



Certificate of Nomination

General Instructions: Fill in the circles as appropriate. This form is used to document the transmission of candidate information. Candidate names should be listed on the form in the order they should appear on the ballot. After entering information into WisVote, Providers should file this form for reference.

Please Review Fully

Jurisdiction Information

1	Clerk Last Name	A d k i n s																		
	Clerk First Name	A m y																		
2	School Dist.	☐ Union ☐ Unified ☐ Common	L a k e	C o u n t r y																
3	Relier Information																			
	Municipality	☐ Town ☐ Village ☐ City																		
	County																	HINDI #		
4	Provider Information																			
	County																		HINDI #	
	Municipality	☐ Town ☐ Village ☐ City																	HINDI #	

Election Information

5	Date of Election (MM/DD/YYYY)	0 4 / 0 1 / 2 0 2 5																		
	Type of Election	S p r i n g																		
	Office	S c h o o l B o a r d M e m b e r																		
	☐ Vote for 1		☒ Vote for not more than:		2														(Please Specify)	

Candidate Information

Ballot Position	☐ Town ☐ Village ☐ City ☒ Sch. Dist.	Amy Adkins	Lake Country	I, Amy Adkins , Clerk for the Lake Country , certify that the names of the candidates in Section 6 are for the office at the election on the date listed in Section 5, as determined by law, and that such names must be placed on the official ballot in the order listed.																
6	0 1	P e t e r J M a u r e r																		
	0 2	E m i l y G o o d i n g																		
	0 3	A d a m B i c k e l																		
	0 4	M o n i q u e H e n r y																		
7	Comments																			

Signature

School Clerk Signature	X	<i>Amy Adkins</i>	Date (MM/DD/YYYY)	0 1 / 1 3 / 2 0 2 5
Relier Signature	X		Date (MM/DD/YYYY)	/ /
Provider Signature	X		Date (MM/DD/YYYY)	/ /