

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. <h1 style="margin: 0;">Deb Hoppa</h1>	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 <h2 style="margin: 0;">1108 Bugbee Ave</h2>	Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village Wausau <input checked="" type="checkbox"/> City (name of municipality)
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)	State (required) <h1 style="margin: 0; text-align: center;">WI</h1>	Zip code <h1 style="margin: 0; text-align: center;">54401</h1>
Title of office (required) <h1 style="margin: 0;">County Board Supervisor</h1>	Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 7 <input type="checkbox"/> Seat	Name of jurisdiction or district in which candidate seeks office (required) <h1 style="margin: 0;">Marathon County</h1>
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 <h2 style="margin: 0;">April 7, 2026</h2>

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
	Marion Sells	1721 Tierney Rd. Wausau, WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/6/25
	Peter Sells	1721 Tierney Rd Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/6/25
	Robert Weise	1630 McCarthy Blvd Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/6/25
	Nancy L. Weise	1630 McCarthy Blvd Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/6/25
	PETER ROTH	1105 BRISBANE ST WAUSAU WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/6/25
	Timothy Morgan	1011 Brisbane Court Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/6/25
	Emily C Morgan	1011 Brisbane Ct WAUSAU, WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/6/25
	Robert T Debs	1111 BRISBANE CT	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/6/25
	Sophia A Debs	1111 Brisbane Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/6/25
	Joseph P. Hoppa	1108 Bugbee Ave WAUSAU WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/6/25

CERTIFICATION OF CIRCULATOR

I, Deb Hoppa (Name of circulator) certify: I reside at 1108 Bugbee Ave, Wausau, WI 54401 (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) 12/30/2025
(Signature of circulator)

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required); no titles may be used. Deb Hoppa		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 1108 Bugbee Ave		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village Wausau <input checked="" type="checkbox"/> City (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) WI	Zip code 54401	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 April 7, 2026	
Title of office (required) County Board Supervisor		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 7 <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office (required) Marathon County	

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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
1.	Noah P. Hoppa	1108 Bugbee Ave Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/6/25
2.	Juliana Salwach Franzen	1107 Bugbee Brisbane Ct Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/9/25
3.	William Franzen	1107 Brisbane Ct Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/9/25
4.	Dylan Kuuster	1642 Brook Ave. Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/9/25
5.	Hattie Hegoin	1640 Burek Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/9/25
6.	Matt Hoenecke	105 W Campus Drive	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/13/25
7.	Karalyn Hoenecke	105 W Campus Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/15/25
8.	Mary Goetsch	614 W Crocker St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wausau	12-15-25
9.	Richard A. Austin	1101 Bugbee Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12-17-25
10.	ETHEL TREU	1733 PLUM DR.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12-19-25

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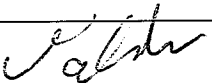

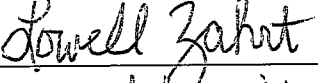
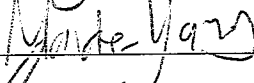
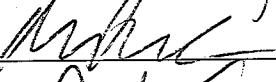
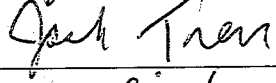

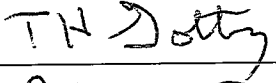
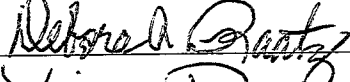
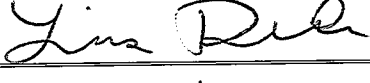
12/30/2025 (Date) (Signature of circulator)

Page 1

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)	State (required) <h1 style="text-align: center; margin: 0;">WI</h1>	Zip code <h1 style="text-align: center; margin: 0;">54401</h1>
Title of office (required) <h1 style="margin: 0;">County Board Supervisor</h1>		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District <u>7</u> <input type="checkbox"/> Seat
Name of jurisdiction or district in which candidate seeks office (required) <h1 style="margin: 0;">Marathon County</h1>		Election date (required) <i>Do not use primary date.</i> Mo/Day/Year <h2 style="margin: 0;">April 7, 2026</h2>

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.

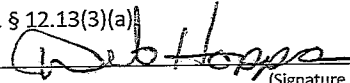
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Signatures of Electors	Printed Name of Electors	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Date of Signing Mo/Day/Year
	MIKE WALDRUM	410 STONE ^{WAUSAU}	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>WAUSAU</u>	12-17-25
	Anita Ter-Hen Waldron	410 Stone St. ^{WAUSAU}	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>WAUSAU</u>	12-17-25
	Lowell Zahrt	1722 Plum Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Wausau</u>	12-17-25
	Maider Yang	109 Mortenson DR	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Wausau</u>	12/17/25
	Michael R Sheres	1613 Mortenson Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Wausau</u>	12/17/25
	Jack Treu	1733 Plum Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Wausau</u>	12/17/25
	Fran Bickler	1634 N 1st Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Wausau</u>	12/17/25
	TH Goltz	1630 N 1st Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Wausau</u>	12/17/25
	Debora A. Raatz	110 West Bos Creek Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Wausau</u>	12/17/25
	Lindsay Doescher	105 W. Bos Creek dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Wausau</u>	12/20/25

CERTIFICATION OF CIRCULATOR

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(Name of circulator) (Circulator's residential address - include number, street, and municipality.)

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12/30/2025
(Date)


(Signature of circulator)

Hoppa

Street, tire, or rural route number; box number (if rural route); and name of street or road

1108 Bugbee Ave

Town

Village Wausau

City

(name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required)

WI

Zip code

54401

Type of election (required)

spring

special

Election date (required) Do not use primary date.

Mo/Day/Year

April 7, 2026

Title of office (required)

County Board Supervisor

Branch, district or seat number (required if applicable)

Branch

District 7

Seat

Name of jurisdiction or district in which candidate seeks office (required)

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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	Michael Doeschner	105 W Bos creek Dr	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	12/20/25
	Rebecca Buch	1721 N. 2 nd Avenue	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/20/25
	Phillip Buch	1721 N. 2 nd Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/22/25
	Paul Zierten	1629 N 1 st Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/23/25
	Brittney Zierten	1629 N 1 st Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/23/25
	JAMES E PAUL	1707 BUREK AV	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/23/25
	William Burish	1011 Bugbee Ave	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/23/25
	DEAN CARLSON	1012 Brisbane Ct	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wausau	12/23/25
	Cindy Carlson	1012 Brisbane Ct	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/23/25
	Terence Schilling	1620	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/23/25
	James E Paul	1620	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/23/25

CERTIFICATION OF CIRCULATOR

certify: I reside at

1108 Bugbee Ave, Wausau, WI 54401

(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).

12/30/2025

(Date)

(Signature of circulator)

Page No. 4

Hoppa

Street, fire, or rural route number; box number (if rural route); and name of street or road

1108 Bugbee Ave

City: Wausau (name of municipality)

Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)

State (required): WI

Zip code: 54401

Type of election (required): spring

Election date (required) Do not use primary date: April 7, 2026

Title of office (required): County Board Supervisor

Branch, district or seat number (required if applicable): District 7

Name of jurisdiction or district in which candidate seeks office (required): 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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Table with 5 columns: Signatures of Electors, Printed Name of Electors, Residential Address (No P.O. Box Addresses), Municipality of Residence, Date of Signing. Contains 10 rows of elector information.

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12/30/2025 (Date)

Deb Hoppa (Signature of circulator)

Page No. 5

Street, fire, or rural route number, box number (if rural route), and name of street or road
1108 Bugbee Ave

Town
 Village
 City

Wausau (name of municipality)

spring
 special

Election date (required) Do not use primary date.
 Mo/Day/Year
April 7, 2026

Title of office (required)
County Board Supervisor

Branch, district or seat number (required if applicable)
 Branch
 District **7**
 Seat

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Marathon County

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<i>Carol Koch</i>	Carol Koch	1602 Becher Dr.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	27th
<i>David Koch</i>	DAVID KOCH	1602 BECHER DR.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/27/25
<i>Pete Smith</i>	Pete Smith	821 W. ...	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/27/25
<i>Arlene Jensen</i>	711 W. ...	Wausau, WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	5440.
<i>Marilyn Barelk</i>	1602 Barelk Ave	Marilyn Barelk	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	54401
<i>Cheryl Lois</i>	R. HONIGSMAN LOR	1616 Pearson St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12-27-25
<i>Lois Zacher</i>	Lois Zacher	1622 Pearson St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12-27-25
<i>Karen Lewandowski</i>	Karen Lewandowski	1639 Pearson St	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12-27-25
<i>David A. Schmirler</i>	David A. Schmirler	711 Bugbee Ave.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12-27-25
<i>Marlene Schmirler</i>	Marlene Schmirler	711 Bugbee	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12-27-25

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 (Name of circulator) (Circulator's residential address - include number, street, and municipality.)

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12/30/2025
 (Date)

Deb Hoppa
 (Signature of circulator)

Page No. 4

NOMINATION PAPER FOR NONPARTISAN OFFICE

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 Hoppa 1108 Bugbee Ave		Candidate's municipality for voting purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village Wausau <input checked="" type="checkbox"/> City (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required if different than residential address or voting municipality)		State (required) WI	Zip code 54401
Title of office (required) County Board Supervisor		Name of jurisdiction or district in which candidate seeks office (required) Marathon County	
		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 April 7, 2026	
		Branch, district or seat number (required if applicable) <input type="checkbox"/> Branch <input checked="" type="checkbox"/> District 7 <input type="checkbox"/> Seat	

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1. <i>Bonnie L Sloan</i>	BONNIE L SLOAN	1635 Marten St.	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City WAUSAU	12/27/25
2. <i>Robert A Stasney</i>	Robert A Stasney	1629 Marten St Wausau WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/27/25
3. <i>Marie A Schroeder</i>	Marie A. Schroeder	1625 Marten St Wausau, WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/27/25
4. <i>Jerome L Schroeder</i>	Jerome L. Schroeder	1625 Marten St. Wausau, WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/27/25
5. <i>Margaret Cronin</i>	Margaret Cronin	311 Summit Dr. Wausau, WI 54401	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Wausau	12/29/25
6.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, *Deb Hoppa* (Name of circulator) certify: I reside at 1108 Bugbee Ave, Wausau, WI 54401 (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).

12/30/2025
(Date)

(Signature of circulator)

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