

FOR OFFICE USE ONLY

DEC 28 2004

VILLAGE OF SHOREWOOD

DECLARATION OF CANDIDACY

(See instructions for preparation on back)

Is this an amendment? Yes No

I, Guy Johnson, being duly sworn, state that
(Candidate's name)

I am a candidate for the office of Shorewood Village Trustee
(Official name of office - Include district, branch or seat number)

representing _____
(Name of political party or statement of principle - five words or less)

and I meet or will meet at the time I assume office the applicable age, citizenship, residency and voting qualification requirements, if any, prescribed by the constitutions and laws of the United States and the State of Wisconsin, and that I will otherwise qualify for office, if nominated and elected.

I have not been convicted of a felony in any court within the United States for which I have not been pardoned. I have not been convicted of a misdemeanor involving a violation of public trust for which I have not been pardoned.

My present municipality of residence for voting purposes is:

2423 E. Shorewood Blvd Shorewood, WI

(Candidate's address for voting purposes - Include the number, street, and municipality where the candidate resides.)

My name as I wish it to appear on the official ballot is as follows:

Guy Johnson

(Any combination of first name, middle name or initials with surname. A nickname may replace a legal name.)

[Signature]
(Signature of candidate)

STATE OF WISCONSIN)
County of Milwaukee) ss.
(County of notarization)

Subscribed and sworn to before me this 28 day of December 2004

Kathleen E. Greig
(Signature of person authorized to administer oaths)

NOTARY SEAL
NOT REQUIRED

My commission expires 11-6-05 or is permanent.

Notary Public or _____
(Official title if not a notary)

EB-162 (Rev. 5/97) (Y2K 5/99) The information on this form is required by §8.21, Stats., Art. XIII, Sec. 3, Wis. Const., and must be filed with the filing officer in order to have a candidate's name placed on the ballot. §§8.05 (1)(j), 8.10 (5), 8.15 (4)(b), 8.17 (2), 8.20 (6), 120.06 (6)(b), Stats.

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DEC 06 2004

VILLAGE OF SHOREWOOD

CAMPAIGN REGISTRATION STATEMENT STATE OF WISCONSIN

EB-1

FOR OFFICE USE ONLY

IF A CANDIDATE DOES NOT FILE THIS STATEMENT BY THE DEADLINE FOR FILING NOMINATION PAPERS,
THE CANDIDATE'S NAME WILL NOT BE PLACED ON THE BALLOT.

NOTICE: ANY CHANGE OF INFORMATION ON THIS REGISTRATION STATEMENT MUST BE FILED WITHIN 10 DAYS.

IS THIS AN AMENDMENT? Yes No

1. CANDIDATE AND CANDIDATE COMMITTEE INFORMATION

Name of Candidate Guy Johnson	Party Affiliation —	Office Sought (include district or branch number) Trustee - Village of Shorewood
Residence Address (number and street) 2423 E. Shorewood Blvd	Primary Date 2/15/05	Candidate Telephone Number (residence) 414.332.2475
City, State and Zip Code Shorewood, WI 53211	Election Date 4/5/05	Candidate Telephone Number (employment) 414.229.5685
Campaign Committee Name (if any) Check One: <input checked="" type="checkbox"/> Personal Campaign Committee <input type="checkbox"/> Support Committee Friends of Guy Johnson		
Campaign Committee Address (if different than above) - Number, Street, City, State and Zip Code		
Telephone Number (if different than above)		

2. POLITICAL COMMITTEE INFORMATION

(For use ONLY by Political Action Committees, Political Party Committees, Political Groups, etc.)

Name of Committee
Address - Number, Street, City, State and Zip Code
Telephone Number
Sponsoring Organization - Name and Complete Address
Acronym (if any)
Type of Committee:
A. <input type="checkbox"/> Special Interest Committee (PAC) <input type="checkbox"/> Resident Committee <input type="checkbox"/> Nonresident Committee <input type="checkbox"/> Incorporated Labor Organization - Attach Information Required by s.11.05(3)(n), Stats.
B. <input type="checkbox"/> Political Party Committee <input type="checkbox"/> National <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Other _____
C. <input type="checkbox"/> Legislative Campaign Committee - Attach Statement Required by s.11.05(3)(o), Stats.
D. <input type="checkbox"/> Political Group (Referendum) _____ <input type="checkbox"/> Support <input type="checkbox"/> Oppose Name of Referendum
E. <input type="checkbox"/> Recall Committee _____ <input type="checkbox"/> Support Recall <input type="checkbox"/> Oppose Recall Name of Officer Subject to Recall - Attach Statement Required by s.9.10(2)(d)
F. <input type="checkbox"/> Independent Committee - Also, Complete Oath of Independent Expenditures, Form EB-6
G. <input type="checkbox"/> Individual - Also, Complete Oath of Independent Expenditures, Form EB-6

EB-1 (Rev. 12/2003) THIS FORM IS PRESCRIBED BY:

WISCONSIN STATE ELECTIONS BOARD

P.O. Box 2073, Madison, WI 53701-0073

608-266-8005, <http://elections.state.wi.us> seb@seb.state.wi.us

3. COMMITTEE TREASURER (Campaign finance correspondence is mailed to this address.)

Treasurer's Name Robert Petrie, Jr.	Telephone Number (residence) 414.332.2474
Address (number and street) 4201 N. DOWNER AVENUE	Telephone Number (employment) 414.332.2474
City, State and Zip Code SHOREWOOD, WISCONSIN 53211	

4. PRINCIPAL OFFICERS OF COMMITTEE AND OTHER CUSTODIANS OF BOOKS AND ACCOUNTS

Attach additional listing if necessary. Indicate which officers or committee members are authorized to fill a vacancy in nomination due to death of candidate by an asterisk(*). This provision only applies to independent and local nonpartisan candidates. s.8.35, Stats.

NAME	MAILING ADDRESS	POSITION

5. DEPOSITORY INFORMATION

Name of Financial Institution North Shore Bank	Account Number (Attach list of any additional accounts and deposit boxes, location, type and number, i.e., savings, checking, money market, etc.) 60907991
Address (number and street) 3970 N. Oakland Ave	City, State and Zip Code Shorewood WI 53211

CERTIFICATION

TREASURER

I, **Robert Petrie, Jr.** (print full name) certify the information in this statement is true, correct and complete.

Signature **Robert A. Petrie, Jr.**, Treasurer 12/05/2004
Date

CANDIDATE

I, **Guy Johnson** (print full name) certify the information in this statement is true, correct and complete, and that this is the only committee authorized to act on my behalf.

Signature **Guy Johnson**, Candidate 12/05/2004
Date

+++ EXEMPTION FROM FILING CAMPAIGN FINANCE REPORTS s.11.05(2r), Stats. +++

You may be eligible for an exemption from filing campaign finance reports. Consult the Campaign Finance Instruction and Bookkeeping Manual to determine if the registrant qualifies for exemption.

This registrant is eligible for exemption. This registrant will not accept contributions, make disbursements or incur obligations in an aggregate amount of more than \$1,000 in a calendar year or accept any contribution or cumulative contributions of more than \$100 from a single source during the calendar year, except contributions by a candidate to his or her campaign of \$1,000 or less in a calendar year.

This registrant is no longer eligible to claim exemption.

Signature of Candidate or Treasurer **Robert A. Petrie, Jr.** 12/05/2004
Date

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name as it will appear on the ballot; no abbreviations or titles may be used. Guy Johnson			Street, fire, or rural route number, box number (if rural route); and name of street or road 2423 E. Shorewood Blvd.		
Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date April 5, 2005
Title of office Trustee		Branch district or seat number <input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office Village of Shorewood	

I, the undersigned, request that the candidate, whose name and 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	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Louie Chavez</i>	<i>4308 N. Newhall</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-11-04</i>
2. <i>Kathy Chavez</i>	<i>4308 N Newhall</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/11/04</i>
3. <i>Edwin Bousch</i>	<i>4458 N. Morris</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-11-04</i>
4. <i>Denise Cassidy</i>	<i>4321 N. Maryland</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-11-04</i>
5. <i>Tom Phillips</i>	<i>4321 N. Maryland Shorewood, WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/11/04</i>
6. <i>Julie Pavlak</i> <small>Julie Pavlak</small>	<i>4462 N. MORRIS BLVD SHOREWOOD WI</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/30/04</i>
7. <i>Don Pavlak</i> <small>Don Pavlak</small>	<i>4462 N MORRIS S 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/13/04</i>
8. <i>Sonja Tucker</i> <small>Sonja Tucker</small>	<i>4470 N. Morris Shorewood 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/20/04</i>
9. <i>Kirk Tucker</i> <small>Kirk Tucker</small>	<i>4470 N. MORRIS BLVD Shorewood WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/20/04</i>
10. <i>Laurie Glass</i> <small>Laurie Glass</small>	<i>4520 N. Bartlett SHOREWOOD WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/29/04</i>

I, *Mary J. Baird* CERTIFICATION OF CIRCULATOR, certify:
(Name of circulator)

I reside at *4458 N. Morris Blvd, Shorewood, WI 53211*
(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 S. 12.13(3)(a), Wis. Stats.

12-11-04
(Date)

Mary J. Baird
(Signature of circulator)

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DEC 28 2004

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name as it will appear on the ballot; no abbreviations or titles may be used. Guy Johnson			Street, fire, or rural route number, box number (if rural route); and name of street or road 2423 E. Shorewood Blvd.			
Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date April 5, 2005	
Title of office Trustee		<input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Branch district or seat number Village of Shorewood		

I, the undersigned, request that the candidate, whose name and 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	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Ann R. Piehl</i>	<i>2317 E. Menlo Blvd Shorewood, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-12-04</i>
2. <i>Richard F. Piehl</i>	<i>2317 E. Menlo Blvd. Shorewood, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-12-2004</i>
3. <i>Katharine E. McDonnell</i>	<i>3812 N. Jarwell Shorewood, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-12-2004</i>
4. <i>Ann Marie Starr</i>	<i>4153 N. Morris Shorewood WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-13-04</i>
5. <i>Michael A. McCauley</i>	<i>3833 N. Prospect Ave Shorewood WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-13-04</i>
6. <i>Patricia McCauley</i>	<i>3833 N. Prospect Ave Shorewood, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-14-04</i>
7. <i>[Signature]</i>	<i>4304 N. Ardmore Shorewood WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-14-04</i>
8. <i>[Signature]</i>	<i>3938 N. Stowell Ave Shorewood, WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-14-04</i>
9. <i>[Signature]</i> <small>Patricia Ballman</small>	<i>4606 N. Woodlawn Shorewood</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-14-04</i>
10. <i>[Signature]</i> <small>Larry Jost</small>	<i>2637 E. Beverly Shorewood WI 53211</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/14/04</i>

CERTIFICATION OF CIRCULATOR

I, *Michael S. McCauley*, certify:
(Name of circulator)
 I reside at *3833 N. Prospect Ave, Shorewood WI 53211*
(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 S. 12.13(3)(a), Wis. Stats.

12/14/04
(Date)

Michael S. McCauley
(Signature of circulator)

EB-169 (Rev. 6/2003) The information on this form is required by SS. 8.10, 8.15, 8.50, 120.06, Wis. Stats. This form is prescribed by the State Elections Board, P.O. Box 2973, Madison, WI 53701-2973 608 266-8005. <http://elections.state.wi.us> seb@seb.state.wi.us

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NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name as it will appear on the ballot; no abbreviations or titles may be used. Guy Johnson			Street, fire, or rural route number; box number (if rural route); and name of street or road. 2423 E. Shorewood Blvd.		
Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date April 5, 2005
Title of office Trustee	<input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat Branch district or seat number		Name of jurisdiction or district in which candidate seeks office Village of Shorewood		

I, the undersigned, request that the candidate, whose name and 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	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE. Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Vida Langenkamp</i>	4460 N. Lake Dr. Shorewood, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/12/04
2. <i>Mike Charney</i>	4147 N. Franklin Shorewood, WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/12/04
3. <i>Sally Lester</i>	4464 N. Ditzell Lane Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/12/04
4. <i>James Langenkamp</i>	4460 N. Lake Dr. Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/13/04
5. <i>Maki</i>	4429 N. Maryland Ave. Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
6. <i>Mary Jo Sims</i>	4460 4460 N. Lake Dr. Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/14/04
7. <i>John Hunt</i>	2609 E. Olive St. Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
8. <i>Rene Gratz</i>	4449 N. Maryland Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
9. <i>Bart Schulte</i>	4400 N. Maryland Shorewood WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
10. <i>Lynn Study</i>	4454 N. Maryland Ave Shorewood, WI 53211	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04

CERTIFICATION OF CIRCULATOR
 I, Vida G. Langenkamp (Vida) Langenkamp, certify:
 (Name of circulator)
 I reside at 4460 N. Lake Dr. Shorewood, WI 53211.
 (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 S. 12.13(3)(a), Wis. Stats.
12.18.04
 (Date)
Vida Langenkamp
 (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name as it will appear on the ballot; no abbreviations or titles may be used. Guy Johnson			Street, fire, or rural route number; box number (if rural route); and name of street or road. 2423 E. Shorewood Blvd.			
Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date April 5, 2005	
Title of office Trustee		Branch district or seat number <input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office Village of Shorewood		

I, the undersigned, request that the candidate, whose name and 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	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Sue A. Ewens</i>	<i>2213 E. Kensington</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-16-05</i>
2. <i>Robert Dean</i>	<i>3934 N. Ridgely Cr. Robt. Dean, Jr.</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12-16-04</i>
3. <i>[Signature]</i>	<i>3940 N. Ridgely Cr. Shep Davis</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/18/04</i>
4. <i>Liz Davis</i>	<i>3940 N. Ridgely Cr. Liz Davis</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/18/04</i>
5. <i>Karen Dean</i>	<i>3934 N. Ridgely Cr. Karen Dean</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/19/04</i>
6. <i>Richard White</i>	<i>3909 N. Ridgely Cr. Richard White</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/19/04</i>
7. <i>Mary White</i>	<i>3909 N. Ridgely Cr. Mary White</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/19/04</i>
8. <i>Rodney Dow</i>	<i>4314 N. Stowell Rodney Dow</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/19/04</i>
9. <i>Anne Dow</i>	<i>4314 N. Stowell</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/19/04</i>
10. <i>Charlene Lynch</i>	<i>Charlene Lynch 2115 E. Olive St.</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	<i>12/19/04</i>

CERTIFICATION OF CIRCULATOR

I, Robert W. Dean, certify:

I reside at 3934 N. Ridgely Cr., Shorewood
(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 S. 12.13(3)(a), Wis. Stats.

12-19-04

(Date)

Robert W. Dean

(Signature of circulator)

EB-169 (Rev.6/2003) The information on this form is required by SS. 8.10, 8.15, 8.50, 120.06, Wis. Stats. This form is prescribed by the State Elections Board, P.O. Box 2973, Madison, WI 53701-2973 608 266-8005. <http://elections.state.wi.us> seb@seb.state.wi.us

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Page No. 4

DEC 28 2004

VILLAGE OF SHOREWOOD

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name as it will appear on the ballot; no abbreviations or titles may be used. GUY JOHNSON			Street, fire, or rural route number; box number (if rural route); and name of street or road 2423 E. SHOREWOOD BLVD			
Name of municipality for voting purposes <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village SHOREWOOD <input type="checkbox"/> City	Name of municipality for mailing purposes SHOREWOOD	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date April 5, 2005	
Title of office TRUSTEE		<input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Branch district or seat number VILLAGE OF SHOREWOOD		

I, the undersigned, request that the candidate, whose name and 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	STREET & NUMBER OR RURAL ROUTE <small>Rural address must also include box or fire no.</small>	MUNICIPALITY OF RESIDENCE <small>Indicate Town, Village, or City</small>	DATE OF SIGNING
1. <i>Robert G. Petrie, Jr</i>	<i>4201 N. DOWNER AVE.</i> <small>PRINT NAME</small> <i>Robert G. Petrie, Jr</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/21/04
2. <i>Louise Petrie</i>	<i>4201 N. DOWNER AVE.</i> <i>Louise L. Petrie</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/21/04
3. <i>Patricia S. Algiers</i>	<i>2518 E. Olive St.</i> <i>Patricia S. Algiers</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/23/04
4. <i>Diane M. Buck</i>	<i>3559 The Summit Ave</i> <i>DIANE M. BUCK</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/26/04
5.		<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
6.		<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
7.		<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
8.		<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
9.		<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	
10.		<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	

CERTIFICATION OF CIRCULATOR

I, *Robert G. Petrie, Jr*, (Name of circulator) certify:
 I reside at *4201 N. DOWNER AVE, SHOREWOOD, WI*
(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 S. 12.13(3)(a), Wis. Stats.

12/27/2004
(Date)

Robert G. Petrie, Jr
(Signature of circulator)

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NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name as it will appear on the ballot; no abbreviations or titles may be used. Guy Johnson			Street, fire, or rural route number; box number (if rural route); and name of street or road 2423 E. Shorewood Blvd.		
Name of municipality for voting purposes <input checked="" type="checkbox"/> Town Shorewood <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	Name of municipality for mailing purposes Shorewood	State WI	zip code 53211	Type of election <input checked="" type="checkbox"/> spring <input type="checkbox"/> special	Election date April 5, 2005
Title of office Trustee		<input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Branch district or seat number	
Name of jurisdiction or district in which candidate seeks office Village of Shorewood					

I, the undersigned, request that the candidate, whose name and 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	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, Village, or City	DATE OF SIGNING
1. <i>Catherine Flaherty</i>	2500 E. Newton Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/12/04
2. <i>Jennifer Helleman</i>	2407 E. Newton Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
3. <i>Judith Lopez</i>	2510 E. Newton Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
4. <i>Robert R</i>	2425 E. Newton	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
5. <i>Michelle Boehm</i>	2407 E. Newton	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
6. <i>Chris M</i>	2408 E. Newton Ave	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/15/04
7. <i>Muntz Davis</i>	4321 N. MURRAY AVE	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/18/04
8. <i>Al Baker</i>	4333 N. OAKLAND AVE #204	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/18/04
9. <i>Ari Rosenthal</i>	4146 N. MURRAY AVE Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/26/04
10. <i>Karen Akud</i>	2408 E. Newton Ave Shorewood	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Shorewood	12/27/04

CERTIFICATION OF CIRCULATOR

I, Charles B. Schudson, (Name of circulator), certify:
 I reside at 2408 E. Newton Ave, Shorewood, WI
 (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 S. 12.13(3)(a), Wis. Stats.

12/26/04
 (Date)

Chris M
 RECORDED (Signature of circulator)

EB-169 (Rev. 8/2003) The information on this form is required by SS. 8.10, 8.15, 8.50, 120.06, Wis. Stats. This form is prescribed by the State Elections Board, P.O. Box 2973, Madison, WI 53701-2973 608 266-8005. <http://elections.state.wi.us> seb@seb.state.wi.us