COUNTY COMMISSIONERS, BOARD MEMBERS, & BOARD OF REVIEW MEMBERS (IN SOME COUNTIES, NOT INCLUDING COOK)

Elected by District & At-Large

NOMINATION PAPERS

Petitions: Established Party (SBE Form P-10); Established Party county board by district (SBE Form P-26); Independent (SBE Form P-3); New Party, at-large (SBE Form P-8); New Party, at-large and by district (SBE Form P-8B)

Statement of Candidacy: Established Party (SBE Form P-1); Independent (SBE Form P-1B); New Party (SBE Form P-1D)

Loyalty Oath (optional): All candidates (SBE Form P-1C)

Statement of Economic Interests: Filed with the county clerk. The receipt must be filed with petitions or by the end of the filing

period.

SIGNATURE REQUIREMENTS

Established Party: At least 0.5% (.005) of the number of qualified electors of the candidate's party in the district who cast votes at the last General Election. The highest vote getter could be any federal, state or county candidate. (10 ILCS 5/7-10(c))

Independent: Not less than 5%, nor more than 8% (or 50 more than the minimum, whichever is greater) of the number of persons who voted at the last regular election in such district in which such district voted as a unit for that office. Also applies to Chair of the County Board and county board members elected from the county at-large. (10 ILCS 5/10-3)

New Party: Not less than 5% of the number of voters who voted at the last regular election in such district or political subdivision in which such district or political subdivision voted as a unit for the election of officers to serve its respective territorial area, except that where 5% is greater than 25,000, the minimum number of signatures required is 25,000. (10 ILCS 5/10-2)

For specific signature calculations, contact the county clerk.

QUALIFICATIONS:

(10 ILCS 5/7-10, 10-5; 55 ILCS 5/2-3015)

- 18 years of age (or will be 18 by the date of the upcoming General Election)
- United States citizen
- Resident of the county for at least one year prior to the election
- Registered voter in county or county board district (see redistricting section)

FILING PERIODS:

Established Party:

November 27 – December 4, 2023

Independent and New Party:

June 17 - June 24, 2024

TERM:

Term of office: Two or Four year term (contact the county clerk's office for further information) (55 ILCS 5/2-3009(a)(b))

County Commissioner & County Board of Review Member: Six years and until a successor is elected and qualified

Term begins: December 2, 2024**

County Board Member (55 ILCS 5/2-3009) Commissioner (55 ILCS 5/2-3009)

**Elected Board of Review members: 10 Days after the canvass of the vote is completed. (35 ILCS 200/6-35)

FILING INFORMATION

Established Party: Not more than 113 nor less than 106 days prior to the General Primary. (10 ILCS 5/7-12) **Independent & New Party:** Not more than 141 nor less than 134 days prior to the General Election. (10 ILCS 5/10-6)

Candidates will file in the office of the county clerk. Candidates in Peoria County file with the Peoria County Board of Election Commissioners.

Campaign Contributions: Reports must be filed either electronically or on paper with the State Board of Elections, 2329 S. MacArthur Blvd., Springfield, IL 62704, or 69 W. Washington St., Pedway LL-08, Chicago, IL 60602.

GENERAL PRIMARY ELECTION OF MARCH 19, 2024 KENDALL COUNTY, STATE OF ILLINOIS

*GENERAL INFORMATION for ESTABLISHED PARTY CANDIDATES

FILING WITH THE LOCAL ELECTION AUTHORITY: DEBBIE GILLETTE, KENDALL COUNTY CLERK

SIGNATURE REQUIREMENTS

	REPUBLICAN	DEMOCRATIC	KENDALL COUNTY PARTY
COUNTY OFFICES	179	116	63
COUNTY BOARD DISTRICT #1	94	55	29
COUNTY BOARD DISTRICT #2	85	61	35
PRECINCT COMMITTEEPERSON	10	10	10

PETITION CIRCULATION

Begins TUESDAY, SEPTEMBER 5, 2023

FILING DATES

Beginning at 8:00 am on MONDAY, NOVEMBER 27. 2023

Ending at 5:00 pm on MONDAY, DECEMBER 4, 2023.

FILING LOCATION

KENDALL COUNTY VOTER REGISTRATION OFFICE

111 W. Fox St., Room 104, Yorkville, IL 60560 Voter Registration Office: 630.553.4105

The GENERAL ELECTION FOR 2024 will be held on TUESDAY, NOVEMBER 5, 2024

*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.

Suggested Revised March 2020 SBE No. P-1

STATEMENT OF CANDIDACY

NAME:	OFFICE:
ADDRESS – ZIP CODE:	A Full Term is sought, unless an unexpired term is stated here:year unexpired term
	DISTRICT:
	PARTY:
If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, comple	ete 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)) SS. County of)	
Journey or	
	e of Candidate) being first duly sworn (or affirmed), say that I reside City, Village, Unincorporated Area of
if unincorporated, list municipality that provides postal service	
	at I am a qualified voter therein and am a qualified Primary voter of the
Party; that I	am a candidate for Nomination/Election to the office of
in the	District, to be voted upon at the primary election to be held on
(date of election) and tha	at I am legally qualified (including being the holder of any license that
may be an eligibility requirement for the office to which I so	eek the nomination) to hold such office and that I have filed (or I will
ile before the close of the petition filing period) a State	ement of Economic Interests as required by the Illinois Governmental
Ethics Act and I hereby request that my name be printed	d upon the official(Name of Party)
Primary ballot for Nomination/Election for such office.	
	(Signature of Candidate)
Signed and sworn to (or affirmed) by	before me, on
(Name of	Candidate) (insert month, day, year)
(SEAL)	(Notary Public's Signature)
\ - /	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

COUNTY BOARD MEMBER (counties that elect members from districts) PRIMARY PETITION

We, the undersigned, member	ers of and affiliated with the	Pa	rty and qualified primary of	electors of the
	Party, in County Board District			
	who re			
•	(if unincorporate			
	State of Illinois, shall be a candidate of			
	ounty Board District in		in the State of Illinois	, to be voted fo
	d on (d	,		
<u> </u>	an unexpired term is stated here: 10 ILCS 5/7-10.2, complete the following (th	•	lot\	
• •			•	
FORMERLY KNOWN A	(List all names during last 3 years)		ist date of each name change)	
NAME (VOTER'S SIGNATUR	VOTER'S PRINTED RE) NAME (optional)	STREET ADDRESS (RR NUMBER	OR 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.			
	(Circulator's Name) do here	shy certify that I reside at		in the
	a of(if unin			
	State of that I am 18 years			
	nd that the signatures on this sheet we			
	nuine and that to the best of my knowle			
qualified voters of the	Party in the politic	al division in which the candida	tes is seeking nomination/ele	ctive office, and
that their respective residences	are correctly stated, as above set forth			
		(Ci	irculator's Signature)	
Signed and sworn to (or affirmed) by(Name of Circulator)	before me, on	(Inpart month day year)	
	(Name of Circulator)		(mserrmonth, day, year)	
(SEAL)		(Ne	otary Public's Signature)	
	SHEET NO	•		

ATTAC	OT H	PETITION	
AIIA	ים ו	PETITION	

10 ILCS 5/7-10.1

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

LOYALTY OATH (OPTIONAL)

United States of America)				
State of Illinois)	SS.			
I,			, do swear (o	r affirm) that I am	a citizen of the
United States and the State of Illi	inois, that I	am not affi	liated directly of	or indirectly with	any communist
organization or any communist fro	ont organiza	tion, or any	foreign politica	al agency, party,	organization or
government which advocates the	overthrow (of constituti	onal governme	nt by force or ot	her means not
permitted under the Constitution of	the United S	States or the	Constitution of	this State; that I d	o not directly or
indirectly teach or advocate the ov	erthrow of t	the governm	nent of the Unit	ed States or of th	nis State or any
unlawful change in the form of the	governments	s thereof by	force or any un	lawful means.	
				(Signature of Can	ididate)
Signed and sworn to (or af	firmed) by	(1	Name of Candid	date)	before me,
on (insert month, day, year)					
(insert month, day, year)					
				(Notary Public's	s Signature)
(SEAL)					

STATEMENT OF ECONOMIC INTERESTS

INSTRUCTIONS:

BASIC INFORMATION:

You may find the following documents helpful to you in completing this form:

- (1) federal income tax returns, including any related schedules, attachments, and forms; and
- (2) investment and brokerage statements.

To complete this form, you do not need to disclose specific amounts or values or report interests relating either to political committees registered with the Illinois State Board of Elections or to political committees, principal campaign committees, or authorized committees registered with the Federal Election Commission.

The information you disclose will be available to the public.

You must answer all 7 questions. Certain questions will ask you to report any applicable assets or debts held in, or payable to, your name; held jointly by, or payable to, you with your spouse; or held jointly by, or payable to, you with your minor child. If you have any concerns about whether an interest should be reported, please consult your department's ethics officer, if applicable.

Please ensure that the information you provide is complete and accurate. If you need more space that the form allows, please attach additional pages for your response. If you are subject to the State Officials and Employees Ethics Act, your ethics officer must review your statement of economic interests before you file it. Failure to complete the statement in good faith and within the prescribed deadline may subject you to fines, imprisonment, or both.

Office, department, or agency that requires you to file this form: Other offices, departments, or agencies that require you to file a Statement of Economic Interests form: Full Mailing Address: Preferred Email Address (optional): QUESTIONS: 1. If you have any single asset that was worth more than \$10,000 as of the end of the preceding calendar year and is held in, or payable to, your name, held jointly by, or payable to, you with your spouse, or held jointly by, or payable to, you with your minor child, list such assets below. In the case of investment real estate, list the city and state where the investment real estate is located. If you do not have any such assets, list "none" below. 2. Excluding the position for which you are required to file this form, list the source of any income in excess of \$7,500 required to be reported during the preceding calendar year. If you sold an asset that produced more than \$7,500 in capital gains in the preceding calendar year, list the name of the asset and the transaction date on which the sale or transfer took place. If you had no such sources of income or assets, list "none" below. Source of Income / Name of Asset Date Sold (if applicable)

 Excluding debts incurred on terms available to the general public, such as mortgages, student loans, as card debts, if you owed any single debt in the preceding calendar year exceeding \$10,000, list the cred debt below. If you had no such debts, list "none" below. 			
	List the creditor for all applicable debts owed by you, owed jointly by you with your spouse, or owed jointly by you with your minor child. In addition to the types of debts listed above, you do not need to report any debts to or from financial institutions or government agencies, such as debts secured by automobiles, household furniture or appliances, as long as the debt was made on terms available to the general public, debts to members of your family, or debts to or from a political committee registered with the Illinois State Board of Elections or any political committee, principal campaign committee, or authorized committee registered with the Federal Election Commission.		
4.	List the name of each unit of government of which you or your spouse were an employee, contractor, or office holder during the preceding calendar year other than the unit or units of government in relation to which the person is required to file and the title of the position or nature of the contractual services. Name of Unit of Government Title or Nature of Services		
5.	If you maintain an economic relationship with a lobbyist or if a member of your family is known to you to be a lobbyist registered with any unit of government in the State of Illinois, list the name of the lobbyist below and identify the nature of your relationship with the lobbyist. If you do not have an economic relationship with a lobbyist or a family member known to you to be a lobbyist registered with any unit of government in the State of Illinois, list "none" below. Name of Lobbyist Relationship to Filer		
6.	List the name of each person, organization, or entity that was the source of a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500 received during the preceding calendar year and the type of gift or gifts, or honorarium or honoraria, excluding any gift or gifts from a member of your family that was not known to be a lobbyist registered with any unit of government in the State of Illinois. If you had no such gifts, list "none" below.		
7.	List the name of any spouse or immediate family member living with the person making the statement employed by a public utility in the State and the name of the public utility that employs the relative. Name and Relation Public Utility		
VE	RFICATION:		
my Go \$2, imp	declare that this statement of economic interests (including any attachments) has been examined by me and to the best of knowledge and belief is a true, correct and complete statement of economic interests as required by the Illinois vernmental Ethics Act. I understand that the penalty for willfully filling a false or incomplete statement is a fine not to exceed 500 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and prisonment." Inted Name of Filer:		
Da	te:		

Signature:

CANDIDATE CHECKLIST

Meet residency , age , and other qualifications for the specific office
File paperwork with the SBE Campaign Disclosure division or the Federal
Election Commission regarding finances (if needed)
File a notarized Statement of Candidacy including (but not limited to):
- Your Name
- Your Address
Office SoughtParty
 Office Location (for example, the district or county)
- Date of the Election
File a Statement of Economic Interests receipt (does not apply to federal offices or political party offices)
File a Loyalty Oath (optional)
File notarized petition sheets with the required number of signatures, numbered consecutively starting with the number "1"
Include Certificate of Deletions with petitions, numbered consecutively starting with the number "1" (if applicable)
File with the Kendall County Clerk
*Preferred form order: Statement of Candidacy, Petition(s), Loyalty Oath (optional), and Statement of Economic Interest receipt (if applicable), and properly bound.

Note: This checklist is not binding and should not be construed as sufficient argument in response to any objection or legal argument. If you have further questions, you may contact the division of Election Operations at the State Board of Elections or your legal counsel.
