



STATE OF WISCONSIN  
DEPARTMENT OF ADMINISTRATION

Tony Evers, Governor  
Kathy Blumenfeld, Secretary  
Richard Rydecki, Administrator

September 12, 2025

SENT VIA EMAIL

**Evansville Examiner**

Legal Department  
917 Exchange Street  
Brodhead, WI 53202-1469

**RE: Certification of Legal Notice Rates for January – December 2026**

This is a request for information to certify your newspaper for publishing legal notices per Chapters 10 and 985, Wis. Stats. Follow the steps below:

1. \*\*Review your current 2025 Certification Letter
2. \*\*Complete the attached Application form, DOA-3417 (pre-populated with information from the database)
3. \*\*Submit a Statement of Ownership (PS-3526) from your USPS office or alternative method listed on DOA-3417.
4. \*\*Send in a full-page tear sheet from your legal/public notice section of your newspaper

**\*\*Due to working out of my home, please send all items electronically to my email address**  
([william2.goff@wisconsin.gov](mailto:william2.goff@wisconsin.gov)).

All of the instructions are on the attached DOA form. Form DOA-3417 is also available as a fillable electronic form on our VendorNet website: Newspaper Rates for Publication of Legal Notices at <https://doa.wi.gov/Forms/DOA-3417ApplicationtoCertifyNewspaperLegalNoticeRates.docx>.

To be certified for 2026 you must return items 2 – 4 listed above. Please return by October 31, 2025 by email ([william2.goff@wisconsin.gov](mailto:william2.goff@wisconsin.gov)). **FAXED paperwork will not be accepted.**

*Failure to return the three items listed above (2 – 4) will deny your newspaper the legal right to collect a fee for publishing legal notices.*

This application process is performed annually for certifying newspapers to publish legal notices and updating information throughout the year concerning font sizes, column widths, address or name changes and closures. State agencies, universities and municipalities shall not be held to any rate changes until your newspaper is certified by the Department of Administration.

If you have, any questions in regard to this program please contact me, Bill Goff at [william2.goff@wisconsin.gov](mailto:william2.goff@wisconsin.gov) and I will be happy to assist you.

Thank you for your time and assistance with this process. I look forward to your certification paperwork.

Sincerely,

Bill Goff  
Procurement Specialist  
Newspaper Certification Program  
State Bureau of Procurement  
Division of Enterprise Operations  
Department of Administration  
101 E Wilson St, 6<sup>th</sup> Floor  
Madison, WI 53703-3405

Enclosure(s)  
Form DOA-3417



## Application to Certify Newspaper Legal Notice Rates

**Instructions:** State of Wisconsin newspapers must apply to receive any compensation or fee for publishing legal notices by completing this form. **To renew your certification or apply for the first time, please complete all five (5) sections of this form.**

After renewal, if you need to update your information, only fill in the spaces on this form that apply to the change(s) and submit ten days prior to the effective date of the change so that new rates issued by the Department of Administration can be sent to the newspaper.

Return all of the required documents to the address above by US mail.

|                                                  |                              |                                                              |                                             |
|--------------------------------------------------|------------------------------|--------------------------------------------------------------|---------------------------------------------|
| <input checked="" type="checkbox"/> Renew        | <input type="checkbox"/> New | <input type="checkbox"/> Change to current information       | Effective Date of Change<br>January 1, 2026 |
| <b>1. Newspaper Name:</b><br>Evansville Examiner |                              | Contact Person for placing legal notices<br>Legal Department |                                             |
| Street Address<br>917 Exchange Street            | PO Box                       | **County<br>Rock                                             |                                             |
| City<br>Brodhead                                 | State<br>WI                  | Zip+4<br>53202-1469                                          |                                             |
| Telephone Number<br>(608) 897-2193               | Fax Number<br>(608) 897-4137 | Contact Email Address<br>Legals@RVPublishing.com             |                                             |

**\*\*Place of Publication, as defined in Wis. Stat. § 985.01(5)**  
Evansville, WI

Will you accept emailed legal notices? ☐ YES ☐ NO

### \*\*Areas covered by Newspaper

(list all cities, towns, and villages which your newspaper provides circulation)

Beloit, Brodhead, Clinton, Edgerton, Evansville, Footville, Janesville, Milton, Orfordville

|                                                                                                                               |                  |                                    |                 |                 |                 |             |                             |
|-------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------|-----------------|-----------------|-----------------|-------------|-----------------------------|
| Published on:                                                                                                                 | Monday           | Tuesday                            | Wednesday       | Thursday<br>X   | Friday          | Saturday    | Sunday                      |
| Total Circulation                                                                                                             | Paid Circulation | WEB Address<br>RockValleyENews.com |                 |                 |                 |             | TAX ID NUMBER<br>36-4315880 |
| Column Width (measured in picas) ** Please Verify Column Widths and Font List **                                              |                  |                                    |                 |                 |                 |             |                             |
| Col 1<br>9.500                                                                                                                | Col 2<br>19.750  | Col 3<br>30.000                    | Col 4<br>40.250 | Col 5<br>50.500 | Col 6<br>60.750 | Col 7       | Col 8                       |
| Col 9                                                                                                                         | Col 10           | Col 11                             | Col 12          | Col 13          | Col 14          | Col 15      | Col 16                      |
| New applicants must complete the section below. Renewing applicants should skip to Section 2 unless changing or adding fonts. |                  |                                    |                 |                 |                 |             |                             |
| Font & Size                                                                                                                   | Font & Size      | Font & Size                        | Font & Size     | Font & Size     | Font & Size     | Font & Size | Font & Size                 |
| Arial 8pt                                                                                                                     |                  |                                    |                 |                 |                 |             |                             |
| Arial Bold 8pt                                                                                                                |                  |                                    |                 |                 |                 |             |                             |
|                                                                                                                               |                  |                                    |                 |                 |                 |             |                             |

**ONLY if you are changing or adding fonts, submit a SAMPLE of the fonts.** A font sample consists of three (3) alphabet lengths a through z in lowercase, repeated in one continuous line. The sample must NOT contain kerning, ligatures, and must be flush left (ragged right) e.g.: abcdefghijklmnopqrstuvwxyzabcdefghijklmnopqrstuvwxyzabcdefghijklmnopqrstuvwxyz

**One sample of each point size and style (bold or italic) must be submitted with name and size of font on a separate sheet.**

## 2. Parent Company Information: (if different than #1 above)

|                                                      |                                     |                                                           |
|------------------------------------------------------|-------------------------------------|-----------------------------------------------------------|
| Parent Company Name<br><b>Rock Valley Publishing</b> |                                     | Parent Company Contact Person<br><b>Sue Z Lange</b>       |
| Street Address<br><b>1102 Ann Street</b>             | PO Box                              | Tax ID Number<br><b>36-4315880</b>                        |
| City<br><b>Delavan</b>                               | State<br><b>WI</b>                  | Zip + 4<br><b>53115-1938</b>                              |
| Telephone Number<br><b>(262) 728-3411</b>            | Fax Number<br><b>(262) 725-7702</b> | Email for Parent Company<br><b>suez@standardpress.com</b> |

Have you submitted the completed DOA-6448 Taxpayer Identification Number Verification form?

☐ YES

☐ NO

**\*\*Please verify TAX ID # for both Newspaper Company and Parent Company\*\***

## 3. Required Verification of Paid Circulation:

To verify your newspaper's total paid circulation, you are required to submit one of the forms listed below every year from an independent third party. The State of Wisconsin Department of Administration requires the most recent 12 months of your paid circulation numbers on or before the 15th of October of each year. This will certify that your publication meets the requirements of Statute 985.03.

☐ United States Postal Service Statement of Ownership, Management and Circulation (PREFERRED)  
(All Periodicals Publications except Requester Publications) PS Form 3526

☐ Audit Bureau of Circulation: [www.accessabc.com](http://www.accessabc.com)

☐ Verified Audit Circulation: <http://www.verifiedaudit.com/>

☐ Circulation Verification Council: <http://www.cvcaudit.com/>

☐ Other: \_\_\_\_\_

## 4. Required Sample

Please scan as much of a full page as possible of your newspaper that displays your legal notice or classifieds section.

## 5. Certification

By signing below, I certify that the newspaper named above meets the criteria in Wis. Stat. § 985.03(1) and that the information I have provided in this application is true and complete to the best of my knowledge. I understand that any false, misleading, or missing information may disqualify me from consideration.

|            |             |                           |
|------------|-------------|---------------------------|
| Print Name | Print Title | Telephone Number<br>( ) - |
| Signature  |             | Date (mm/dd/ccyy)         |