Nomination Paper of Independent Candidates for President and Vice President

I, the undersigned, request that the names of the candidates for President and Vice President of the United States listed below be placed on the ballot at the presidential election to be held on **Tuesday, November 3, 2020** as candidates representing **The Wisconsin Green Party** so that voters will have the opportunity to vote for their presidential electors listed below. I am eligible to vote in the State of Wisconsin. I have not signed the nomination paper of any other candidates for the same offices at this election.

	Name	Address		Name	Address
President:	**HOWIE HAWKINS**	**410 Beard Ave., Syracuse, NY**	Vice President:	**ANGELA WALKER**	**315 Royal St, Apt A, Florence, SC 29506**

Presidential Electors:

1st Congressional District: Pete Karas S76 W16891 Gregory Dr. unit G., Muskego WI
2nd Congressional District: Dave Schwab 20 N Franklin St., Madison WI
3rd Congressional District: Juliee De La Terre 10567 County Highway A., Viola, WI
4th Congressional District: Bill Breihan 3062 N. Cambridge Ave., Milwaukee, WI
5th Congressional District: Barbara Dahlgren 1928 S. 56th St., West Allis, WI
6th Congressional District: Jeffrey Jacobs 712 Merritt Ave., Oshkosh, WI
7th Congressional District: Jo'Nathan Kingfisher 2813 Farm Rd., Ashland, WI
8th Congressional District: Matthew Van Grinsven 1610 W. Glendale Ave., Appleton, WI
At Large: Mike McCallister 7724 W. Arthur Ave., West Allis, WI
At Large: Dennis Boyer 3302 Bethlehem Rd., Dodgeville, WI

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

Signature of Electors	Printed Name of Elector	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 (m/d/y)
1.			☐ Town ☐ Village ☐ City	
2.			☐ Town ☐ Village ☐ City	
3.			☐ Town ☐ Village ☐ City	
4.			☐ Town ☐ Village ☐ City	
5.			☐ Town ☐ Village ☐ City	
6.			☐ Town ☐ Village ☐ City	
7.			☐ Town ☐ Village ☐ City	
8.			☐ Town ☐ Village ☐ City	
9.			☐ Town ☐ Village ☐ City	
10.			☐ Town ☐ Village ☐ City	

Certification of Circulator

I, _____ certify: I reside at _____.
(Name of circulator) (Circulator's residence - include number, street, and voting 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 State of Wisconsin. 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 these candidates. I am aware that falsifying this certification is punishable under Wis. Stat. §12.13(3)(a).

_____ _____
Date – (month/day/year) (Signature of circulator)

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