WARD & PRECINCT COMMITTEEPERSONS

NOMINATION PAPERS

Petitions: Established Party, Ward Committeeperson (<u>SBE Form P-10</u>), Precinct Committeeperson (<u>SBE Form P-27</u>)
Statement of Candidacy: Established Party (<u>SBE Form P-1</u>)
Loyalty Oath (optional): All candidates (<u>SBE Form P-1C</u>)
Statement of Economic Interests: Not required for party offices.

SIGNATURE REQUIREMENTS

Established Party: <u>Ward Committeeperson</u> – not less than 5% nor more than 8% (or 50 more than the minimum, whichever is greater*) of the primary electors of the candidate's party in the ward. Signature requirements may be obtained from the Chicago Board of Election Commissioners (312/269-7900). (10 ILCS 5/7-10(i))

<u>Precinct Committeeperson</u> – a minimum of 10 primary electors of the candidate's party in their precinct. (10 ILCS 5/7-10(i))

*Although the express language of Section 7-10(i), which applies in this instance, requires not less than 10% nor more than 16% (or 50 more than the minimum, whichever is greater) of the primary electors of the candidate's party in the ward, the U.S. Court of Appeals for the Seventh Circuit held in <u>Gjersten v. Board of Election Commissioners for City of</u>

QUALIFICATIONS:

(10 ILCS 5/7-8(b), 7-10, 10-5)

- United States citizen
- Registered voter
- Resident of the ward or precinct for which the candidate wishes to seek office

FILING PERIODS:

Established Party:

November 27 – December 4, 2023

TERM:

Term of office: Ward Committeeperson: Four years

Precinct Committeeperson: Two years (10 ILCS 5/7-8(b))

Term begins: Date of completion of canvass and proclamation (10 ILCS 5/7-58)

<u>Chicago</u>, 791 F. 2d 472 (7th Cir., 1986), that a signature requirement in excess of 5% is unconstitutional and thus unenforceable. Thus, 5% of the primary electors of the candidate's party in the ward is the minimum number of signatures required for ward committeeperson petitions.

FILING INFORMATION

Established Party: Not more than 113 nor less than 106 days prior to the General Primary. (10 ILCS 5/7-12(5))

All candidates will file with the Office of the County Clerk. (10 ILCS 5/7-12(5))

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: <u>www.elections.il.gov</u>

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.

ATTACH TO PETITION

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, complete t	the following (this information will appear on the ballot)
FORMERLY KNOWN AS (List all names during last 3 years)	JNTIL NAME CHANGED ON (List date of each name change)
STATE OF ILLINOIS)) SS.	
County of)	
(Name of	Candidate) being first duly sworn (or affirmed), say that I reside
at, in the Cit	y, Village, Unincorporated Area of
(if unincorporated, list municipality that provides postal service) Z	ip Code, in the County of
, State of Illinois; that I	am a qualified voter therein and am a qualified Primary voter of the
Party; that I a	m 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 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 Stateme	nt of Economic Interests as required by the Illinois Governmental
Ethics Act and I hereby request that my name be printed u	pon 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)

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 COMMITTE	EEPERSON , 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) _) SS.)	•		
I,		certify that I reside at		, in th
City/Village/Unincorporated Area of				
County of, State of				
a citizen of the United States, and that t	he signatures on this sheet were	signed in my presence, not more t	han 90 days preceding	the last day for
filing of the petitions and are genuine an	d that to the best of my knowledge	e and belief the persons so signing	were at the time of sig	ning the petitio

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	(Name of Circulator)	before me, on	(Insert month, day, year)	
(SEAL)			(Notary Public's Signature)	

SHEET NO. _____

___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_____

(Name of Candidate)

on ___

(insert month, day, year)

(Notary Public's Signature)

before me,

(SEAL)

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 Sought Party
 Office Location (for example, the district or county) Date of the Election
File a Statement of Economic Interests receipt (does not apply to federal office 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.
te: This checklist is not binding and should not be construed as sufficient argument in response to any tion or legal argument. If you have further questions, you may contact the division of Election Operation at the State Board of Elections or your legal counsel.