



NOMINATION PAPER FOR PARTISAN OFFICE

Candidate's name (required); no titles may be used. Josh Pade		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 18920 128th Street		Candidate's municipality for voting purposes (required). <input type="checkbox"/> Town of <input checked="" type="checkbox"/> Village of <input type="checkbox"/> City of (name of municipality). Bristol	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) PO Box 2243 Kenosha 53141		State (required) WI	Zip code 53104	Type of election (required) <input checked="" type="checkbox"/> general <input type="checkbox"/> special	General Election date (required) <u>Mo/Day/Year</u> 11/03/2020
Title of office (required) Representative in Congress		District or Jurisdiction (required if applicable) <input checked="" type="checkbox"/> District number <input type="checkbox"/> Jurisdiction (county) 1st		Name of jurisdiction or district in which candidate seeks office (required) Wisconsin's First Congressional District	

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 representing the party or statement of principle indicated above, so that voters will have the opportunity to vote for ☒ him or ☐ her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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

Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no)	Municipality of Residence Check the type and write the name of your municipality for voting purposes <input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	Date of Signing <u>Mo/Day/Year</u>
1.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
2.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
3.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
4.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
5.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
6.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
7.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
8.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
9.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020
10.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ /2020

CERTIFICATION OF CIRCULATOR

I, _____, certify: I reside at _____.

(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).

(Date)

(Signature of circulator)

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Pade for Congress Nomination Signatures Instructions

- **Thank you for helping get Josh on the ballot.** You can only sign these papers if you live in the 1st Congressional District. You can look up your district <https://www.house.gov/representatives/find-your-representative>
- **Signatures and Printed Names of Electors** - Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their residential address (no P.O. Box addresses), including any street, fire or rural route number, box number (if rural route) and street or road name and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable.
- A person may sign only **one** nomination paper for a candidate for a Congressional District in an election period.
- You do not need to be registered to vote to sign the petition but rather eligible to register and vote. That generally means 18 years or older, a U.S. Citizen, you have lived in the district for at least 10 days, and you have not lost the right to vote due to a criminal felony conviction for which the person is currently on probation, parole or extended supervision.
- **Signature of Circulator** - The circulator should carefully read the language of the Certification of Circulator. **The circulator must personally present the nomination paper to each signer. The nomination paper may not be left unattended on counters or posted on bulletin boards.** The circulator's complete residential address including municipality of residence must be listed in the certification. After obtaining signatures of electors, the circulator must sign and date the certification.
- If your nomination papers **ONLY** have your name or ONE name, signature and address, that's not a problem. You should sign and date the "Certification of Circulator" at the bottom and mail this back to the campaign.
- Please return the form as soon as possible, preferably no later than May 20th. They cannot be emailed, texted, scanned or faxed. They must be sent in by mail to:

Pade for Congress, PO Box 2243 Kenosha, WI 53141

If you have questions or need assistance, please email signatures@padeforcongress.com or call (262) 358-9978

Thank you for your support -- please stay safe and healthy!

