

NOMINATION PAPER FOR NONPARTISAN OFFICE

| | | | | | |
|---|--|---|--------------------------|--|--|
| Candidate's name (required); no titles may be used. CHRIS [REDACTED] Dickinson | | 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 212205 City View Dr | | Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City <small>(name of municipality)</small> | |
| Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 212205 City View Dr, Stratford | | State (required) WI | Zip code 54484 | Type of election (required) <input checked="" type="checkbox"/> Spring <input type="checkbox"/> Special | |
| Election date (required) <i>Do not use primary date.</i> Mo/Day/Year 4/7/2026 | | Title of office (required) Marathon County Board Supervisor | | Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <input type="checkbox"/> Seat 29 | |
| | | | | Name of jurisdiction or district in which candidate seeks office (required) District 29, Marathon County | |

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 <small>(Rural address must also include box or fire no.)</small> | Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small> | Date of Signing Mo/Day/Year |
|------------------------|--------------------------------------|---|---|--------------------------------|
| | Christopher C. Dickinson | 212205 City View Drive | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/1/25 |
| | Andrew J. Dickinson | 212205 City View Drive | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/4/25 |
| | Keirstyn L. Mannigel | 213100 Muskrat Circle | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Cleveland <input type="checkbox"/> City | 12/6/25 |
| | Matthew Dickinson | 212205 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/6/25 |
| | Lyle Pospyskalla | 212133 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village STRATFORD <input type="checkbox"/> City | 12/20/25 |
| | Marjorie Pospyskalla | 212133 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| | Timothy Pochalski | 212122 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| | Lisa Denree | 212122 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| | Mary Mayer | 212114 City View DR. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| | Joseph Mayer JOSEPH MAYER | 212114 City View DR | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |

I, Chris Dickinson (Name of circulator) certify: I reside at 212205 City View Dr, Stratford, WI (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).

12/20/2025
(Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

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|---|--|---|--------------------------|--|--|
| Candidate's name (required); no titles may be used. Chris Dickinson | | 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 212205 City View Dr | | Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City <small>(name of municipality)</small> | |
| Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 212205 City View Dr, Stratford | | State (required) WI | Zip code 54484 | Type of election (required) <input checked="" type="checkbox"/> Spring <input type="checkbox"/> Special | |
| Title of office (required) Narathon County Board Supervisor | | -Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 29 <input type="checkbox"/> Seat | | Name of jurisdiction or district in which candidate seeks office (required) District 29, Narathon County | |

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.

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|--|--------------------------|---|--|--------------------------------|
| Signatures of Electors | Printed Name of Electors | Residential Address (No P.O. Box Addresses) Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small> | Municipality of Residence Check the type and write the name of your municipality for voting purposes. | Date of Signing Mo/Day/Year |
| 1. | Angela Dickinson | 212205 City View Dr. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/01/25 |
| 2. | Ken Vojtech | 212107 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
| 3. | Sheila Vojtech | 212107 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| 4. | Debra Steiner | 119023 Reflection St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| 5. | Chris Chapel | 212114 Serene St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| 6. | Cynthia Reuter | 212216 Serene St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| 7. | Ashley M Guralski | 212231 Serene St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| 8. | Brad Guralski | 212231 Serene St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/24/25 |
| 9. | Brenda Deiler | 119024 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
| 10. | Douglas Deiler | 119024 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |

I, Chris Dickinson (Name of circulator) certify: I reside at 212205 City View Dr, Stratford, WI (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).

12/20/2025
(Date)

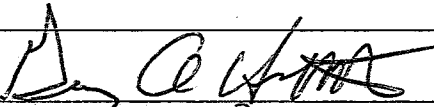
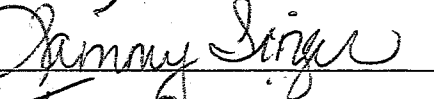
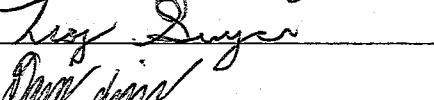
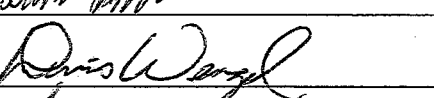
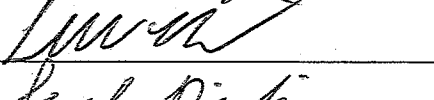
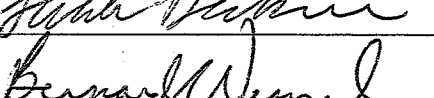
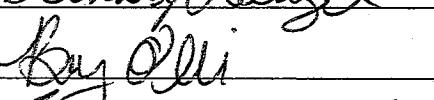
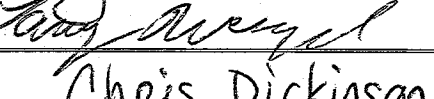
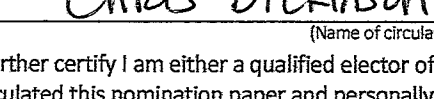
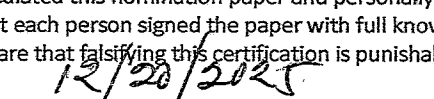
(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

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|---|--|---|--------------------------|--|--|
| Candidate's name (required); no titles may be used. Chris Dickinson | | 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 212205 City View Dr | | Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City <small>(name of municipality)</small> | |
| Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 212205 City View Dr, Stratford | | State (required) WI | Zip code 54484 | Type of election (required) <input checked="" type="checkbox"/> Spring <input type="checkbox"/> Special | Election date (required) <i>Do not use primary date.</i> Mo/Day/Year 4/7/2026 |
| Title of office (required) Marathon County Board Supervisor | | Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 29 <input type="checkbox"/> Seat | | Name of jurisdiction or district in which candidate seeks office (required) District 29, Marathon County | |


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.

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| Signatures of Electors | Printed Name of Electors | Residential Address (No P.O. Box Addresses) Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small> | Municipality of Residence Check the type and write the name of your municipality for voting purposes. | Date of Signing Mo/Day/Year |
|--|--------------------------|---|--|--------------------------------|
|  | Gary A. Huttel | 118926 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
|  | Tammy Singer | 212125 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/20/25 |
|  | Troy Singer | 212125 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
|  | Dayne Singer | 212125 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
|  | Dawnis Wenzel | 118929 Reflection Str. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
|  | Lucas Olli | 118910 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
|  | Sarah Dickinson | 212205 City View Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
|  | Bernard J. Wenzel | 118520 Monarch St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
|  | Bucky Olli | 118910 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
|  | Larry Wenzel | 119312 Logger St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |

I, **Chris Dickinson** (Name of circulator) certify: I reside at **212205 City View Dr, Stratford, WI.** (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).

12/20/2025 (Date)  (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

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| Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 212205 City View Dr, Stratford | | State (required) WI | Zip code 54484 | Type of election (required) <input checked="" type="checkbox"/> Spring <input type="checkbox"/> special | |
| Election date (required) <i>Do not use primary date.</i> Mo/Day/Year 4/7/2026 | | Title of office (required) Marathon County Board Supervisor | | Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 29 <input type="checkbox"/> Seat | |
| | | | | Name of jurisdiction or district in which candidate seeks office (required) District 29, Marathon County | |

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.

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|------------------------|--------------------------|--|---|--------------------------------|
| | Jennifer Bushman-Wenzel | 118520 Monarch St. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-20-25 |
| | Tyler Skaya | 119427 Hawk Ct. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/22/25 |
| | Brenda Skaya | 119427 Hawk Ct. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/22/25 |
| | Breleigh Skaya | 119427 Hawk Ct. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-22-25 |
| | Stacy Schnaare | 212217 cityview Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village stratford <input type="checkbox"/> City | 12-27-25 |
| | Adam Schnaare | 212217 City view Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-27-25 |
| | Rochelle Drexler | 118736 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-27-25 |
| | Steve Drexler | 118736 Trailview St. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-27-25 |
| | Calli Drexler | 118736 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12-27-25 |
| | Matthew Hessel | 118906 Reflection St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village stratford <input type="checkbox"/> City | 12-27-25 |

I, Chris Dickinson (Name of circulator) certify: I reside at 212205 City View Dr, Stratford, WI. (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).

12/27/25
(Date)

(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

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|---|--|--|--------------------------|--|--|
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| Title of office (required) Marathon County Board Supervisor | | Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 29 <input type="checkbox"/> Seat | | Name of jurisdiction or district in which candidate seeks office (required) District 29, Marathon County | |

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|------------------------------|--------------------------|---|---|--------------------------------|
| 1. <i>Charly Hessel</i> | Charly Hessel | 118906 Reflection St. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/27/2025 |
| 2. <i>Kristie Bangart</i> | Kristie Bangart | 212131 Serene St. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/27/2025 |
| 3. <i>A.K. Bent</i> | Anthony Bangart | 212131 serene st. | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/27/2025 |
| 4. <i>Daniel Wenzel</i> | Daniel Wenzel | 119125 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/27/25 |
| 5. <i>Jodi Wenzel</i> | Jodi Wenzel | 119125 Trailview St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/27/25 |
| 6. <i>Andrea Wiese</i> | Andrea Wiese | 212211 Serene St | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12/27/25 |
| 7. <i>Valerie Hoffman</i> | Valerie Hoffman | 125300 Balsam Rd | <input checked="" type="checkbox"/> Town Cleveland <input type="checkbox"/> Village Stratford <input type="checkbox"/> City | 12.27.25 |
| 8. <i>Kyle Jochimsen</i> | Kyle Jochimsen | 125174 Balsam Rd | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cleveland | 12/27/25 |
| 9. <i>Kurt Jochimsen</i> | Kurt Jochimsen | 125166 Balsam Rd | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cleveland | 12/27/25 |
| 10. <i>Chandra Jochimsen</i> | Chandra Jochimsen | 125174 Balsam Rd | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cleveland | 12/27/25 |

I, Chris Dickinson (Name of circulator) certify: I reside at 212205 City View Dr, Stratford, WI. (Circulator's residential address - include number, street, and municipality.)

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12/27/25 (Date) *Chris Dickinson* (Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

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|---|--|---|--------------------------|---|--|
| Candidate's name (required); no titles may be used. Christina Dickinson | | 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 212205 City View Dr | | Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City (name of municipality) | |
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| Election date (required) <i>Do not use primary date.</i> Mo/Day/Year 4/7/2026 | | Title of office (required) Marathon County Board Supervisor | | Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 29 <input type="checkbox"/> Seat | |
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|---------------------------|--------------------------|--|---|--------------------------------|
| 1. <i>Pam Jochimsen</i> | PAM JOCHIMSEN | 125166 Balsam Road ██████████ | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cleveland | 12/27/25 |
| 2. <i>D. Hoffmann</i> | Donniz Hoffmann | 125300 Balsam Rd ██████████ | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cleveland | 12/27/25 |
| 3. <i>Joseph B. Cable</i> | Joseph B. Cable | 212486 Spring Rd ██████████ | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Stratford | 12/27/25 |
| 4. <i>Alexandra Skaya</i> | Alexandra Skaya | 212285 majestic heights | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cleveland | 12/29/25 |
| 5. <i>Dustin Skaya</i> | Dustin Skaya | 212285 Majestic Heights | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cleveland | 12/29/25 |
| 6. <i>Kathleen Riese</i> | Kathleen Riese | 118355 State Hwy 153 | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Stratford | 12-29-25 |
| 7. <i>Theodore Riese</i> | Theodore Riese | 118355 State Hwy 153 | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Stratford | 12-29-25 |
| 8. <i>Mandy Dahl</i> | Mandy Dahl | 118310 Springfield Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Stratford | 12-29-25 |
| 9. <i>Kaedyn Dahl</i> | Kaedyn Dahl | 118310 Springfield Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Stratford | 12-29-25 |
| 10. <i>Kash Dahl</i> | Kash Dahl | 118310 Springfield Dr | <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Stratford | 12-29-25 |

I, Chris Dickinson (Name of circulator) certify: I reside at 212205 City View Dr, Stratford, WI (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).

12/29/25
(Date)

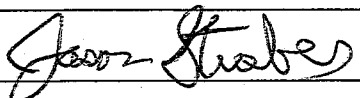
Christina Dickinson
(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

| | | | | | |
|--|--|--|--------------------------|---|--|
| Candidate's name (required); no titles may be used. Chris Dickinson | | 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 212205 CityView Dr | | Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Stratford <input type="checkbox"/> City (name of municipality) | |
| Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality) 212205 CityView Dr, Stratford | | State (required) WI | Zip code 54484 | Type of election (required) <input checked="" type="checkbox"/> Spring <input type="checkbox"/> Special | |
| Election date (required) <i>Do not use primary date.</i> Mo/Day/Year 4/7/2026 | | Title of office (required) Marathon County Board Supervisor | | Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 29 <input type="checkbox"/> Seat | |
| Name of jurisdiction or district in which candidate seeks office (required) District 29, Marathon County | | | | | |


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. | Date of Signing Mo/Day/Year |
|---|--------------------------|--|--|--------------------------------|
|  | Jason Stueber | 209855 River Run Rd. | <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Cleveland <input type="checkbox"/> City | 12/29/25 |
| | | | <input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City | |
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| | | | <input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City | |
| | | | <input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City | |

I, Chris Dickinson (Name of circulator) CERTIFICATION OF CIRCULATOR certify: I reside at 212205 City View Dr, Stratford, WI (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).

12/29/25 (Date)  (Signature of circulator)