

RETURN TO COUNTY CLERK BY JANUARY 5, 2024
with a copy of Candidate(s) EL-162 Form(s)

Declaration of Candidacy

(See instructions for preparation on back)

FOR OFFICE USE ONLY

Is this an amendment?

☐ Yes (if you have already filed a DOC for this election)

☒ No (if this is the first DOC you have filed for this election)

I, Aaron Martell, being duly sworn, state that

Candidate's name

I am a candidate for the office of

Plymouth School Board

Official name of office - Include district, branch or seat number

representing

If partisan election, name of political party or statement of principle - five words or less (Candidates for nonpartisan office may leave blank.)

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.¹

My present address, including my municipality of residence for voting purposes is:

106	Mead Ave	Plymouth	53073	Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <input checked="" type="checkbox"/>	Plymouth
House or fire no.	Street Name	Mailing Municipality and State	Zip code	Municipality of Residence for Voting	

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

Aaron Martell

(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

Sheboygan

ss.

Subscribed and sworn to before me this

11th day of December, 2023

Katrina Henschel
(Signature of person authorized to administer oaths)

NOTARY SEAL
REQUIRED, IF OATH
ADMINISTERED BY
NOTARY PUBLIC

☒ Notary Public or ☐ other official

(Official title, if not a notary)

If Notary Public: My commission expires 7.18.2027 or ☐ is permanent.

The information on this form is required by Wis. Stat. § 8.21, 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. Wis. Stats. §§ 8.05 (1)(j), 8.10 (5), 8.15 (4)(b), 8.20 (6), 120.06 (6)(b), 887.01.

¹ A 1996 constitutional amendment bars any candidate convicted of a misdemeanor which violates the public trust from running for or holding a public office. However, the legislature has not defined which misdemeanors violate the public trust. A candidate convicted of any misdemeanor is not barred from running for or holding a public office until the legislature defines which misdemeanors apply.

Declaration of Candidacy

(See instructions for preparation on back)

FOR OFFICE USE ONLY

Is this an amendment?

☐ Yes (if you have already filed a DOC for this election)

☒ No (if this is the first DOC you have filed for this election)

I, Robert Travis, being duly sworn, state that

Candidate's name

I am a candidate for the office of Plymouth School Board
Official name of office - Include district, branch or seat number

representing _____
If partisan election, name of political party or statement of principle - five words or less (Candidates for nonpartisan office may leave blank.)

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.¹

My present address, including my municipality of residence for voting purposes is:

<u>N6562</u>	<u>Riverview Rd</u>	<u>Plymouth, WI</u>	<u>53073</u>	Town of <input checked="" type="checkbox"/> Village of <input type="checkbox"/> City of <input type="checkbox"/>	<u>Plymouth</u>
House or fire no.	Street Name	Mailing Municipality and State	Zip code	Municipality of Residence for Voting	

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

BOB Travis

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

STATE OF WISCONSIN

County of Sheboygan
(County where oath administered)

SS.

Subscribed and sworn to before me this 11th day of December, 2023

Kathleen Hensley
(Signature of person authorized to administer oaths)

(Signature of candidate)

NOTARY SEAL
REQUIRED, IF OATH
ADMINISTERED BY
NOTARY PUBLIC

☒ Notary Public or ☐ other official _____
(Official title, if not a notary)

If Notary Public: My commission expires 7-18-2027 or ☐ is permanent.

The information on this form is required by Wis. Stat. § 8.21, 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. Wis. Stats. §§ 8.05 (1)(j), 8.10 (5), 8.15 (4)(b), 8.20 (6), 120.06 (6)(b), 887.01.

EL-162 | Rev. 2019-08 | Wisconsin Elections Commission, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005 | web: elections.wi.gov | email: elections@wi.gov

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