

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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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.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	VOTING MUNICIPALITY OF RESIDENCE <small>(Indicate Town, City, or Village)</small>	DATE OF SIGNING	CC
1. Kim Lewis	<i>Kim Lewis</i>	Street: 3333 Goldings Ave City: Sheb Falls Zip: 53085	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sheb Falls	12/13/2011 <small>(Month) (Day) (Year)</small>	Email Phone ()
2. Paul Fiedler	<i>Paul Fiedler</i>	Street: 2763A S. Adams Av. City: Milwaukee Zip: 53207	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Milwaukee	12/13/2011 <small>(Month) (Day) (Year)</small>	Email Phone ()
3. Liza Mathson	<i>Liza Mathson</i>	Street: 4615 W. Anthony Dr. City: Greenfield WI Zip: 53219	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Greenfield	12/13/2011 <small>(Month) (Day) (Year)</small>	Email Phone ()
4. Daffy Duck	<i>Daffy Duck</i>	Street: 123 Looney St City: Milwaukee Zip: WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sheb Falls	12/13/2011 <small>(Month) (Day) (Year)</small>	Email Phone ()
5. Randall Ruehl	<i>Randall Ruehl</i>	Street: 842 Tallgrass Pt City: Grafton Zip: 53217	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Grafton	12/13/2011 <small>(Month) (Day) (Year)</small>	Email Phone ()
6. Michael Rod	<i>Michael Rod</i>	Street: 929 N. Washville Rd City: Oconomowoc Zip: 53066	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Summit	12/13/2011 <small>(Month) (Day) (Year)</small>	Email Phone ()
7.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20 <small>(Month) (Day) (Year)</small>	Email Phone ()
8.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20 <small>(Month) (Day) (Year)</small>	Email Phone ()
9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20 <small>(Month) (Day) (Year)</small>	Email Phone ()
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	1/20 <small>(Month) (Day) (Year)</small>	Email Phone ()

Certification of Circulator

I, ZACHARY ANDERSON (Name of Circulator), (certify) I reside at 1530 W. WISCONSIN AVE #108 (Circulator's Residence - Street name and Number) MILWAUKEE (Circulator Municipality).

I personally circulated this recall petition and personally obtained each of the signatures on this page. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

12 / 13 / 20 11 (Month) (Day) (Year)
Zachary Anderson (Signature of Circulator)

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083493

Circulators:
Phone
Email