

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Aaron Jeramie Loudenslager		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 135 Weed Street		Candidate's municipality for voting purposes (required) ☐ Town ☐ Village ☒ City Antigo (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 4308 Buckeye Road, Madison, WI 53716		State (required) WI	Zip code 54409	Type of election (required) ☒ spring ☐ special	Election date (required) <i>Do not use primary date.</i> Mo/Day/Year 04/06/2021
Title of office (required) Wisconsin Court of Appeals Judge		Branch, district or seat number (required if applicable) ☐ Branch ☒ District ☐ Seat 3		Name of jurisdiction or district in which candidate seeks office (required) State of Wisconsin	

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. ☐ Town ☐ Village ☐ City
1.			☐ Town ☐ Village ☐ City
2.			☐ Town ☐ Village ☐ City
3.			☐ Town ☐ Village ☐ City
4.			☐ Town ☐ Village ☐ City
5.			☐ Town ☐ Village ☐ City
6.			☐ Town ☐ Village ☐ City
7.			☐ Town ☐ Village ☐ City
8.			☐ Town ☐ Village ☐ City
9.			☐ Town ☐ Village ☐ City
10.			☐ Town ☐ Village ☐ City

CERTIFICATION OF CIRCULATOR

I, _____ (Name of circulator) certify: I reside at _____ (Circulator's residential address - Include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).