

GENERAL PRIMARY ELECTION OF MARCH 17, 2020

KENDALL COUNTY, STATE OF ILLINOIS

GENERAL INFORMATION for ESTABLISHED PARTY CANDIDATES* FILING WITH THE

LOCAL ELECTION AUTHORITY: DEBBIE GILLETTE, KENDALL COUNTY CLERK

SIGNATURE REQUIREMENTS

	<u>R</u>	<u>D</u>
COUNTY OFFICERS	181	138
COUNTY BOARD DISTRICT #1	60	52
COUNTY BOARD DISTRICT #2	47	59
PRECINCT COMMITTEEMAN	10	10

PETITION CIRCULATION

Begins SEPTEMBER 3, 2019

FILING DATES

Beginning at 8:00 am on NOVEMBER 25, 2019 – Ending at 5:00 pm on DECEMBER 2, 2019
The County Clerk's Office will be closed November 28th & 29th for the Thanksgiving holiday.

FILING LOCATION

OFFICE OF THE KENDALL COUNTY CLERK
111 W FOX ST, YORKVILLE, IL 60560

CLERK'S OFFICE: 630-553-4104

The GENERAL ELECTION for 2020 will be held on NOVEMBER 3, 2020

*Additional Candidate & Election information and/or designations may be obtained from the State Board of Elections at 217-782-4141 (Springfield); 312-814-6440 (Chicago) or their website:

www.elections.il.gov

The Kendall County Clerk's Office provides election materials and information as a guide. Effort is expended to present reliable information; such guidance is not intended to be exhaustive or take the place of competent Legal Counsel. The Kendall County Clerk's Office recommends that all prospective candidates consult with competent Legal Counsel when preparing election paperwork.

The Kendall County Clerk's Office does not provide legal advice to candidates.

STATEMENT OF CANDIDACY

Table with 5 columns: NAME, ADDRESS-ZIP CODE, OFFICE, DISTRICT, PARTY. Includes a note: 'A Full Term is sought, unless an unexpired term is stated here: ___ year unexpired term'

If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the following (this information will appear on the ballot)

FORMERLY KNOWN AS (List all names during last 3 years) UNTIL NAME CHANGED ON (List date of each name change)

STATE OF ILLINOIS)
County of) SS.

I, (Name of Candidate) being first duly sworn (or affirmed), say that I reside at (Address), in the City, Village, Unincorporated Area of (Municipality) Zip Code (Zip Code), in the County of (County), State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the (Party) Party; that I am a candidate for Nomination/Election to the office of (Office) in the (District) District, to be voted upon at the primary election to be held on (Date of election) (date of election) and that I am legally qualified (including being the holder of any license that may be an eligibility requirement for the office to which I seek the nomination) to hold such office and that I have filed (or I will file before the close of the petition filing period) a Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official (Name of Party) Primary ballot for Nomination/Election for such office.

(Signature of Candidate)

Signed and sworn to (or affirmed) by (Name of Candidate) before me, on (insert month, day, year)

(SEAL)

(Notary Public's Signature)

ATTACH TO PETITION

10 ILCS 5/7-10.1

Suggested
Revised July, 2004
SBE No. P-1C

LOYALTY OATH
(OPTIONAL)

United States of America)
) SS.
State of Illinois)

I, _____, do swear (or affirm) that I am a citizen of the United States and the State of Illinois, that I am not affiliated directly or indirectly with any communist organization or any communist front organization, or any foreign political agency, party, organization or government which advocates the overthrow of constitutional government by force or other means not permitted under the Constitution of the United States or the Constitution of this State; that I do not directly or indirectly teach or advocate the overthrow of the government of the United States or of this State or any unlawful change in the form of the governments thereof by force or any unlawful means.

(Signature of Candidate)

Signed and sworn to (or affirmed) by _____ before me,
(Name of Candidate)

on _____.
(insert month, day, year)

(Notary Public's Signature)

(SEAL)

PRECINCT COMMITTEEPERSON PRIMARY PETITION

We, the undersigned, members of and affiliated with the _____ Party and qualified primary electors of the _____ Party, in _____ (township name and precinct number) in the County of _____, State of Illinois, do hereby petition that _____ who resides at _____ in the City, Village, Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) Zip Code _____, County of _____ and State of Illinois, shall be a candidate of the _____ Party for election to the office of **PRECINCT COMMITTEEPERSON**, for _____ (township name and precinct number), to be voted for at the primary election to be held on _____ (date of election).

If required pursuant to 10 ILCS 5/7-10.2, complete the following (this information will appear on the ballot)

FORMERLY KNOWN AS _____ UNTIL NAME CHANGED ON _____
(List all names during last 3 years) (List date of each name change)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____)

SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service)(Zip Code) _____, County of _____, State of _____ that I am 18 years of age or older (or 17 years of age and qualified to vote in Illinois), that I am a citizen of the United States, and that the signatures on this sheet were signed in my presence, not more than 90 days preceding the last day for filing of the petitions and are genuine and that to the best of my knowledge and belief the persons so signing were at the time of signing the petition qualified voters of the _____ Party in the political division in which the candidates is seeking nomination/elective office, and that their respective residences are correctly stated, as above set forth.

(Circulator's Signature)

Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (Insert month, day, year)

(Notary Public's Signature)

(SEAL)