

Kane County

Deputy Registrar's Handbook



Issued by:

John A. Cunningham

Kane County Clerk

COUNTY OF KANE

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Dear Deputy Registrar,

Thank you for assuming the responsibilities of a deputy registrar. Your work in registering voters provides a most important service to your community.

The Deputy Registrar's Handbook describes the eligibility requirements and terms of appointment of deputy registrars as well as their duties and responsibilities. General information about the training of deputy registrars and the proper completion of voter registration forms is also included.

The minimum age requirement has changed for people who want to register to vote before the next General Primary. If a person is 17 years old by the date of the General Primary Election, and will be 18 years old on or before the date of the following General Election they may register and are qualified to vote in the next General Primary and following General Election.

If you have any questions or need assistance, please call the Elections Department of the Kane County Clerk's office at 630-232-5990.

Sincerely,

A handwritten signature in black ink that reads 'John A. Cunningham'. The signature is written in a cursive style with a large, sweeping 'J' and 'C'.

John A. Cunningham
Kane County Clerk

February 2019

DEPUTY REGISTRAR RULES AND REGULATIONS

1. All registrations must be completed by the deputy registrar and must be accurate, neat and timely.
2. Completed voter registration cards must be returned to the County Clerk's office within seven (7) days of the registration, except at the close of registration before an election, when registrations must be returned within 48 hours if such registrations were accepted between the 35th and 28th day preceding an election. Registrations accepted on the 28th day preceding an election must be returned within 24 hours.
3. Close of Registration: Deputy registrars appointed through bona fide groups, labor unions, political parties, libraries, and deputy registrars located in township and municipal offices may take registrations up to the 28th day before an election. The County Clerk's office will notify you of the closing date for taking registrations.
4. Each deputy registrar is responsible for all voter registration cards issued to him/her. ALL damaged and unused cards must be returned to the County Clerk's office. ALL cards must be accounted for. CARDS MAY NOT BE TRANSFERRED TO ANOTHER DEPUTY REGISTRAR.
5. The County Clerk reserves the right to limit the number of voter registration cards issued to each deputy registrar depending upon the work record of the registrar.
6. Place of Registration: (a)Deputy registrars appointed because of their membership in bona fide civic groups, labor unions, and political parties may take registrations anywhere in Kane County for all qualified residents of the state.
(b)Deputy registrars appointed because of official position (township and municipal clerks, librarians, and school officials) are authorized to take registrations only at their offices, libraries, or school from any qualified residents of the state.
(c)The Director of Healthcare and Family Services and the Illinois Department of Employment Security Director may only accept the registration of any qualified resident in the county in which their office is located.
7. Deputy registrars must return completed registration materials to the Kane County Clerk's office. Completed registration materials returned by deputy registrars for persons residing outside of Kane

County shall be transmitted by the County Clerk's office to the proper jurisdiction.

8. Special Registration Events: The County Clerk's office encourages special registration efforts, such as taking registration at shopping centers, community events, schools and other public locations. The following procedures are required to obtain limited quantities of voter registration cards for special voter registration events:
 - A written request must be made to the County Clerk's office at least seven (7) days prior to the registration event;
 - This request must include the date, time, place of registration, and name of the deputy registrar who will be responsible for the registration event;
 - The deputy registrar responsible for the registration event must pick up the supplies from the County Clerk's office and must return registrations and all supplies to the County Clerk's office within seven (7) days after the special registration event.
9. DEPUTY REGISTRARS MAY NOT ENGAGE IN ANY ELECTIONEERING OR THE PROMOTION OF ANY CAUSE WHILE TAKING REGISTRATIONS. At a place of registration, no one may circulate petitions, distribute literature, wear political buttons, or display political signs.
10. Political parties having certified civic organization status must NOT conduct voter registration activities at political functions.
11. Deputy registrars may not take registrations in any area where liquor and alcoholic beverages are served, sold, or consumed.
12. Deputy registrars must be courteous and impartial when taking registrations, regardless of the potential voter's race, creed, color, sexual orientation, or party affiliation.
13. Appointments of deputy registrars, except precinct committeemen, shall be for 2-year terms, commencing on December 1st following the general election of each even-numbered year; except that the mid-term appointments shall be until December 1st following the next general election.

Appointments of precinct committeemen shall be for 2-year terms commencing on the date of the county convention following the general primary at which they were elected.

WHO CAN BE A DEPUTY REGISTRAR

- Precinct Committeemen
- Secretary of State appointees
- Chief Librarians or their qualified designees
- Principal of any High School, Elementary School, or Vocational School or their qualified designees
- President of any University, College, Community College, or their qualified designees
- Elected or appointed official of a bona fide labor organization or their qualified designees
- Elected or appointed official of a bona fide civic organization (certified with the State Board of Elections)
- Director of Illinois Department of Healthcare and Family Services or their qualified designees
- Director of the Illinois Department of Employment Security or their qualified designees
- President of a corporation or their qualified designees
- Chairperson of the County Central Committee of recognized political parties
- County Clerk
- Municipal and Township or Road District Clerks or their deputies

REVOCAION OF APPOINTMENT

The Kane County Clerk's office is responsible for certifying and supervising all appointed deputy registrars.

Deputy registrars are subject to removal for cause. Grounds for dismissal could be, but are not necessarily limited to: failure to attend training sessions, no longer affiliated with sponsoring group, suspension of registrar's own registration, moving out of jurisdiction, knowingly furnishing false information and repeated failure to properly execute registration forms, and failure to comply with registration procedures and regulations.

GENERAL INSTRUCTIONS REGARDING VOTER REGISTRATION CARDS

1. The voter registration cards must be completed in BLACK INK.
2. PRINT ALL INFORMATION required on the cards.

3. If a mistake is made, use a new voter registration card. Return the damaged cards to the County Clerk's office, indicating that they are damaged. ALL CARDS MUST BE ACCOUNTED FOR.
4. DO NOT TRANSFER CARDS TO ANOTHER DEPUTY REGISTRAR.
5. For additional supplies, complete the Supply Order Form and return it to the County Clerk's office. The County Clerk reserves the right to limit the number of voter registration cards issued to deputy registrars.

If you have any questions regarding the information printed in this booklet, you may call the Election Department of the Kane County Clerk's office at (630) 232-5990.

Our voter card is a two-part pressure sensitive card. Please, be sure to apply adequate pressure when filling out this form. Upon completion, the top portion shall be returned to the County Clerk's office and will then become the voter's permanent record. On the reverse side of this record is an application to serve as a judge of election.

The bottom portion of the voter card (green copy) is the applicant's receipt. The applicant should be instructed to keep this receipt, as there is a transfer of voter registration form on the reverse side.

PROCESSING REGISTRATION APPLICATIONS

Upon receipt, the voter's registration application is processed by the County Clerk's office. The registrant should be informed that they will receive their voter identification card in the mail within 7-14 days.

A change of address will be processed in the same manner as a new registration with a new voter identification card being mailed within 7-14 days.

ANY registered voter who changes his or her name **MUST** re-register.
ANY registered voter who moves to another county **MUST** re-register.

SAMPLE VOTER REGISTRATION CARD

REGISTRAR: PRINT HARD USE BLACK BALL-POINT PEN GIVE VOTER THE GREEN COPY		DEPUTY REGISTRAR NO.															
1	CHECK BOXES THAT APPLY: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change																
2	LAST NAME CIRCLE JR SR II III IV FIRST NAME MIDDLE INITIAL COUNTY																
LEGAL RESIDENCE - (Do Not Give P.O. Box) House No. & Street Name Apt. No. City or Village Zip		Telephone numbers Home _____ Day _____															
DATE OF BIRTH: (MM/DD/YY) PLACE OF BIRTH: State or Country SEX Driver's License		<div style="border: 2px solid red; padding: 5px; color: black; font-weight: bold;"> (ONLY) IL DL# or last 4 of SS# </div>															
3	ADDRESS WHERE YOU GET YOUR MAIL: (If Different from Above, i.e.: P.O. Box) House No. & Street Name Apt. No. P.O. Box City or Village																
4	PRIOR REGISTRATION: ADDRESS: FORMER NAME																
5	If born outside of the United States, complete this section: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Citizenship</td> <td style="width: 25%;">Naturalization:</td> <td style="width: 25%;">Own Papers <input type="checkbox"/></td> <td style="width: 25%;">Parent's Papers <input type="checkbox"/></td> </tr> <tr> <td>Born of U.S. Parents</td> <td>Court</td> <td>City</td> <td>State</td> </tr> <tr> <td>Naturalized</td> <td></td> <td></td> <td>Date</td> </tr> </table>	Citizenship	Naturalization:	Own Papers <input type="checkbox"/>	Parent's Papers <input type="checkbox"/>	Born of U.S. Parents	Court	City	State	Naturalized			Date				
Citizenship	Naturalization:	Own Papers <input type="checkbox"/>	Parent's Papers <input type="checkbox"/>														
Born of U.S. Parents	Court	City	State														
Naturalized			Date														
6	If unable to sign name complete this section: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Father's First Name</td> <td style="width: 15%;">Mother's First Name</td> <td style="width: 10%;">Height</td> <td style="width: 10%;">Color of Eyes</td> <td style="width: 50%;">Reason for inability to Sign Name</td> </tr> <tr> <td colspan="4">Distinguishing Marks</td> <td>Physical Disability <input type="checkbox"/> Describe _____</td> </tr> <tr> <td colspan="4"></td> <td>Unable to Write <input type="checkbox"/></td> </tr> </table>	Father's First Name	Mother's First Name	Height	Color of Eyes	Reason for inability to Sign Name	Distinguishing Marks				Physical Disability <input type="checkbox"/> Describe _____					Unable to Write <input type="checkbox"/>	
Father's First Name	Mother's First Name	Height	Color of Eyes	Reason for inability to Sign Name													
Distinguishing Marks				Physical Disability <input type="checkbox"/> Describe _____													
				Unable to Write <input type="checkbox"/>													
7	STATE OF ILLINOIS, County of Kane. I hereby swear (or affirm) that I am a citizen of the United States, that on the date of the next election I shall have resided in the State of Illinois and in the election precinct in which I reside 30 days, and that I intend that this location shall be my residence; that I am fully qualified to vote, and that the above statements are true.																
Subscribe and sworn to before me this date ____ day of _____, 20____.		THIS IS MY SIGNATURE OR MARK IN THE SPACE BELOW															
Signature of Registration Officer _____		<small>© 1998 Illinois Office Supply and Printing - Chicago, IL</small>															

Section 1

CHECK THE BOXES THAT APPLY TO THIS APPLICATION. Note if this is a new registration, a change of address only, or a name change. Remember, any person who legally changes a name must re-register.

The Deputy Registrar Number is your voter registration identification number located on your voter registration card.

REGISTRAR: PRINT HARD USE BLACK BALL-POINT PEN GIVE VOTER THE GREEN COPY		DEPUTY REGISTRAR NO.
1	CHECK BOXES THAT APPLY: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change	

Section 2

NAME: Print applicant's last name, first name, middle name or middle initial, in that order. Circle Jr., Sr., etc. if appropriate.

LEGAL RESIDENCE: Print house number, street name, apartment, city, and zip code. This space is for the applicant's legal address. In addition, a separate mailing address may be noted in Section 3.

COUNTY: Indicate the county where the registrant lives.

VOTER'S PHONE NUMBER: List the phone number, including area code, at which the applicant may be reached during the day. Space is also provided for the applicant's home number.

DATE OF BIRTH: Statute 10 ILCS 5/4-8 requires date of birth by month, day, and year. Print the state where applicant was born. If the applicant was born outside the United States, print the country of birth and complete Section 5.

SEX: Indicate whether applicant is male or female by circling M or F

SOCIAL SECURITY NUMBER: Federal law requires the voter provide the last four (4) digits of the social security number, or the voter's full Illinois driver's license number, or the full Illinois State ID number.*

2		LAST NAME	CIRCLE JR SR II III IV	FIRST NAME	MIDDLE INITIAL	COUNTY	
LEGAL RESIDENCE * (Do Not Give P.O. Box) House No. & Street Name						Telephone numbers	
Apt. No.		City or Village		Zip		Home	
DATE OF BIRTH: (MM/DD/YY)		PLACE OF BIRTH: State <u>or</u> Country		SEX		Day	
				M F		Driver's License Number or last four digits of Social Security Number	
						(ONLY) IL DR # or Last 4 of SS#	

Section 3

ADDRESS WHERE YOU RECEIVE YOUR MAIL: This space is provided if the applicant has a separate mailing address. It is to be used for all P.O. Box addresses.

3	ADDRESS WHERE YOU GET YOUR MAIL: (If Different from Above, I.e.: P.O. Box)
House No. & Street Name	Apt. No. P.O. Box City or Village Zip

Section 4

PRIOR REGISTRATION: If the applicant has been registered previously, print the prior address. If the applicant's name has changed since the previous registration, print that name also. Collect the applicant's former voter registration card, if available, and send it to the County Clerk's office together with the new registration.

4	PRIOR REGISTRATION:	ADDRESS:	FORMER NAME
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This information will enable the County Clerk’s office to notify the former Election Authority to cancel the voter there and assists in identifying the proper voter.

Section 5

PERSONS BORN OUTSIDE THE UNITED STATES: Persons born in Puerto Rico, U.S. Virgin Islands and Guam have automatic United States citizenship and need not complete this section.

BORN OF U.S. PARENT: Persons born of U.S parents temporarily residing outside the United States are United States citizens. For such persons, the deputy registrar should mark an X in the box "Born of U.S. Parent." No additional citizenship information is necessary.

NATURALIZED: For naturalized citizens, the deputy registrar should mark an X in the box "Naturalized" and also print the name of the court, city and state where the naturalization took place, as well as the date of the naturalization.

5 If born outside of the United States, complete this section:	Citizenship		Naturalization:		Own Papers <input type="checkbox"/>	Parent's Papers <input type="checkbox"/>
	Born of U.S. Parent/s		Court	City	State	Date
	Naturalized					

Section 6

APPLICANT UNABLE TO SIGN NAME: The deputy registrar must then complete the following information to identify the voter: father’s first name, mother’s first name, height, color of eyes, distinguishing marks (if any) and reason for inability to sign name.

6 If unable to sign name complete this section:	Father's First Name	Mother's First Name	Height	Color of Eyes	Reason for Inability to Sign Name
					Physical Disability <input type="checkbox"/> Describe
	Distinguishing Marks				Unable to Write <input type="checkbox"/>

PHYSICAL DISABILITY: Check this if the applicant displays any, at the time of registration, which would require assistance in voting. If the disability is temporary, please tell the voter to notify us.

Section 7

***OATH:** The deputy registrar shall require each applicant to read or have read to him/her the affidavit of registration before completing and signing the application. [10 ILCS 5/5-9, 6-37, 6-35, 4-10]

APPLICANT'S SIGNATURE: Have the applicant review the information given before signing on the appropriate line. The signature must be the same as the name printed on the first line. If unable to sign name, applicant may make his/her mark on the signature line. The deputy registrar must then complete [Section 6](#).

POWER OF ATTORNEY: Please remember a Power of Attorney does **not** carry over into voter registration/election law. Whenever a voter's signature is required, the voter may attempt to make their mark and the Deputy Registrar must complete Section 6.

DATE AND DEPUTY REGISTRAR'S SIGNATURE: The deputy registrar dates and signs the voter registration card on the appropriate lines. The applicant should be given the receipt.

7	STATE OF ILLINOIS, County of Kane I hereby swear (or affirm) that I am a citizen of the United States, that on the date of the next election I shall have resided in the State of Illinois and in the election precinct in which I reside 30 days, and that I intend that this location shall be my residence; that I am fully qualified to vote, and that the above statements are true.	THIS IS MY SIGNATURE OR MARK IN THE SPACE BELOW
	Subscribe and sworn to before me this date ____ day of _____, 20__.	
	_____ Signature of Registration Officer	
		<small>©2011 Illinois Office Supply and Printing • Ottawa, IL</small>

Any person who knowingly gives, lends or promises to give or lend any money or other valuable consideration to any other person to influence such other person to vote or **to register to vote** or to influence such other person to vote for or against any candidate or public question to be voted upon at any election shall be guilty of a Class 4 felony. [10 ILCS 5/29-1].

APPLICATION TO SERVE AS A JUDGE OF ELECTION

On the reverse side of the voter card is an **Application To Serve As A Judge of Election**. If the applicant expresses an interest, he/she can complete the form. For more information regarding the duties of a judge of election, please contact the Election Department of the County Clerk's office at (630) 232-5994.

APPLICATION TO SERVE AS A JUDGE OF ELECTION							
IN A CONSTANT EFFORT TO SECURE JUDGES OF ELECTION, WE INVITE YOU TO MAKE AN APPLICATION TO SERVE AS A JUDGE, IN FUTURE ELECTIONS, FOR YOUR POLITICAL PARTY. IF YOU WISH TO DO SO:							
PLEASE SIGN THIS FORM AND INDICATE YOUR POLITICAL AFFILIATION.							
<table border="1" style="width: 100%;"><tr><td style="width: 30%;">I WISH TO BE A</td><td style="width: 35%; text-align: center;"><input type="checkbox"/> REPUBLICAN</td><td style="width: 35%; text-align: center;"><input type="checkbox"/> DEMOCRATIC</td></tr><tr><td colspan="3" style="text-align: center;">Judge of election in future elections</td></tr></table>		I WISH TO BE A	<input type="checkbox"/> REPUBLICAN	<input type="checkbox"/> DEMOCRATIC	Judge of election in future elections		
I WISH TO BE A	<input type="checkbox"/> REPUBLICAN	<input type="checkbox"/> DEMOCRATIC					
Judge of election in future elections							
_____ YOUR NAME (Please Print)							
_____ YOUR ADDRESS							
_____ SIGNATURE	_____ HOME PHONE NO.						
	_____ DAYTIME PHONE NO.						

CERTIFICATION OF REGISTRATIONS

1. Complete the Certification of Registration form by listing the names and addresses of the individuals whose voter registration cards are being returned to the County Clerk. **PRINT** all such information, then date and sign the form.

2. Insert in the return envelope the completed Certification of Registration form, the completed voter registration cards, and any other appropriate material such as a completed supply order form.

3. **DO NOT WAIT** until the entire Certification of Registration form is filled before returning it and the completed voter registration cards to the County Clerk's office. Return the form and cards within seven (7) days of taking the first registration.

CERTIFICATION OF REGISTRATION		
Enclosed are Voter Registration cards with the names of the registered voters listed below.		
(PLEASE PRINT)		
<u>NAME</u>	<u>ADDRESS</u>	<u>CITY</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
These registrations were taken in accordance with the registration procedures adopted by the Kane County Clerk.		
DEPUTY REGISTRAR INFORMATION		
(PLEASE PRINT)		
Date: _____	Site Code #	
Name: _____	_____	
Address: _____	_____	
City: _____	Zip: _____	_____
Home Phone: _____	_____	
Business Phone: _____	_____	
Organization or Local Government affiliated with: _____	_____	
Signature: _____	_____	
PLEASE STATE IF REGISTRATION FORM(S) WERE TAKEN FROM YOUR OWN SUPPLY OR ORGANIZATION SUPPLY OWN _____ Total ORGANIZATION _____ Total		

QUALIFICATIONS FOR REGISTRATION

To be eligible to register to vote, a person must:

- Be a citizen of the United States;
- Be 18 years of age or older on or before the next election; 17 years of age to vote in a General Primary if the person will be 18 as of the following General Election as per PA 98-51.*
- Be a resident of the precinct 30 days prior to the next election;
- Currently reside in the State of Illinois;
- Provide two (2) forms of identification, at least one of which contains the person's current name and address.

Residence defined: A residence is defined as a permanent abode, a place where a person actually lives (dwells). No one may register from a place of business or office unless he/she actually lives there as a permanent abode and has no other dwelling place. A person may not register from a hospital or state mental health facility, but may register from a nursing home. A separate mailing address may be noted in addition to the physical address.

A Deputy Registrar should take a Registration if:

- A person has never registered to vote in Kane County;
- Anyone changing a name must re-register in Kane County;
- A person is not certain they are registered in Kane County;
- A person has not voted recently and is unsure of the status of their registration.

If a registered voter wishes to change his or her address, it is best to register them, however, the Deputy Registrar may instruct the voter to:

- Download and complete the Voter Registration Application on our website: kanecountyelections.org and return it to us.
- Use the space provided on the back side of their Kane County Voter Registration Identification card;
- Print their old address, new address, birth date and full name on a sheet of paper with the last four digits of their Social Security number. The voter's signature is needed also.

***General Primary and General Elections are scheduled during even numbered years only.**

IDENTIFICATION FOR VOTER REGISTRATION

In accord with [10 ILCS 5/4-10. 5-9, 6-37] ...The registration officer shall require the applicant to furnish two (2) forms of identification, and except in the case of a homeless individual, one of which must include his or her current residential address. These forms of identification shall include but are not limited to any of the following:

- Driver's License or State Identification Card
- Social Security Card
- Public Aide Identification Card
- Current Utility Bill
- Employee Identification Card
- Student Identification Card
- Lease or contract for residence
- Credit Card
- Civic Membership Card
- Union Membership Card
- Professional Association Membership Card

If the applicant does not have the above forms of identification, we may accept their current and valid photo identification, a current bank statement, government check, paycheck, or other government document that shows the name and address of the voter.

The registration officer must require a homeless individual to furnish evidence of his use of the mailing address stated. A mailing address of a homeless individual may include, but is not limited to, a shelter, a day shelter, or a private residence. This use may be demonstrated by a piece of mail addressed to that individual and received at that mailing address. [10ILCS 5/3-2, 4-10, 5-9, 6-35. 6-37]

The registration officer shall satisfy himself that each applicant for registration is qualified to register before registering him and shall read or have read to the applicant the following affidavit:

OATH GIVEN BEFORE REGISTRATION “You do solemnly swear (or affirm) that you will fully and truly answer all such questions as shall be put to you touching your name, place of residence, place of birth, your qualifications as an elector and your right as such to register and vote under the laws of the State of Illinois.” [10 ILCS 5/4 – 10]

NOTES

If you have any questions, contact the Kane County Clerk, Elections office at: 630-232-5990.

Remember the age limit has been updated:

Must be 18 years of age by Election Day; or 17 years of age to register to vote in a general primary or consolidated primary if individual will be 18 on the date of the immediately following general or consolidated election.



