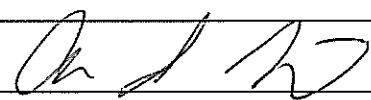




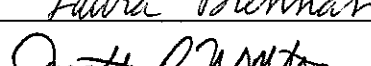
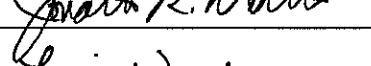
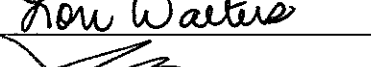

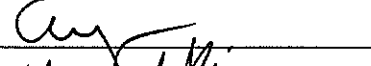


NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <u>Franklin</u> <input checked="" type="checkbox"/> City (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h2 style="text-align: center;">April 2, 2024</h2>
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		

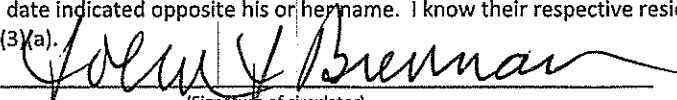
I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction 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. 	ADAM LANGOWSKI	2967 W. HILLTOP LN	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>FRANKLIN</u>	12/8/23
2. 	Shannara Langowski	2967 W. Hilltop LN	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Franklin</u>	12/8/23
3. 	Paul Richter	3531 W Southland Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>FRANKLIN</u>	12/8/23
4. 	Mardi Richter	3531 W Southland	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Franklin</u>	12/8/23
5. 	Laura Brennan	2974 W Hilltop Ln Franklin	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Franklin</u>	12/9/23
6. 	JONATHAN WALTERS	9130 S 47th ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>FRANKLIN</u>	12/17/23
7. 	Lori Walters	9130 S 47th ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Franklin</u>	12/17/23
8. 	Todd O'Brien	9305 S 29th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>FRANKLIN</u>	7/11/22
9. 	Amy O'Brien	9305 S 29th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Franklin</u>	12/17/23
10. 	Moganne O'Brien	9305 S 29th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Franklin</u>	12/17/23

I, JOHN J. BRENNAN (Name of circulator) CERTIFICATION OF CIRCULATOR certify: I reside at 2974 W. Hilltop Ln, Franklin WI 53132 (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).

12-17-23
(Date)


(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin <small>(name of municipality)</small></div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		
Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h1 style="text-align: center;">April 2, 2024</h1>						

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 <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
	Judeen D. Scherer	3329 ³³²⁹ W. Yorkline Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-7-23
	Claire Brefka	7947 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-7-23
	Meagan June	7931 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-7-23
	GREG JAEGER	7916 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-7-23
	JANET JAEGER	7916 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/7/23
	Erla Sorensen	7930 So 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/7/23
	Andrew Witezak	7961 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/7/23
	BEN McCANNA	8064 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/7/23
	SUSAN KOZIK	8043 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/7/23
	LISA BAKOVIC	7991 S. 47th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/7/23

I, James J. Luckey (Name of circulator) CERTIFICATION OF CIRCULATOR certify: I reside at 4925 W. Rawson Ave Franklin, WI 53132 (Circulator's residential address - Include number, street, and municipality.)



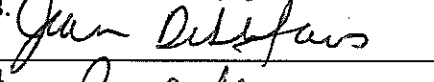
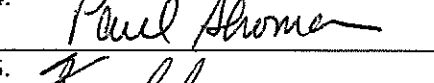
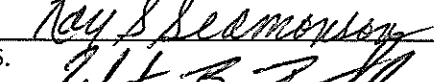
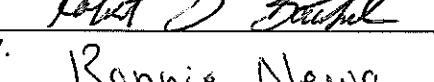
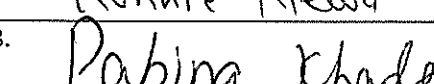
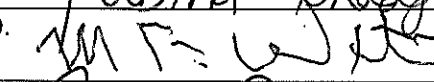

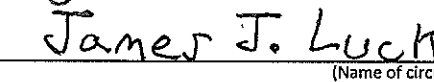
I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this nomination paper and personally obtained each of the signatures on this 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).

Dec 19 2023 (Date) (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

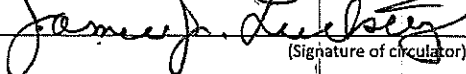
Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		Candidate's residential address (required) <i>No P.O. box addresses</i> Street, fire, or rural route number; box number (if rural route); and name of street or road <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin <small>(name of municipality)</small></div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		
Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>		Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		
		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>				

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. 	KENNETH SCHERRER	3329 W YORKSHIRE ^{DR}	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-7-23
2. 	JEFF STEINBACH	8109 S. 47 th ST.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-8-23
3. 	Jean DeStefanis	8189 S. 47 th ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-8-23
4. 	Paul Shomon	8213 S. 47 th ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-8-23
5. 	KAY S. SEAMONSON	8283 S. 47 th ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-8-23
6. 	ROBERT B BARTHEL	8295 S. 47 th ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-8-23
7. 	Robbie Khadgi	4722 W Forest Hill Av	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-8-23
8. 	Robbie Khadgi	4722 W. Forest Hill Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
9. 	M.F. W. [unclear]	4226 W. Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
10. 	Robin Periard	4750 W. Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-8-23

I, Jamer J. Luckey (Name of circulator) certify: I reside at 4925 W. Rawson Ave Franklin, WI 53132 (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).

Dec 19, 2023 (Date)  (Signature of circulator)


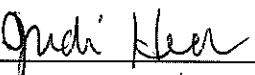

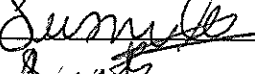

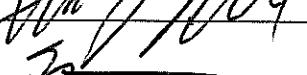
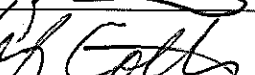


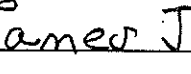
FL 160 L Rev. 2019 10 | Wisconsin Election Commission | P.O. Box 7894 | Madison, WI 53707 7894 | 608-261-2000 | www.wisconsin.gov/elections

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) WI	Zip code 53132	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		Election date (required) <i>Do not use primary date.</i> Mo/Day/Year April 2, 2024
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat 17		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		

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.

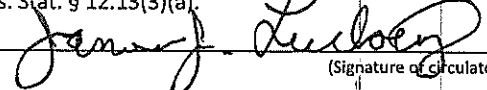
The municipality used for mailing purposes, when different than municipality of residence, is not sufficient. The name of the municipality of residence must always be listed.

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 PERIARD	4750 W Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	Judi Heck	4856 W. Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	David Heck	4856 W. Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	SUSMITA ANSARY	4914 W Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	MOHAMED SAJJETH	4914 W Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	Jeannine Campbell	4944 W Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	mark Cottle	4974 W Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	Angie Cottle	4974 W. Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	JASON DeBart	5013 W Forest Hill Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	Steve Ruda	5001 W Forest Hill Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-8-23

CERTIFICATION OF CIRCULATOR

I, James J. Luckey certify: I reside at 4925 W. Rawson Ave. Franklin, WI 53132
(Name of circulator) (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).

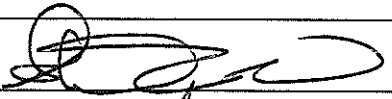
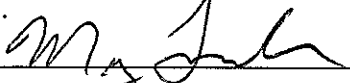



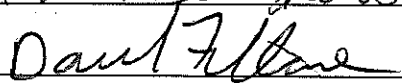


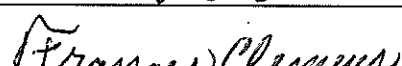
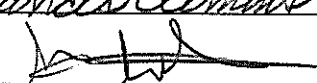
Dec 19, 2023 
(Date) (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin (name of municipality)</div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		
		Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>				
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		

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.

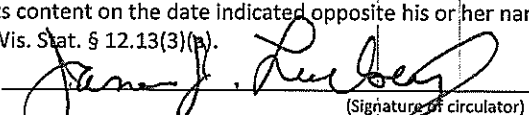
Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	STEVEN GUNN	4939 W. FOREST HILL AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/8/23
	Mary Fassbender	7397 S. Hillendale	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/8/23
	BRIAN STELLAT	7411 S. HILLENDALE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/9/23
	Dale Doberstein	7444 S. Hillendale Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	ROBERT PLASZKIEWICZ	2727 S. Hillendale Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	David Fillner	7245 S. Hillendale	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Susan Fillner	7245 S. Hillendale Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Corey Volmer	7218 S. Hillendale Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Frances Clemens	4239 W. Madison Blvd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Heba Qabara	4224 W. Madison Blvd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23

CERTIFICATION OF CIRCULATOR

I, James J. Luckey certify: I reside at 4925 W. Rawson Ave Franklin WI 53132
(Name of circulator) (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).

Dec 19, 2023
(Date)

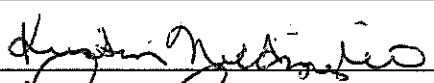
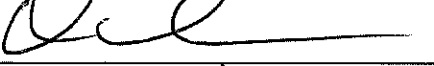
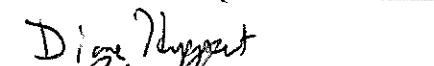
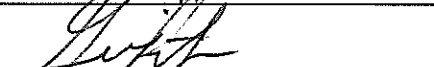
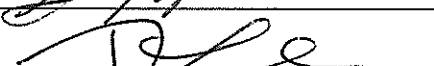

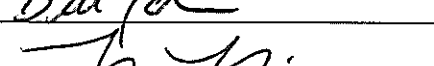

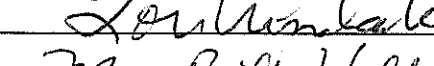


(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin (name of municipality)</div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		
Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>		Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		
Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>						

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.

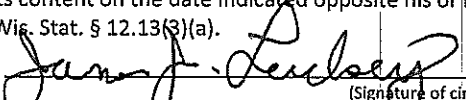
The municipality used for mailing purposes, when different than municipality of residence, is not sufficient. The name of the municipality of residence must always be listed.

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 Niedziejko	7186 S. Madison Ct Fr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/2023
	Maura Niedziejko	7196 S. Madison Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Diane Huppert	7187 Hillendale Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	GORAN RISTIC	7209 S. HILLENDALE DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/9/23
	Nicole Lorino	7227 S Hillendale Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	BILL TOBIN	7263 S. HILLENDALE DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/9/23
	Tammy Tobin	7263 S. Hillendale Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Lori + trinidad	7299 Hillendale	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Mery Beth Hill	7341 S Hillendale Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Christina Wagner	4119 W Minnesota Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23

CERTIFICATION OF CIRCULATOR

I, James J. Luckey (Name of circulator) certify: I reside at 4925 W. Rawson Ave. Franklin, WI 53132. (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).

Dec 19, 2023 (Date)  (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin (name of municipality)</div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		
				Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h2 style="text-align: center;">April 2, 2024</h2>		
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		

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.	Yousef HASAN	6939 S. 50th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/12/23
2.	Salwa HASAN	6939 S. 50th	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
3.	Beth Ciche	8128 S. 43rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
4.	Dennis Ciche	8128 S. 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
5.	B. Kuhn	5125. 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
6.	ASHWANI	8098 S. 43 St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/13/23
7.	Ali Handan	8051 S. 43rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/13/23
8.	Atul Chaudhan	8089 S. 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
9.	Tim Mierendorf	8105 S 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
10.	Chris Mierendorf	8105 S 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23

CERTIFICATION OF CIRCULATOR

I, James J. Luckey (Name of circulator) certify: I reside at 4925 W. Agawam Ave. Franklin, WI. 53132. (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).

Dec. 19, 2023
(Date)

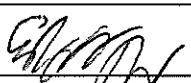
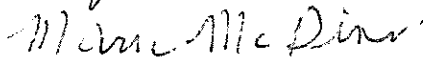
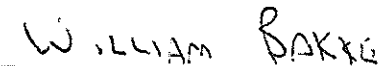

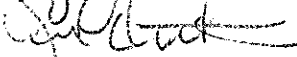
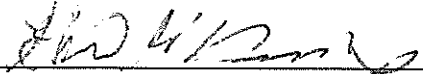
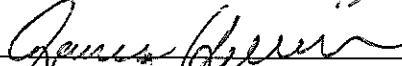
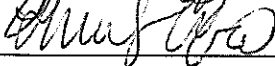


(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Steve F. Taylor		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 2812 West Hilltop Lane		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin <small>(name of municipality)</small>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) WI	Zip code 53132	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	
Election date (required) <i>Do not use primary date.</i> April 2, 2024		Title of office (required) Milwaukee County Supervisor		Name of jurisdiction or district in which candidate seeks office (required) District 17	
Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat 17					

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.

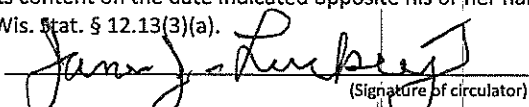
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Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
	Edward Wagan	4119 W Minnesota Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/05/23
	Marie McGinnis	4309 W. Minnesota Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/09/23
	William Bakke	4309 W Minnesota Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/9/23
	Julie Modlinski	4202 W. Minnesota Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/7/23
	JOEL CRITHMAN	7297 COUNTRYSIDE DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/9/23
	Gina Duvreux	7244 Countryside Ct.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/9/23
	James Hillesheim	4371 W Forest Hill Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
	Theresa Grove	8216 S 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
	DIANA SWANSON	8146 S 43RD ST	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12.13.23
	Masood Ahmad	8160 S 43 St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23

I, James J. Luckey (Name of circulator) certify: I reside at 4925 W. Rawson Ave. Franklin, WI 53132 (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).

Dec. 19, 2023
(Date)


(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin <small>(name of municipality)</small></div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		
Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>		Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>			Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>	
Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>						

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.

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Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
	Olivia Owsianny	8201 S 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
	Glenn Putnam	8231 S. 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-13-23
	Christine Putnam	8231 S. 43rd St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-13-23
	David B. Berman	4342 W. Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-13-23
	Made Temple	8262 S. 44th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-13-23
	Margaret Temple	8262 S. 44th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
	John Krueger	8251 S. 44th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
	JUDITH FISHER	8251 S 44th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-13-23
	Steven Fisher	3857 W. Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-13-23
	Heidi Fischer	3845 W Forest Hill	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-14-23

I, James J. Luckey (Name of circulator) certify: I reside at 4925 W. Rawson Ave, Franklin, WI 53132 (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).

Dec 19, 2023 (Date) (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin <small>(name of municipality)</small></div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	
Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>		Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>	
Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>					

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 <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
	Kathleen Maldonis	5007 W RAWSON AVE FRANKLIN WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	Dec 14 2023
	Alayna Fischer	3845 W FOREST + MILWAUKEE FRANKLIN WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	Dec 14 2023
	Robert Redmerski	8210 S. Lakeview DR FRANKLIN, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	Dec 14 2023
	Bryson Brugger	3772 S. Lakeview	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	Dec 4 2023
	Brian Brugger	8772 S. Lakeview	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	Grace Matvein	4034 W. Anthony	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	DAVID GUEHLSTORF	4050 W. Anthony	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-4-23
	JULIE GUEHLSTORF	4050 W. Anthony	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-4-23
	Michael P. Steffen	4106 W. Anthony Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	June K Teegarden	4051 W. Anthony Drive	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23

CERTIFICATION OF CIRCULATOR

I, James J. Luckey (Name of circulator) certify: I reside at 4925 W. Rawson Ave. Franklin, WI 53132 (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).

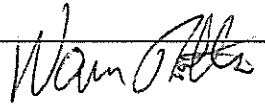

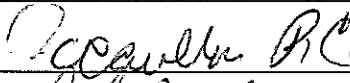
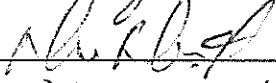
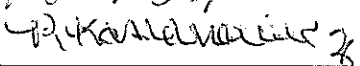
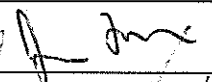
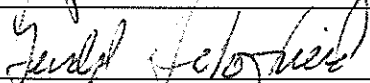

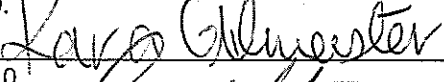
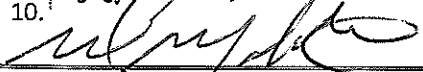
Dec. 19, 2023
(Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>	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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>	Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin <small>(name of municipality)</small></div>		
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)	State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>	Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>	Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		

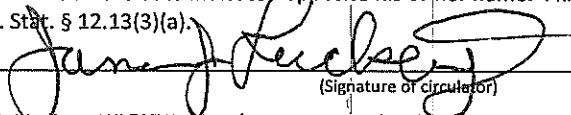
I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction 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 <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	WARREN SOTZ	8148 S. LAKEVIEW DR.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	Aaron Kanack	3818 w Valley View Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	Jacquelyn R Cooke	3838 Valley View Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/22
	Don Dierke	4017 W. Valley View Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/22
	RHONDA KASIANOWICZ	4035 W VALLEY VIEW DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/14/23
	James Onsager	4101 W. Valley View Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	Gerald Somofields	7378 Heatheridge Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	Laura Galusha	3923 Heatheridge Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
	Kara Gilmeister	4231 W Lakeview Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	2/15/23
	NEIL MAHURKE	4217 W Lakeview Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/15/23

I, James J. Luckey (Name of circulator) certify: I reside at 4925 W. Rawson Ave. Franklin WI 53132 (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).

Dec 19 2023
(Date)


(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Steve F. Taylor		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 2812 West Hilltop Lane			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin <small>(name of municipality)</small>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) WI	Zip code 53132	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		Election date (required) <i>Do not use primary date.</i> April 2, 2024
Title of office (required) Milwaukee County Supervisor		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat 17		Name of jurisdiction or district in which candidate seeks office (required) District 17		

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 <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Walter Maldonis	5007 W Rawson Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-15-2023
	Jason Jensen	4020 W Lakeview Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-15-23
	Feras Rahman	8124 S Lakeview Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-15-23
	Ema Ousdet	8124 S Lakeview Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-15-23
	Jeri Libb	3840 W Lakeview Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-15-23
	Judith Martine	3922 W Lakeview Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/15/23
	James Provl	3938 W Lakeview Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/15/23
	Elton Hoxh	4345 W White Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/15/23
	Cody Hyason	4107 W Amberidge Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/17/23
	Tom Kubiszewski	4195 W Amberidge Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-17-23

CERTIFICATION OF CIRCULATOR
 I, James J. Luckey certify: I reside at 4925 W Rawson Ave
(Name of circulator) (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).



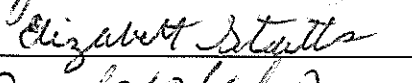
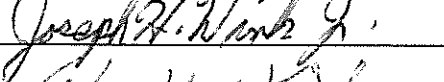
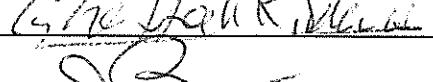
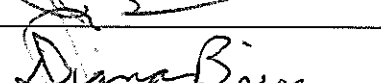
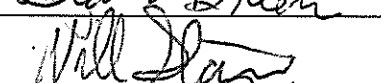
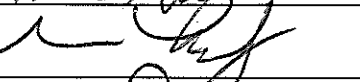

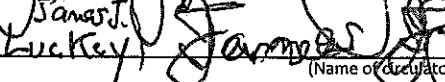
Dec 19, 2023 James J. Luckey
(Date) (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin (name of municipality)</div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	
				Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h2 style="text-align: center;">April 2, 2024</h2>	
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>	

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.

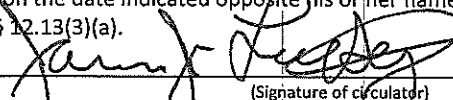
Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	Bon Olsecwski	4909 W Ransom Av	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-17-23
	Jason Statts	4127 W college ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-17-23
	Elizabeth Statts	4127 3906 W Amberidge	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-17-23
	JOE WINN JR.	3835 W MADISON BLVD.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-17-23
	Thassan Kiblan	3276 W Madison	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/17/23
	James Brien	3750 west Madison Pkwy	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/17/23
	Diana Brien	3750 W Madison Blvd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/17/23
	Will Starcewich	3791 S. 38th Str	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/17/23
	MARIAN LUCKEY	4925 W. Ransom Av	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/18/23
	James J. Luckey	4925 W. Ransom Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/19/23

CERTIFICATION OF CIRCULATOR

I, James J. Luckey (Name of circulator) certify: I reside at 4925 W. Ransom Ave. Franklin, WI 53132 (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).

Dec 19, 2023
(Date)


(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center; margin: 0;">Steve F. Taylor</h1>		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 <h2 style="text-align: center; margin: 0;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right; margin-top: 5px;">Franklin (name of municipality)</div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center; margin: 0;">WI</h1>	Zip code <h1 style="text-align: center; margin: 0;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h2 style="text-align: center; margin: 0;">April 2, 2024</h2>
Title of office (required) <h1 style="text-align: center; margin: 0;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center; margin: 0;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center; margin: 0;">District 17</h1>		

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
	Lisa Rivera	7554 S. Pine Ave.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/7/23
	Yuliana Robles Estrada	7551 S. Pine Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/2/23
	Isiah Zinda	7622 S. Pine Ave.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/7/23
	Jason Rehbein	7572 S. Pine Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/7/23
	Lisa Kavemeier	7572 S. Pine Ave.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/7/23
	ROBERT J. ANDERSON	620 E. MARION COURT	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/8/23
	Jone Roschtscha	635 E. Marion Ct.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/8/23
	Victor Roschtscha	635 E. Marion Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/8/23
	JETT WACHHOLZ	7809 S QUINCY AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/8/23
	Dennis Lappin	7690 S Quincy Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/8/23

CERTIFICATION OF CIRCULATOR

I, Thomas A. Luckey (Name of circulator) certify: I reside at 7648 S. Lenox Ave Oak Creek 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).

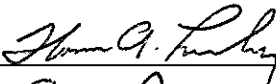


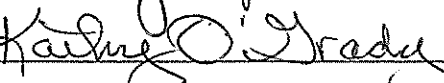
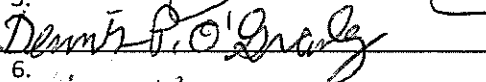

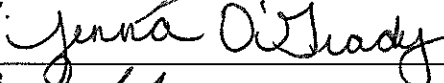

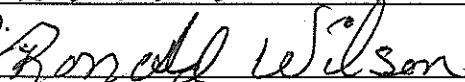

12-8-23
(Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>	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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>	Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin <small>(name of municipality)</small></div>		
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)	State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>	Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>	Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		

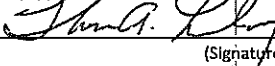
I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for him or her for the office listed above. I am eligible to vote in the jurisdiction 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 <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
1. 	THOMAS A. LUCKEY	7648 S. LENOX AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12-6-23
2. 	Steve James	7634 S. LENOX AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12-6-23
3. 	Amy James	7634 S. LENOX AVE.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/6/23
4. 	Kathy O'Grady	1024 E. MARQUETTE AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/6/23
5. 	DENNIS O'GRADY	1024 E MARQUETTE AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/6/23
6. 	Alex Herring	1009 E MARQUETTE AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/7/23
7. 	Jenna O'Grady	1024 E MARQUETTE AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/7/23
8. 	RICH R. LABODDA	1124 E. MARQUETTE AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12-19-23
9. 	RONALD WILSON	7275 S QUINCY	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12-7-23
10. 	LINDA M. WILSON	7275 S QUINCY AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12-7-23

I, Thomas A. Luckey certify: I reside at 7648 S. Lenox Ave Oak Creek
(Name of circulator) (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).

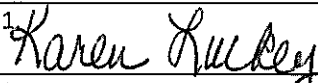


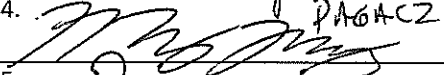
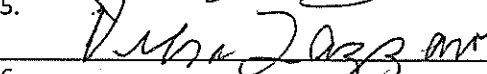
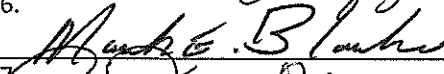
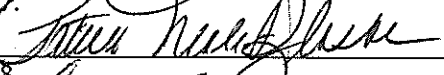



12-7-23
(Date)


(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

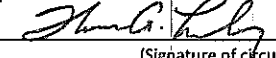
Candidate's name (required); no titles may be used. <h1 style="text-align: center; margin: 0;">Steve F. Taylor</h1>		Candidate's residential address (required) <i>No P.O. box addresses</i> Street, fire, or rural route number; box number (if rural route); and name of street or road <h2 style="text-align: center; margin: 0;">2812 West Hilltop Lane</h2>		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right; margin-right: 50px;">Franklin (name of municipality)</div>		
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center; margin: 0;">WI</h1>	Zip code <h1 style="text-align: center; margin: 0;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h2 style="text-align: center; margin: 0;">April 2, 2024</h2>
Title of office (required) <h1 style="text-align: center; margin: 0;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center; margin: 0;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center; margin: 0;">District 17</h1>		

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. 	Karen Luckey	7648 S. Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-6-23
2. 	Ryan Rerch	7655 S. Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-6-23
3. 	Staci Pagacz	7625 S Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-6-23
4. 	Marcin Pagacz	7625 S. Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-6-23
5. 	DEBRA LAZZAROLO	7619 S. Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-7-23
6. 	MARKE BLASKO	7575 S. Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-7-23
7. 	PATRICE NEALE-BLASKO	7575 S. Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-7-23
8. 	Andrew Wittmann	7560 S Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-7-23
9. 	Meredith Wittmann	7560 S. Lenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-7-23
10. 	Theodore Schubert	7554 S Park Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12-7-23

I, Thomas A. Luckey (Name of circulator) certify: I reside at 7648 S. Lenox Ave Oak Creek (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).

12-7-23 (Date)  (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>			Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right;">Franklin <small>(name of municipality)</small></div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center;">WI</h1>	Zip code <h1 style="text-align: center;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special		Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> <h2 style="text-align: center;">April 2, 2024</h2>
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center;">17</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>		

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 <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
1.	Randall Zinda	7622 S Pine Ave Oak Creek, WI 53154	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/8/23
2.	ROBERT Marshall	7607 S PINE AVE OAK CREEK, WI 53154	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/9/23
3.	CODY GRAFF	815 E MANITOWOC AVE OAK CREEK WI, 53154	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/8/23
4.	STEVEN KRUSZKA	825 E MANITOWOC AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/8/23
5.	Kayla Graff	815 E MANITOWOC AVE OAK CREEK, WI 53154	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/8/23
6.	ROBERT FEISTER	2522 W. COLONIAL WOODS DR OAK CREEK, WI 53154	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OAK CREEK	12/9/23
7.	ERU Gonzalez	7710 S. Pine Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/8/23
8.	Olga Gonzalez	7710 S. Pine Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/8/23
9.	Kristina L Reich	7655 Blenox Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oak Creek	12/8/23
10.	Neil Gifford	3009 W College Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/10/23

I, Thomas A. Luckey (Name of circulator) certify: I reside at 7648 - S Lenox Ave Oak Creek (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).

12-18-23
(Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center;">Steve F. Taylor</h1>		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 <h2 style="text-align: center;">2812 West Hilltop Lane</h2>		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin <small>(name of municipality)</small>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) WI	Zip code 53132	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u> April 2, 2024
Title of office (required) <h1 style="text-align: center;">Milwaukee County Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat 17		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center;">District 17</h1>	

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 (<i>No P.O. Box Addresses</i>) Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
1.	JANET WILTZIUS	9148 828th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/13/2023
2.	JOE REMISZEWSKI	2930 W. CENTRAL AVE.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/13/23
3.	CYNTHIA REMISZEWSKI	2930 W. CENTRAL AVE	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/13/23
4.	Remiro ESPINOZA	9108 S 28th ST.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
5.	Diana Espinoza	9108 S. 28th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/14/23
6.	Cathy Himsel	8048 S. Susanna	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/19/23
7.	Jill Pinter	3410 W. Oakwood Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/19/23
8.	Mohamed Khalek	4918 W Puetz Rd	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/19/23
9.	SUSAN M. TABAT	9159 S. 28th St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/19/23
10.	Alan Pinter	3410 W. OAKWOOD RD	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12/19/23

I, Steve F. Taylor (Name of circulator) certify: I reside at 2812 W Hilltop Ln Franklin WI 53132 (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).

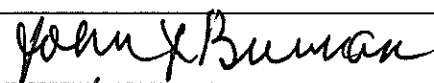

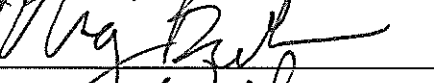
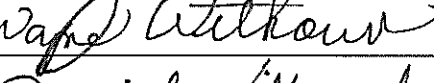
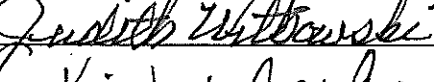
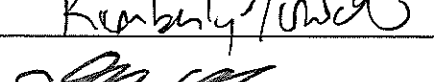
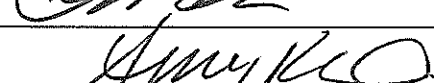
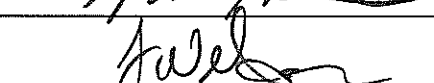
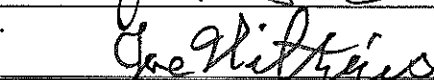
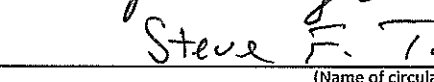
12-20-23 (Date) (Signature of circulator)

FD-159 (Rev. 2010) U.S. Wisconsin Elections Commission, P.O. Box 7084, Madison, WI 53707-7084, 608-261-2030, www.wisconsin.gov/elections

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="text-align: center; margin: 0;">Steve F. Taylor</h1>		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 <h2 style="text-align: center; margin: 0;">2812 West Hilltop Lane</h2>		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <div style="text-align: right; margin: 0;">Franklin (name of municipality)</div>	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) <h1 style="text-align: center; margin: 0;">WI</h1>	Zip code <h1 style="text-align: center; margin: 0;">53132</h1>	Type of election (required) <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	
Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h2 style="text-align: center; margin: 0;">April 2, 2024</h2>		Title of office (required) <h1 style="text-align: center; margin: 0;">Milwaukee County Supervisor</h1>		Name of jurisdiction or district in which candidate seeks office (required) <h1 style="text-align: center; margin: 0;">District 17</h1>	
Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat <h1 style="text-align: center; margin: 0;">17</h1>					

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. 	JOHN V. BRENNAN	2974 W. HILLTOP LN	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-8-23
2. 	Steve Bucher	2824 W Hill Top Ln	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-9-23
3. 	Mary Beth Bucher	2824 W. Hilltop Lane	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-9-23
4. 	WAYNE D. WITKOWSKI	3435 W. SOUTHWOOD DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12-9-23
5. 	JUDITH WITKOWSKI	" " "	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City "	12-9-23
6. 	Kimberly Nowak	2927 W Cental Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-9-23
7. 	Chuck Nowak	" "	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-9-23
8. 	Amy Dietrich	2836 W. Hilltop Lane	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Franklin	12-9-23
9. 	JOSE W GONZALEZ	" "	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City "	12-9-23
10. 	JOE WILCZUS	9148 S 285T	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FRANKLIN	12/12/23

I, Steve F. Taylor (Name of circulator) CERTIFICATION OF CIRCULATOR certify: I reside at 2812 W Hilltop Ln Franklin WI 53132 (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).

12-20-23

(Date)



(Signature of circulator)

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