

Nomination Paper for PARTISAN OFFICE  
I, the undersigned, request that the name of

# Ron Johnson

residing at 5171 Island View Drive, Town of Oshkosh, Wisconsin, 54901 be placed on the ballot at the general election to be held on November 2, 2010, as a candidate representing the Republican Party so that voters will have the opportunity to vote for him for the office of United States Senator. I am eligible to vote in the state of Wisconsin. I have not signed the nomination paper of any other candidate for the same office at this election.



- ✓ Bring fiscal sanity and accountability to Washington, DC.
- ✓ Job creator and successful business owner, not a politician.
- ✓ Father of three and community leader.

**RON JOHNSON**  
U.S. SENATE

For America. For You.  
For Wisconsin.

[www.RonJohnsonforSenate.com](http://www.RonJohnsonforSenate.com)

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	PRINT NAME	STREET & NUMBER OR RURAL ROUTE RURAL ADDRESS MUST ALSO INCLUDE BOX OR FIRE NO.	MUNICIPALITY OF RESIDENCE INDICATE TOWN, CITY OR VILLAGE	ZIP CODE	DATE OF SIGNING	SIGN ME UP TO HELP!
1.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
2.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
3.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
4.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
5.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
6.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
7.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
8.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
9.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson
10.			<input type="checkbox"/> TOWN <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE		__ / __ /10	<input type="checkbox"/> I want to help elect Ron Johnson

**CERTIFICATION OF CIRCULATOR**

\_\_\_\_\_ (date)

I, \_\_\_\_\_, certify:  
(name of circulator)

I, reside at \_\_\_\_\_  
(Circulator's residence - Include number, street, and municipality.)

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 § 12.13 (3)(a), Wis. Stats.

\_\_\_\_\_ (signature of circulator)