

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

<i>In re:</i>	:	
Nomination Petition of Michael Puskaric	:	Election Matter
as Republican Candidate for State	:	
Representative from the 39th	:	_____ MD 2022
Legislative District	:	

PETITION TO SET ASIDE NOMINATION PETITION

Madeline J. Gruzs, Petitioner-Objecter, by and through undersigned counsel, respectfully avers that:

Jurisdiction

1. This Court has original jurisdiction in cases relating to election challenges for candidate for State Representative. *See* 42 Pa.C.S. § 764(1); 25 P.S. § 2937.

Background

2. Madeline J. Gruzs is a registered Republican residing in the 39th Legislative District at 314 4th Street in Washington County, Pennsylvania.

3. On or about March 28, 2022, Michael Puskaric (“Candidate”) filed a 39-page nomination petition seeking the Republican nomination for State Representative from the 39th Legislative District.

4. A copy of Candidate’s nominating petition (the “Nominating Petition”) is attached hereto as Exhibit A.

5. The Nominating Petition contains information on 406 lines as follows:

Page	Last Completed Line	Page	Last Completed Line
1	29	22	9
2	30	23	7
3	30	24	10
4	1	25	3
5	4	26	2
6	6	27	5
7	20	28	8
8	12	29	2
9	30	30	7
10	30	31	13
11	11	32	11
12	4	33	5
13	14	34	8
14	1	35	1
15	11	36	2
16	7	37	7
17	28	38	3
18	11	39	8
19	6		
20	9		
21	1	Total	406

6. Candidates for State Representative are required to file nominating petitions with 300 valid signature lines. 25 P.S. § 2872.1(14).

7. However, the Candidate's Nominating Petition contains only 222 valid lines. The remaining 184 lines are invalid, for the reasons set forth on the spreadsheet attached hereto as Exhibit B.

8. Petitioner respectfully reserves the right to add such additional objections as are appropriate under applicable law at the time of the hearing.

9. Because it does not contain the required 300 valid signature lines, the Nomination Petition fails to conform to the requirements of the Election Code, 25 P.S. § 2867 *et seq.*, and must be set aside.

WHEREFORE, Petitioner prays this Honorable Court to set aside the Nomination Petition and order that Michael Puskaric not appear on the 2022 ballot for nomination in the 39th Legislative District.

Greenberg Traurig, LLP



Dated: April 4, 2022

Kevin Greenberg, Attorney Number 82311
1717 Arch Street, Suite 400
Philadelphia, Pennsylvania 19103
(215) 988-7818
greenbergk@gtlaw.com

Attorney for Petitioner-Objector

Exhibit A – Candidate’s Petition

Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
	Deborah J Boughner	36	Colonial	Elizabeth Twp	3/18/22
	James R Boughner	36	Colonial	Elizabeth Twp	3/18/22
	Ronald Anderchak	38	Colonial	Elizabeth Twp	3/18/22
	MILDRED NULL	11	Colonial	ELIZABETH TWP.	3/18/22
	ROBERT M. NULL	11	"	"	3/18/22
	Gretchen Cohen	15	Colonial	Elizabeth Twp.	3/18/22
	RICHARD A COHEN	15	Colonial	ELIZABETH TWP	3/18/22
	JAMES R HANCEY	6	COLONIAL	ELIZABETH TWP	3/18/22
	James Campbell	3	Colonial	Elizabeth Twp	3/18/22
	Maria Campagna	3	Colonial	Elizabeth Twp	3/18/22
	ROBERT D. JOHNSON	21	Colonial	ELIZABETH TWP	3/18/22
	Barbara S Johnson	21	Colonial	ELIZABETH TWP	3/18/22
	Thomas Tysechawicz	413	Mohawk	Elizabeth Twp	3/18/22
	Shannon S. Adams	405	Mohawk	Elizabeth Twp	3/18/22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
	Theresa Stockhill	200	Lexington	Elizabeth Twp	3/18/22
	Scott R Stockhill	200	Lexington	Elizabeth Twp	3/18/22
	Carol A. Hobling	105	Casenda	Elizabeth Twp	3/18/22
	Shelley Kern	850	Godfrew	Elizabeth Twp	3/18/22
	Sandy Crustone	308	Mohawk Dr	Elizabeth Twp	3/18/22
	Jacqueline A. Dougherty	298	Mohawk Dr	Elizabeth Twp	3/18/22
	Rex Eiler	275	Mohawk	Elizabeth Twp	3/18/22
	Joseph NATI	264	Mohawk	Elizabeth Twp	3/18/22
	Jeremy Day	2506	Ridge rd	Elizabeth Twp	3/18/22
	Sarah Day	4825	Williamsport	Elizabeth Twp	3/18/22
	MATT DAY	4825	Williamsport	Elizabeth Twp	3/18/22
	YVONNE SROTHMAN	993	Wiegels Hill	ELIZ. TOWN	3/18/2022
	SUMMER PEPE	1	Yorktown Pl.	Eliz. Town	3/18/2022
	Casey Gibbons	405	Mohawk Dr.	Eliz. Twp.	3/18/2022
	SUZAN GIBBONS	405	Mohawk Dr	Eliz Twp.	3/18/2022

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in his petition, and that they are residents in the County specified in number one below.

I hereby state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 5 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence ALLEGHENY
 Printed Name of Circulator Blaine M. Postacis
 Signature of Circulator
 Number and Street of Circulator 5 Locktown Place
 City, Borough or Twp. Elizabeth Township Zip Code 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



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NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Joanna A. Zervos</i>	Joanna A. Zervos	6853	Ridgevue	South Park	3-18-20
<i>Noah Formica</i>	Noah Formica	2898	Amy Drive	South Park	3-19-20
<i>Hanna Formica</i>	Hanna Formica	2898	Amy Dr	South Park	3/18/22
<i>Jacqueline Formica</i>	Jacqueline Formica	2898	Amy Dr	South Park	3-18-22
<i>Joseph Formica</i>	Joseph Formica	2898	Amy Dr	South Park	3-18-22
<i>Tom Lehony</i>	Tom Lehony	985	Lindfield Dr	South Park	3-19-22
<i>Tracy Lehony</i>	Tracy Lehony	985	Lindfield Dr	South Park	3-19-22
<i>Kinda King</i>	Kinda King	973	Lindfield Dr	South Park	3/19/22
<i>Sidney Larkin</i>	Sidney Larkin	973	Lindfield Drive	South Park	3/19/22
<i>Jean Blasi</i>	Jean Blasi	973	Lindfield Drive	South Park	3/19/22
<i>RICH SCHMALLZ</i>	RICH SCHMALLZ	2915	AMY DR	SOUTH PARK	3/19/22
<i>Plaza Marie Schaller</i>	Plaza Marie Schaller	2915	AMY DR	South Park	3/19/22
<i>Richard W. Pfaff</i>	Richard W. Pfaff	1214	Barnstable Dr	South Park	3/19/22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Rosemary Pfaff</i>	Rosemary Pfaff	1222	Barnstable	South Park	3/19/22
<i>Frank M. Johnson</i>	Frank M. Johnson	1242	BARNSTABLE	SOUTH PARK	3-19-22
<i>Mark E Schroeder</i>	Mark E Schroeder	1249	Barnstable	South Park	3-19-22
<i>Rochelle Schroeder</i>	ROCHELLE SCHROEDER	1249	BARNSTABLE	SOUTH PARK	3-19-22
<i>Daria D. Palaschak</i>	DARIA D. PALASCHAK	1250	BARNSTABLE	SOUTH PARK	3-19-22
<i>Debbie Wittmoss</i>	DEBBIE WITMOSS	1529	BARNSTABLE	SOUTH PARK	3-19-22
<i>Michael Wittmoss</i>	Michael Wittmoss	1529	BARNSTABLE	South Park	3-19-22
<i>Anthony Berman</i>	Anthony Berman	1572	Swanapple	South Park	3-19-22
<i>Tanya Morrison</i>	Tanya Morrison	2889	Amy Drive	South Park	3-19-22
<i>Dave Morrison</i>	Dave Morrison	2887	Amy Drive	South Park	3-19-22
<i>Taylor Morrison</i>	Taylor Morrison	2889	Amy Drive	South Park	3-19-22
<i>Dave Gopel</i>	Dave Gopel	515	Wythe Ave	Elizabeth	3-19-22
<i>Diana Blevins</i>	Diana Blevins	3021	Amy Dr	South Park	3-19-22
<i>Cathy Salay</i>	Cathy Salay	3036	Amy Dr	South Park	3-19-22
<i>Mike Gremba</i>	Mike Gremba	3038	AMY DR	SOUTH PARK	3-19-22
<i>Rick DeBry</i>	Rick DeBry	2402	Barnstable	S-PARK	3-19-22

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Noah Formica
 Signature of Circulator: [Signature]
 Number and Street of Circulator: 2898 Amy Drive
 City, Borough or Twp.: South Park Zip Code: 15129

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District; to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Jonathan Kyla</i>	JONATHAN KYLA	1	Kilbuck Pl	ELIZABETH TWP	3/19/22
<i>DORA BARKER</i>	DORA BARKER	720	GREENOCK BL	ELIZABETH TP	3/19/22
<i>CARL WAYNE BARKER</i>	CARL WAYNE BARKER	800	GREENOCK BL BUENA VISTA R.	ELIZABETH TWP	3/19/22
<i>PAUL KLIMKO</i>	PAUL KLIMKO	530	Everglade	Elizabeth Twp	3/19/22
<i>PAUL KOSKEY</i>	PAUL KOSKEY	826	EVERGLADE	ELIZABETH	3/19/22
<i>MIKE OBRANOVICH</i>	MIKE OBRANOVICH	819	EVERGLADE	ELIZABETH TWP	3/19/22
<i>MARY ANNE OBRANOVICH</i>	MARY ANNE OBRANOVICH	819	EVERGLADE	ELIZABETH TWP	3/19/22
<i>PATRICIA VASKO</i>	PATRICIA VASKO	811	EVERGLADE	ELIZABETH TWP	3/19/22
<i>CHERISE JOYCE</i>	CHERISE JOYCE	812	Everglade	Elizabeth Twp	3/19/22
<i>Linda Borandak</i>	Linda Borandak	806	Everglade	Elizabeth Twp	3/19/22
<i>THOMAS GIBBONS</i>	THOMAS GIBBONS	718	Everglade	Elizabeth Twp	3/19/22
<i>WESLEY GIBBONS</i>	WESLEY GIBBONS	718	Everglade	Elizabeth Twp	3/19/22
<i>COURTNEY BILMON</i>	COURTNEY BILMON	712	Everglade	Elizabeth Twp	3-19-22
<i>BETH KLIMKO</i>	BETH KLIMKO	830	Everglade	Elizabeth Twp	3-19-22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Charlotte Matthews</i>	Charlotte Matthews	535	Friendship	ELIZ TWP	3/19/22
<i>Don Matthews</i>	Don Matthews	535	friendship	ELIZ TWP	3/19/22
<i>JOHN F. KLINGENSMAN</i>	JOHN F. KLINGENSMAN	# 315	OSBERDICK	ELIZ TWP	3/19/22
<i>Laurie Householder</i>	Laurie Householder	311	Oberdick	ELIZ TWP	3/19/22
<i>GARY HOUSEHOLDER</i>	GARY HOUSEHOLDER	311	OBERDICK	ELIZ TWP	3/19/22
<i>Belinda Bell</i>	Belinda Bell	221	Oberdick	ELIZ TWP	3/19/22
<i>Michelle Hammen</i>	Michelle Hammen	217	Oberdick	ELIZ TWP	3/19/22
<i>Matt Heinichen</i>	Matt Heinichen	217	Oberdick	ELIZ TWP	3/19/22
<i>JEFF HEINICHEN JR</i>	JEFF HEINICHEN JR	217	Oberdick	ELIZ TWP	3/19/22
<i>MANN HERMESMANN</i>	MANN HERMESMANN	437	LINCOLN HWY	ELIZ TWP	3/19/22
<i>JEFF HEINICHEN SR</i>	JEFF HEINICHEN SR	217	OBERDICK	ELIZ TWP	3-19-22
<i>Ronald Lieberman</i>	Ronald Lieberman	214	OBERDICK	ELIZ TWP	3-19-22
<i>Kerry Pringle</i>	Kerry Pringle	213	Oberdick	ELIZ TWP	3-19-22
<i>EDWIN W. PAVIS</i>	EDWIN W. PAVIS	211	OBERDICK	ELIZ TWP	3-19-22
<i>Bob Adams</i>	Bob Adams	201	OBERDICK	ELIZ TWP	3-19-22
<i>JOE WELSH</i>	JOE WELSH	200	OBERDICK	ELIZ TWP	3-19-22

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1-5 BELOW

ate that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

ther, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: ALLEGHENY
 Printed Name of Circulator: Blaine M. Postorac
 Signature of Circulator: *[Signature]*
 Number and Street of Circulator: 5 Lockerman Place
 City, Borough or Twp.: ELIZABETH TOWNSHIP Zip Code: 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

I am the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot for said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Jayne A. Fawcett</i>	JAYNE A. FAWCETT	5131	SPRING ST	UNION TWP. FINNENCHE	3/18/22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	

STATEMENT OF CIRCULATOR

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County of Petition-Signers' Residence Allegheny
 Printed Name of Circulator Blake M. Puskaric
 Signature of Circulator [Signature]
 Number and Street of Circulator 6 Yorktown Place
 City, Borough or Twp. Eleazar Township Zip Code 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



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CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

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COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

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SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Greg H. Criss</i>	Greg H. Criss	1211	Station	South Park	3/19/22
<i>Kate M. Betan</i>	Kate M. Betan	1211	Station	South Park	3/19/22
<i>Randolph S. Mays</i>	Randolph S. Mays	1211	Station	South Park	3-19-22
<i>Charles Kunkel</i>	CHARLES KUNKEL	5435	SUNSET VIEW	FORWARD	3-19-22
<i>Deborah Kunkel</i>	DEBORAH KUNKEL	5435	SUNSET VIEW	FORWARD	3-19-22
<i>Elizabeth Damich</i>	Elizabeth Damich	2111	LEWIS LANE	JEFFERSON HILLS	3-21-22
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13.					
14.					

Page 6 Side 2

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
15.					
16.					
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Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

1 County of Petition-Signers' Residence: Allegheny

2 Printed Name of Circulator: Glenn M. Postace

3 Signature of Circulator: *[Signature]*

4 Number and Street of Circulator: 8 Bedford Place

5 City, Borough or Twp. Elizabethtown Township Zip Code 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

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DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot for said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Scott J. Criss</i>	Scott J. Criss	1358	4TH ST.	MONONGAHELA	3/19/22
<i>Amy L. Criss</i>	Amy L. Criss	1358	4th St.	Monongahela	3/19/22
<i>Rafael Reyes</i>	Rafael Reyes	11	Lower Ln.	Carroll Township	3/19/22
<i>Mark W. Criss</i>	Mark W. Criss	7	Odessa Dr.	Carroll Township	3-19-22
<i>Alicia Criss</i>	Alicia Criss	7	Odessa Dr.	Carroll Township	3-19-22
<i>Blake Boyd</i>	Blake Boyd	428	Williams	Monongahela	3-19-22
<i>Beth Boyd</i>	Beth Boyd	428	Williams	Monongahela	3-19-22
<i>Donald Breinig</i>	Donald Breinig	3593	Washington Ave	Franklinville	3/19/22
<i>Harold Breinig</i>	Harold Breinig	44	Engley Ave	Union Twp	3/19/22
<i>Nancy Breinig</i>	Nancy Breinig	44	Finley Ave	Union Twp.	3/19/22
<i>Donna Criss</i>	Donna Criss	6303	St. Route 88	Union Twp	3/19/22
<i>Deani Criss</i>	Deani Criss	6303	St. Route 88	Union Twp	3/19/22
<i>David E. Breinig</i>	David E. Breinig	6438	Union Ave	Union Twp	3/19/22
<i>Sally Breinig</i>	Sally Breinig	6438	Union Ave	Union Twp	3/19/22



SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Lisa McCormick</i>	Lisa McCormick	3474	Ivy Hill Ln	Union Twp.	3/19/22
<i>Lynn McCormick</i>	LYNN MCCORMICK	3474	Ivy Hill Ln.	Union Twp	3/19/22
<i>Christopher Carroll</i>	CHRISTOPHER CARROLL	906	SYCAMORE	NEW EAGLE	3/20/22
<i>Kimberly M. Carroll</i>	KIMBERLY M CARROLL	906	SYCAMORE	NEW EAGLE	3-20-22
<i>Amaray Carroll</i>	Amaray Carroll	906	SYCAMORE	NEW Eagle	3/20/22
<i>David Criss</i>	David Criss	1358	4th Street	Monongahela	3/20/22

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents hereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Blaise M. Postacic
 Signature of Circulator: *[Signature]*
 Number and Street of Circulator: 5 Parkersburg Place
 City, Borough or Twp.: Elizabeth Township Zip Code: 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Richard Allertz</i>	RICHARD ALLERTZ	2406	Bonnie Dell Dr	South Park	3-19-22
<i>Ron Zipay</i>	RON ZIPAY	2414	Bonnie Dell	SOUTH PARK	3-19-22
<i>Deborah A. Zipay</i>	Deborah A. Zipay	2414	Bonnie Dell	South Park	3-19-22
<i>Joe Berletic</i>	Joe Berletic	2417	Bonnie Dell	South Park	3-19-22
<i>Susanne Perkun</i>	Susanne Perkun	2423	Bonnie Dell	South Park	3-19-22
<i>Eric Perkun</i>	Eric Perkun	2423	Bonnie Dell	South Park	3/19/22
<i>Philip Perkun</i>	Philip Perkun	2423	Bonnie Dell	South Park	3/19/22
<i>Jill B. Spitznagel</i>	Jill B. Spitznagel	2504	Bonnie Dell	South Park	3/19/22
<i>Michelle Spitznagel</i>	Michelle Spitznagel	2504	Bonnie Dell	South Park	3/19/22
<i>Janice Beyer</i>	Janice Beyer	486	Lindfield Dr	South Park	3-19-22
<i>Rachel Beyer</i>	Rachel G. Beyer	486	Lindfield Dr	South Park	3-19-22
<i>David G. Beyer</i>	David G. Beyer	486	Lindfield Dr	South Park	3-19-22
<i>Cristina Gutierrez</i>	Cristina Gutierrez	1430	Amelia Rd	South Park	3-20-22
<i>Saber Miller</i>	Saber Miller	1430	Amelia	South Park	3-20-22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Orbelina Mordales</i>	Orbelina Mordales	1430	Amelia	South Park	3-20-22
<i>Robert Kent</i>	Robert Kent	1440	Amelia	South Park	3-20-22
<i>Nicole Biancavelli</i>	Nicole Biancavelli	1487	Benjamin	South Park	3-20-22
<i>Maura Kelly</i>	Maura Kelly	2904	AMY	S. PARK	3-20-22
<i>Terry Kelly</i>	TERRY KELLY	2904	AMY	S. PARK	3-20-22
<i>Georgia Kelly</i>	Georgia Kelly	2904	AMY DR	S PARK	3-20-22
<i>James Kligger</i>	James Kligger	1928	Riggs Rd	SOUTH PARK	3.20.22
<i>Tom Ryan</i>	TOM RYAN	3100	THURGOOD	SOUTH PARK	3-20-22
<i>Lynned Lewis</i>	Lynned Lewis	1906	Riggs Rd	South Park	3/20/22
<i>Brandon S. Lewis</i>	Brandon S. Lewis	1906	Riggs Rd	South Park	3/20/22
<i>Scott R. Lewis</i>	Scott R. Lewis	1906	Riggs Rd	South Park	3/20/22
<i>Carols DeLusario</i>	CAROLS DELUSARIO	1907	RIGGS RD	SOUTH PARK	3/20/22
<i>Vincent DeLusario</i>	VINCENT DELUSARIO	1907	RIGGS RD	SOUTH PARK	3/20/22
<i>Marylou Stasny</i>	MARYLOU STASNY	1895	Riggs Rd	SOUTH PARK	3/20/22
<i>Robert Durham</i>	Robert Durham	3071	AMY	South Park	3/20/22
<i>Tammy Durham</i>	Tammy Durham	3071	AMY	South Park	3/20/22

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents hereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny

Printed Name of Circulator: Narah Fiedrich

Signature of Circulator: Narah Fiedrich

Number and Street of Circulator: 2848 Amy Dr

City, Borough or Twp.: South Park Zip Code: 15129

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY OZ

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
Sharon P. Carr	Sharon P. Carr	1190	Snee	South Park	3/20/22
Sharon P. Carr	Sharon P. Carr	1190	Snee	South Park	3/20/22
Lyn D. Harmon	Lyn D. Harmon	1199	Snee	South Park	3/20/22
Sara Bellison	Sara Bellison	1224	Snee	South Park	3/20/22
Amber Bonacci	Amber Bonacci	1227	Snee	South Park	3/20/22
Irene Selzer	Irene Selzer	1250	Snee	South Park	3/20/22
Ken Selzer	Ken Selzer	1250	Snee	South Park	3/20/22
Paul Bechtold	PAUL BECHTOLD	1264	Snee	South Park	3/20/22
William E. Ennis	WILLIAM E. ENNIS	1290	Snee	South Park	3/20/22
Stanley J. Penkala	STANLEY J. PENKALA	1350	Snee	South Park	3/20/22
Richard Stasay	Richard Stasay	1362	Snee	South Park	3/20/22
Earl R. Grimm	EARL R. GRIMM	1421	Snee	South Park	3/20/22
Joann G. Grimm	JOANN G. GRIMM	1421	Snee	South Park	3/20/22
Ben Schupp	Ben Schupp	1426	Snee	South Park	3/20/22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
Joe Antantis	Joe Antantis	2432	Bonnie Dell	South Park	3-20-22
Zeida Antantis	Zeida Antantis	2432	Bonnie Dell	South Park	3-20-22
Heather Antantis	Heather Antantis	2432	Bonnie Dell	South Park	3-20-22
Joseph Bocha	Joseph Bocha	1811	SANGATE DR	South Park	3-20-22
Andrea Bocha	Andrea Bocha	1811	SANGATE DR	South Park	3-20-22
Linda McDonald	LINDA McDONALD	1816	SANGATE DR	South Park	3-20-22
Thomas J. McDonald	THOMAS J McDONALD	1816	SANGATE DR	SOUTH PARK PA	3-20-22
Raymond Swide	RAYMOND SWIDE	1809	SANGATE	South Park PA	3-20-22
Mark Zawasky	MARK ZAWASKY	1941	STRAWBRIDGE	SOUTH PARK PA	3-22-22
Bob Cayna	Bob Cayna	1935	STRAWBRIDGE	South Park PA	3-22-22
Cindy Cayna	Cindy Cayna	1935	STRAWBRIDGE	South Park PA	3-22-22
Matthew Kelly	Matthew Kelly	1933	STRAWBRIDGE	South Park PA	3-22-22
Doug Kreuren	Doug Kreuren	1926	STRAWBRIDGE	South Park PA	3-22-22
Mary George	MARY GEORGE	1933	STRAWBRIDGE	SOUTH PARK PA	3-22-22
Larry Smith	Larry Smith	1923	STRAWBRIDGE	South Park	3-22-22
Barb McGivern	BARB MCGIVERN	1914	STRAWBRIDGE	So. Park	3-22-22

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

I further state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Noah Edmister
 Signature of Circulator: Noah Edmister
 Number and Street of Circulator: 2898 Amy Drive
 City, Borough or Twp.: South Park Zip Code: 15129

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

NAME OF the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot for said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Tom Caporic</i>	TOM CAPORIC	5018	Washington Ave	Union	3/21/22
<i>Norman George</i>	NORMAN GEORGE	5047	Don. St.	Union	3/21/22
<i>Linda S. Brown Prankel</i>	LINDA S. BROWN PRANKEL	5051 1/2	Don St	Union	3-21-22
<i>Mary Ann McDonagh</i>	MARY ANN McDONAGH	5215	LEW ST	UNION	3/21/22
<i>Susan L Steiner</i>	SUSAN L STEINER	5203	LEW ST	Union	3-21-22
<i>Gloria J. Masters</i>	GLORIA J. MASTERS	6443	UNION AVE	UNION	3/21/22
<i>Todd Minochi</i>	TODD MINOCHI	6422	Union Ave	Union	3/21/22
<i>Donald B Esken</i>	DONALD B ESKEN	6406	Union Ave	Union	3-21-22
<i>Stephanie Steiner</i>	STEPHANIE STEINER	6928	Spruce St	Union	3/21/22
<i>Matthew Hanne</i>	MATTHEW HANNE	6925	Spruce	Union	3-21-22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
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STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

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Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 5 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence Allegheny
 Printed Name of Circulator Blaine M Postace
 Signature of Circulator [Signature]
 Number and Street of Circulator 5 Coledon Place
 City, Borough or Twp. Elizabeth Township Zip Code 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



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NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

By the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot for said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
	Michael Puskaric	15	CINQUE TERRA PLACE	Union Twp	3/2/22
	Morgan Palmer	5036	NORMAN	Union	3/2/22
	Margaret Jasto	5034	NORMAN	Union	03/21
	June Margant Harrison	5026	NORMAN	Union	3/21/22
	PETE RITZ	5035	MEADOW	UNION	3/2/22
	NORMAN MILLIGAN	5022	UNION ST	UNION	3/21/22
	Nicholas Collins	5005	Don St	Union	3/2/22
	Brian Macioce	5214	Lew St	Union	3/21/22
	Brittany Macioce	5214	Lew St	Union	3/21/22
	Katie Bertetto	6431	Union	Union	3/21/22
	Sue Skerberz	6933	SPRUCE	Spruce	3/21/22
	Bill Martin	6427	Union	Union	3/21/22
	James Archer	6415	Union	Union	3/21/22
	RD Hostovitch	6075	Pleasant	UNION	3/2/22

Page 13 Side 2

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
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STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE
1 - 5 BELOW

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Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 5 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Steve M. Postacic
 Signature of Circulator:
 Number and Street of Circulator: 5 EDDYSTOWN PLACE
 City, Borough or Twp.: Edinboro Township Zip Code: 16735

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



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NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
	THOMAS BRISLER	604	Duke dr	ELIZABETH PA	3-21-22
	STEPHEN P. GOEBEL	601	DOUGLAS	ELIZABETH TWP	3-21-22
	VICKI VESPI	500	DOUGLAS	ELIZABETH	3/21/22
	PAUL VESPI	500	DOUGLAS	ELIZABETH	3/21/22
	Holly Stepley	1915	SPRINGBROOK	South Park	3/22/22
	David Stepley	1915	SPRINGBROOK	South Park	3/22/22
	Jason Grubs	1910	SPRINGBROOK	South Park	3/22/22
	James J. Cancelmi	2501	Ridge Rd	South Park Twp	3-22-22
	Michael P. Zychner	1410	BRISBOLD	South Park	3-22-22
	KATHLEEN R. ZYCHNER	1410	BRISBOLD	South Park	3-22-22
	GERARD HUNGERN	2505	RIDGE	South Park	3-22-22
	Aron Hungern	2505	RIDGE	South Park	3-22-22
	Caitlin Cancelmi	2501	RIDGE	South Park	3-22-22
	Bradley Miller	2497	RIDGE	South Park	3-22-22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
	Linda Miller	2497	Ridge Rd	South Park	3/22/22
	Michele Whelan	2493	Ridge Rd	South Park	3-22-22
	John Whelan	2493	Ridge Rd	South Park	15/29/22
	David Mazzarella	2068	Stagescoach	South Park	15/29/22
	Vonda Mazzarella	2068	Stagescoach	South Park	15/29/22
	Kam Cicotti	1402	Bristol	South Park	15/29/22
	BRUCE M. HARCOURT	1430	Bristol	South Park	3-23-22
	Laura Stein	1461	Bristol	South Park	3-23-22
	Laura Priano	1470	Bristol	South Park	3-23-22
	Daniel Priano	1470	Bristol	South Park	3-23-22
	Jill C Piel	1628	Duchess	South Park	3-24-22
	MARK LUCOT	10	ROSEMARY LAKE WATCHFIELD DR.	SOUTH PARK	3/24/22
	DIANA IFFT-CECOTTI	2233	WATCHFIELD DR.	South Park	3/24/22
	James M. Mc Donough	830	Royal Drive	South Park	3/24/22

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1-5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Neah Ferraro
 Signature of Circulator: Neah Ferraro
 Number and Street of Circulator: 2016 Army Drive
 City, Borough or Twp.: South Park Zip Code: 16124

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION

This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

NAME OF THE SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent therewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot for said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Michael Revetta</i>	MICHAEL REYETTA	6610	SHADY AVE	UNION	3/22/22
<i>Brenda DeLago</i>	Brenda Davazio	6606	Shady Ave	Union	3/22/22
<i>April Sullivan</i>	April Sullivan	6724	Highland Ave	Union	3/22/22
<i>David Hazinski</i>	David Hazinski	6717	Highland Ave	UNION	3/22/22
<i>Angelica R</i>	Angelica Brenneke	6715	Highland Ave	Union	3/22/22
<i>Suzanne Dated</i>	SUZANNE DATED	6712	HIGHLAND AVE	UNION	3/22/22
<i>David Taylor</i>	DAVID TAYLOR	6829	RIDGE	UNION	3-22-22
<i>Shelley Reed</i>	Shelley Reed	6824	Ridge Ave	Union	3/22/2022
<i>Ken Reed</i>	KEN REED	6824	RIDGE	UNION	3/22/22
<i>Linda Clous</i>	Linda Clous	6810 1/2	Ridge	Union	3/22/22
<i>Betty Clous</i>	Betty Clous	6810 1/2	Ridge	Union	3/22/22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
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STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents hereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 5 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Blaine M. Postace
 Signature of Circulator: [Signature]
 Number and Street of Circulator: 5 Woodstown PLACE
 City, Borough or Twp.: ELK LANE TOWNSHIP Zip Code: 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskarić

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

Signature of the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent therewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot for said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Patricia Marie Bizzo</i>	Patricia Marie Bizzo	6619	Shady Ave	Union Twp	3/22/22
<i>Dorothy McDonald</i>	Dorothy McDonald	6615	Shady Rd	Union Twp	3/22/22
<i>Robert Munk</i>	Robert	6730	Highland	Union Twp	3-22-22
<i>John Schneider</i>	JOHN SCHNEIDER	6725	HIGHLAND	Union Twp	3-22-22
<i>Carola Schneider</i>	CAROLA SCHNEIDER	6725	HIGHLAND	Union Twp	3-22-22
<i>Michael J. Mancini</i>	MICHAEL J. MANCINI	6716	HIGHLAND	Union Twp	3-22-22

Page 19 Side 2

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
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STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE
1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence Washington
 Printed Name of Circulator Michael Puskarić
 Signature of Circulator [Signature]
 Number and Street of Circulator 15 Cinque Terra Place
 City, Borough or Twp. Union Twp Zip Code 15332

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
Please refer to the Instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

By the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent therewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Judith Evans</i>	JUDITH EVANS	34	Purperry	Carroll	3/24/22
<i>Donna Williams</i>	DONNA WILLIAMS	107	Spraych	Carroll	3-24-22
<i>Carol P. Pusek</i>	CAROL PUSEK	41	Pearl	Carroll	3-24-22
<i>Mary Jo Watkins</i>	MARY JO WATKINS	47	Parliah	Carroll Twp	3-24-22
<i>Terry J. Watkins</i>	TERRY J. WATKINS	47	Parliah	Carroll Twp	3-24-22
<i>Vicki Ellsworth</i>	VICKI ELLSWORTH	11	Pearlilly	Carroll	3-24-22
<i>Cassandra DeLoach</i>	CASSANDRA DELOACH	574	Antler Valley	Union	3/24/22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
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STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents hereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Mike Puskaric
 Signature of Circulator: *[Signature]*
 Number and Street of Circulator: 5 Goodwin Place
 City, Borough or Twp.: Eleventh Township Zip Code: 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

NAME OF THE SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent therewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot for said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Lucille L. Payne</i>	Lucille L. Payne	33	Pearlman	Monroeville	3-24-22
<i>Shelby Kostelka</i>	Shelby Kostelka	34	Personally	Monroeville	3-24-22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents hereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: Allegheny
 Printed Name of Circulator: Blaine M. Postkovic
 Signature of Circulator: *[Signature]*
 Number and Street of Circulator: 5 Rockwood Place
 City, Borough or Twp.: Elizabeth Township Zip Code: 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>[Signature]</i>	RALPH GRANLUND	416	BROADWAY	ELIZABETH	3/24/22
<i>[Signature]</i>	MARILYN ROSE	249	LINCOLN HALL	ELIZABETH	3/24/22
<i>[Signature]</i>	MIKE MESKARIC	243	MONTAUK	ELIZABETH	3-24-22
<i>[Signature]</i>	Kathleen DiSavia	206	Drummin ^{er}	Elizabeth	3/24/22
<i>[Signature]</i>	MARIO DISAVIA, JR.	206	DRUMMIN ^{er}	ELIZABETH	3/24/22
<i>[Signature]</i>	ELAINE M. ROSS	305	GROUSE	ELIZABETH	3/24/22
<i>[Signature]</i>	William G. Ross	305	GROUSE	ELIZABETH	3/24/22
<i>[Signature]</i>	William Klimok	129	Lincoln Hall	Elizabeth	3/24/22
<i>[Signature]</i>	Daniel Klimok	179	Lincoln Hall	Elizabeth	3/24/22
<i>[Signature]</i>	Lynn Wynn	263	Lincoln Hall	Elizabeth	3-24-22
<i>[Signature]</i>	Joshua Roehrig	510	Ludwig Street	Elizabeth	3-24-22
<i>[Signature]</i>	JEFF ROEHRIG	1215	Summers	ELIZABETH TWP	3-24-22
<i>[Signature]</i>	BRIAN MERTEN	9	TRANSIT	ELIZABETH TOWNSHIP	3-24-22
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Page 31 Side 2

	SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
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STATEMENT OF CIRCULATOR	CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW
<p>I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.</p>	
<p>Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).</p>	
1 County of Petition-Signers' Residence	<u>ALLEGHENY</u>
2 Printed Name of Circulator	<u>Steve M. Postacale</u>
3 Signature of Circulator	<i>[Signature]</i>
4 Number and Street of Circulator	<u>5 COCKERMAN PLACE</u>
5 City, Borough or Twp.	<u>ELIZABETH TOWNSHIP</u> Zip Code <u>15135</u>
NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.	



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>David M. LaFrankie</i>	DAVID M. LAFRANKIE	423	TOURA DR	PLEASANT HILLS	3-24-22
<i>Diane K. LaFrankie</i>	DIANE K. LAFRANKIE	423	TOURA DR	PLEASANT HILLS	3/24/22
<i>Jon D. LaFrankie</i>	Jon D. LaFrankie	423	Toura Dr	Pleasant Hills	3/24/22
<i>Thomas W. LaFrankie</i>	THOMAS W. LAFRANKIE	425	OLD CLAYTON RD	JEFFERSON HILLS PA	3/24/22
<i>Nancy P. LaFrankie</i>	NANCY P. LAFRANKIE	425	OLD CLAYTON RD	JEFFERSON HILLS PA	3/24/22
<i>Shirley Puckett</i>	SHIRLEY PUCKETT	500	ESSEX DR	PA. 15231	3/24/22
<i>Steven Piper</i>	STEVEN PIPER	1319 S. RANDOLPH DR	JEFFERSON HILLS PA	15025	3/24/22
<i>Lindsay Piper</i>	LINDSAY PIPER	819 S. RANDOLPH DR	JEFFERSON HILLS PA	15025	3/24/22
<i>Daniel D. LaFrankie</i>	DANIEL D. LAFRANKIE	191	WOODLAND DR	PLEASANT HILLS 15236	3/24/22
<i>Emily Fakner</i>	Emily Fakner	1005	Darcy Dr	South Park 15129	3/24/22
<i>Jonathan Fakner</i>	Jonathan Fakner	1005	Darcy Dr	South Park 15129	3/24/22

	SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
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STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

- County of Petition-Signers' Residence: ALLEGHENY
- Printed Name of Circulator: Blaise M. Puskaric
- Signature of Circulator: *[Signature]*
- Number and Street of Circulator: 5 Lockdown PLACE
- City, Borough or Twp.: ELIZABETH TOWNSHIP Zip Code: 15135

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

OFFICIAL USE ONLY



A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only. B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME(PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

Table with columns: SIGNATURE OF ELECTOR, PRINTED NAME OF ELECTOR, ADDRESS WHERE REGISTERED AND ENROLLED (House No., Street or Road, City, Boro or Twp.), DATE OF SIGNING. Contains handwritten entries for Nanette Ragan, Bruce Cunningham, John F. Klingensmith, Robert W. Baum, and Madeline Cunningham.

Large empty table for additional signatures with columns: SIGNATURE OF ELECTOR, PRINTED NAME OF ELECTOR, ADDRESS WHERE REGISTERED AND ENROLLED (House No., Street or Road, City, Boro or Twp.), DATE OF SIGNING.

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 5 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence: ALLEGHENY
Printed Name of Circulator: Mike Puskaric
Signature of Circulator: [Handwritten Signature]
Number and Street of Circulator: 5 Rockwood Place
City, Borough or Twp.: ELIZABETH TOWNSHIP Zip Code: 15130

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: WASHINGTON 63

PARTY OF SIGNERS: Republican

By the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent therewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
<i>Ryan Alderson</i>	Ryan Alderson	119	Cinque Terra Place	Finleyville Union Twp	3-26-22
<i>Elaine Stash</i>	Elaine Stash	113	Cinque Terra Place	Union Twp	3-26-22
<i>Randy Czaniacki</i>	Randy Czaniacki	3	Gossett Dr	Union Twp.	3/26/22
<i>Jim Walsh</i>	JIM WALSH	132	TOGCANY ESTATES	UNION	3/26/22
<i>LARRY LEWIS</i>	LARRY LEWIS	19	CINDY DR	UNION	3-26-22
<i>David Kuhn</i>	David Kuhn	3	Creek	Union	3-26-22
<i>JOE FRIEL</i>	JOE FRIEL	25	PARKVIEW	UNION	3-26-22
<i>Charles Evans</i>	Charles EVANS	41	Hilltop	Union	3-26-22

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
15.					
16.					
17.					
18.					
19.					
20.					
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24.					
25.					
26.					
27.					
28.					
29.					
30.					

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

County of Petition-Signers' Residence Washington
 Printed Name of Circulator Michael Puskaric
 Signature of Circulator [Signature]
 Number and Street of Circulator 15 Cinque Terra Place
 City, Borough or Twp. Union Twp Zip Code 15332

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

OFFICIAL USE ONLY



ATTENTION!

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN THE GENERAL ASSEMBLY

DISTRICT NUMBER: 39th Legislative District

YEAR OF PRIMARY: 2022

CANDIDATE'S NAME (PRINT OR TYPE NAME): Mike Puskaric

OCCUPATION: State Representative

RESIDENTIAL STREET ADDRESS: 15 Cinque Terra Place

CITY, BOROUGH OR TWP.: Union Township

COUNTY OF SIGNERS: ALLEGHENY 02

PARTY OF SIGNERS: Republican

To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

	SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
			House No.	Street or Road	City, Boro or Twp.	
1.		SARAH MILTON	121	TOURNA	1st PLEASANT HILLS	3/26/22
2.		MARE GAMBINO	221	TOURN	1st PLEASANT HILLS	3/26/22
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						

	SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
			House No.	Street or Road	City, Boro or Twp.	
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16.						
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23.						
24.						
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30.						

STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents hereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

1. County of Petition-Signers' Residence: Washington
 2. Printed Name of Circulator: Michael Puskaric
 3. Signature of Circulator:
 4. Number and Street of Circulator: 15 Cinque Terra Place
 5. City, Borough or Twp.: Union Twp Zip Code: 15332

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.



Exhibit B – Line-by-Line Objections

On the attached spreadsheet, we have utilized the following notations as directed by the Court:

NR – Not Registered

NRA – Not Registered at Address

NRD – Not Registered in District

NRDS – Not Registered on Date Signed

OC – Out of County

Ill – Illegible

LIO – Line Information Omitted

DUP – Duplicate

IHA – Line Information in Hand of Another

N/I – Nickname/Initial

PRI – Printed Signature (or failure to print name)

Other – Other grounds for objection not listed above

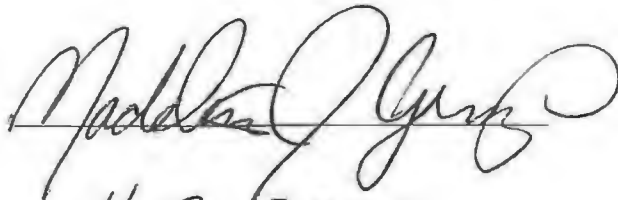
7	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T					
8	Page	Line	County	NR	NRA	NRD	NRDS	OC	ILL	LIO	DUP	IHA	N/I	PRI	Other	Describe Other	S/S	V/S	S/CT	V/CT					
				Specific Grounds for Objection																					
149	28	4	Washington									x													
150	28	5	Washington							x		x													
151	28	6	Washington												x	Stricken									
152	28	8	Washington	x					x					x											
153	29	2	Washington	x								x			x	Altered City									
154	30	2	Allegheny									x													
155	30	4	Allegheny									x													
156	30	5	Allegheny									x													
157	30	6	Allegheny									x													
158	30	7	Allegheny			x																			
159	31	6	Allegheny									x													
160	31	7	Allegheny									x													
161	31	9	Allegheny									x													
162	31	13	Allegheny										x												
163	32	2	Allegheny									x													
164	32	3	Allegheny									x													
165	32	4	Allegheny									x													
166	32	5	Allegheny									x													
167	32	6	Allegheny		x																				
168	32	8	Allegheny							x		x			x	Altered Date									
169	32	10	Allegheny									x													
170	32	11	Allegheny									x													
171	33	1	Allegheny	x	x																				
172	33	2	Allegheny												x	Not Republican / Democrat									
173	34	2	Washington	x																					
174	34	3	Washington	x																					
175	34	4	Washington	x																					
176	34	6	Washington									x													
177	34	8	Washington									x													
178	36	1	Allegheny												x	False Circulator Statement (County)									
179	36	2	Allegheny												x	False Circulator Statement (County)/ Not Republican / Democrat									
180	37	2	Washington									x													
181	37	3	Washington	x								x													
182	38	1	Allegheny					x							x	False Circulator Statement (County) / Not Republican / Democrat									
183	38	2	Allegheny					x							x	False Circulator Statement (County)									

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T			
7				Specific Grounds for Objection																			
8	Page	Line	County	NR	NRA	NRD	NRDS	OC	ILL	LIO	DUP	IHA	N/I	PRI	Other	Describe Other	S/S	V/S	S/CT	V/CT			
184	38	3	Allegheny		x			x							x	False Circulator Statement (County)							
185	39	1	Allegheny		x										x	False Circulator Statement (County)							
186	39	2	Allegheny												x	False Circulator Statement (County)							
187	39	3	Allegheny										x		x	False Circulator Statement (County)							
188	39	4	Allegheny										x		x	False Circulator Statement (County)							
189	39	5	Allegheny												x	False Circulator Statement (County)							
190	39	6	Allegheny												x	False Circulator Statement (County)							
191	39	7	Allegheny												x	False Circulator Statement (County)							
192	39	8	Allegheny												x	False Circulator Statement (County) / Not Republican							

VERIFICATION

I, Madelaine J Brizz hereby verify that the facts contained in the within
Petition regarding the nomination petition of Michael J Puskaric are
true and correct to the best of my knowledge or information and belief. I
understand that the foregoing statement is made subject to the provisions of 18 Pa.
C.S. § 4904 relation to unsworn falsification to authorities.

Signature:



Date:

4.3.2022, 2022