <input type="checkbox"/> City (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) <b>5838 N SHORE DRIVE</b>		State (required) <b>WI</b>	Zip code <b>53217</b>	Type of election (required) <input type="checkbox"/> spring <input type="checkbox"/> special	Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <b>04/02/2024</b>
Title of office (required) <b>COUNTY BOARD SUPERVISOR</b>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input type="checkbox"/> District <b>DISTRICT 1</b> <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office (required) <b>MILWAUKEE COUNTY</b>	

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
	Emilio De Torre	9421 N. Fairway Circle	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <b>Bayside</b> <input type="checkbox"/> City	12/15/23
	Sara Le Brun-Blaska	9596 N Regent Rd	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <b>Bayside</b> <input type="checkbox"/> City	12/15/23
	Deborah Stone	9156 N Sycamore Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <b>Bayside</b> <input type="checkbox"/> City	12/15/23
	Nicola De Torre	9421 N. Fairway Circle	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <b>Bayside</b> <input type="checkbox"/> City	12/15/23
	ERIC BLASKA	9596 N REGENT RD	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <b>BAYSIDE</b> <input type="checkbox"/> City	12/15/23
	Emilio De Torre V.	9421 N. Fairway Circle	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <b>Bayside</b> <input type="checkbox"/> City	12/15/23
	Joseph Gorman	9400 N. Fairway Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <b>Bayside</b> <input type="checkbox"/> City	12/23/23
	Haiyun LU	9400 N. Fairway Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <b>Bayside</b> <input type="checkbox"/> City	12/23/23
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	

I, Emilio De Torre (Name of circulator) certify: I reside at 9421 N. Fairway Circle, Bayside, WI 53217 (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).

12.15.2023  
(Date)

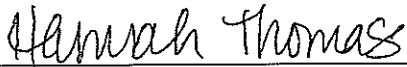
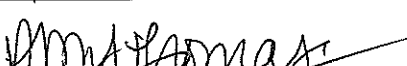
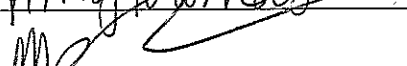
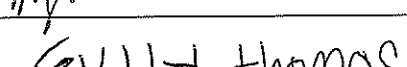
(Signature of circulator)

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1. 	Hannah Thomas	4163 N. Newhall Street Shorwood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	1/2/24
2. 	Amy Thomas	320 W. Ellsworth Lane Bayside, WI 53217	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	1/2/24
3. 	Maylan Thomas	320 W. Ellsworth Lane Bayside, WI 53217	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	1/2/24
4. 	Sullivan Thomas	320 W. Ellsworth Lane Bayside, WI 53217	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	1/2/24
5.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

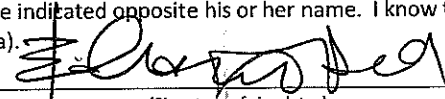
**CERTIFICATION OF CIRCULATOR**

I, Emilio De Torre (Name of circulator) certify: I reside at 9421 N. Fairway Circle, Bayside, WI 53217 (Circulator's residential address - include number, street, and municipality.)

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12.24.23

(Date)



(Signature of circulator)

Page No.