COUNTY OF KANE

John A. Cunningham KANE COUNTY CLERK 719 S. Batavia Ave., Bldg. B Geneva, IL 60134



Election Department
Phone: (630) 232-5990
Fax: (630) 232-5870
Website: www.kanecountyelections.org

August, 2022

PETITIONS MAY NOT BE CIRCULATED PRIOR TO SEPTEMBER 20, 2022

It is strongly recommended that all prospective candidates should review the information and obtain legal advice when preparing their nominating papers.

Required signatures for Kane County School Board Member

At least 50 signatures are required

Petitions may be filed in person or by mail, but MUST BE RECEIVED DURING THE FILING PERIOD. The mailing address is 719 South Batavia Avenue, Building B, Geneva, IL 60134. The first day of filing is Monday, December 12, 2022. The last day of filing is Monday, December 19, 2022 and our office will be open until 5:00 p.m. Those nominating petitions received after 8:30 a.m. and before 4:30 p.m. during the filing period will be stamped according to the time received. Petitions received prior to the first day and after the last day of filing will be returned to the prospective candidate.

Kane County Election Authority

BOARD OF EDUCATION MEMBER

Boards of Education

NOMINATION PAPERS

Petitions: At-Large (SBE Form P-7); Districts 1-7 (SBE Form P-7A)

Statement of Candidacy: Nonpartisan (<u>SBE Form P-1A</u>)
Loyalty Oath (optional): All candidates (<u>SBE Form P-1C</u>)

Statement of Economic Interests: Filed with the county clerk of the county in which the principal office of the unit of local government with which the person is associated is located. (5 ILCS 420/4A-106) See page 19 regarding filing the receipt.

Fair Campaign Practices Act (voluntary): Filed with the State Board of Elections or the county clerk.

QUALIFICATIONS

Any person who, on the date of election, is a citizen of the United States, of the age of 18 years or over, a resident of the State and the territory encompassing the district for one year preceding the election, and a registered voter is eligible. A member shall not be a child sex offender as defined in Section 11-9.3 of the Criminal Code of 2012 and cannot serve as a school trustee. (105 ILCS 5/10-10)

SIGNATURE REQUIREMENTS

Petitions must be signed by at least 50 qualified voters or 10% of the voters, whichever is less, residing within the district. (105 ILCS 5/9-10)

FILING DATES

December 12-19, 2022 (not more than 113 nor less than 106 days prior to the consolidated election).

WHERE TO FILE

With the county clerk or the county board of election commissioners, as the case may be, of the county in which the principal office of the school district is located. (105 ILCS 5/9-10)

TERM

4 years (may be changed to 6 years by referendum). (105 ILCS 5/9-5)

If reapportionment is required under 9-22 of the school code, the members are divided into two groups, with terms of 4 years and 2 years or 2 years and 4 years.

TERM BEGINS

Within 40 days after the election. (105 ILCS 5/10-16)

CAMPAIGN DISCLOSURE

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

Suggested Revised March 2020 SBE No. P-1A

STATEMENT OF CANDIDACY

NONPARTISAN

NAME:	OFFICE:	
	A Full Term is sought, unless a	n unexpired term is stated here: year unexpired term
ADDRESS – ZIP CODE:	CITY. VILLAGE OR SPECI	AL DISTRICT:
If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, c		,
FORMERLY KNOWN AS (List all names during last 3 ye	irs)	(List date of each name change)
STATE OF ILLINOIS) SS County of)		
I,, in the City, \		
(if unincorporated, list municipality that provides postal	service) Zip Code	, in the County of
, State of Illinois; that I	n a qualified voter therein, that	I am a candidate for Nomination/
Election to the office of	in the (Name of C	City, Village or Special District)
to be voted upon at the election to be held on	(date of elect	ion) and that I am legally qualified
to hold such office and that I have filed (or I will file before	e the close of the petition filing p	eriod) a Statement of Economic Interests
as required by the Illinois Governmental Ethics Act a	d I hereby request that my nan	ne be printed upon the official ballot for
Nomination/Election to such office.		
		(Signature of Candidate)
Signed and sworn to (or affirmed) by(Name of	before mo candidate)	e, on (insert month, day, year)
(SEAL)		Notary Public's Signature)

ATTACH TO PE	TITION
ALIACHIOPE	IIIION

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)				
1,			, do swear (d	or affirm) that I an	n a citizen of the
United States and the State of III	inois, that I	am not aff	iliated directly	or indirectly with	any communist
organization or any communist fro	ont organiza	tion, or any	y foreign politic	cal agency, party	, organization or
government which advocates the	overthrow (of constitut	ional governm	ent by force or o	other means not
permitted under the Constitution of	the United S	States or the	e Constitution o	of this State; that I	do not directly or
indirectly teach or advocate the ov	erthrow of t	:he governr	nent of the Un	ited States or of	this State or any
unlawful change in the form of the	government	s thereof by	/ force or any u	nlawful means.	
				-	
				(Signature of Ca	andidate)
Signed and sworn to (or af	firmed) by		Name of Cand	lidate)	before me,
on		· ·	, , , , , , , , , , , , , , , , , , , ,	,	
on(insert month, day, year)					
				(Notary Public	c's Signature)
(SEAL)					

X...BIND HERE...X

Suggested Revised March 2019

PETITION FOR NOMINATION

PETITION FOR NOMINATION	SBE No. P-7
TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING J	URISDICTION OVER

SCHO	OOL DISTRICT NUMBER	IN	COUNTY, ILLINOIS
We, the undersigned, being (or more) (or 10% or more) (or 5	5% or more) of the voters residing	within said district, hereby petition that
			in the City, Village, Unincorporated Area
of (If	unincorporated, list municipality that	provides postal service) in Towns	ship in said
district shall be a candidate for the off	ice of	of the Board of Education	n (or Board of Directors) (full term) or
(vacancy) to be voted for at the Conse	olidated Election to be held on	(date o	of election).
· ·	nexpired term is stated here: S 5/10-5.1, complete the following (this in the complete the following)	nformation will appear on the ballot)	
	(List all names during last 3 years)	(List da	ate 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	/ 66		
l,		certify that I reside at	, in the
City/Village/Unincorporated Area of_		(if unincorporated, list municip	pality that provides postal service) (Zip
Codo) County of	State of	that La	m 19 years of ago or older (or 17 years o
more than 90 days preceding the last	t day of filing of the petitions and are ne petition registered voters of the p	e genuine and that to the best of	m 18 years of age or older (or 17 years of s sheet were signed in my presence, no my knowledge and belief the persons so didate is seeking elective office, and thei
		(Circul	ator's Signature)
Signed and sworn to (or affirmed) by _		before me, on	
J	(Name of Circulator)	_ ,	(Insert month, day, year)
(SEAL)			
· ,		(Notary	y Public's Signature)

SHEET NO. _____

CERTIFICATION OF DELETIONS

ction or nomir	a candidate for ele	Candidate) who is	(Name of C		
Election	9	at th	(Name of)	ice of	cle one) to the off
1	 	· ·	(date of election	1	
Line No.	Page No.	Line No.	Page No.	Line No.	Page No.

Only the person circulating the petition, or the candidate on whose behalf the petition is circulated, may strike any signature from the petition. If deletions are made, this **CERTIFICATION OF DELETIONS** shall be filed as part of the petition.

(Signature of Person Deleting Signatures)

STATEMENT OF ECONOMIC INTERESTS

INSTRUCTIONS:

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 than the form allows, please attach additional pages for your response.

5 ILCS 420/4A-102(c) now requires that, "The Secretary of State shall develop and make publicly available on his or her website written guidance relating to the completion and filing of the statement of economic interests upon which a filer may reasonably and in good faith rely."

The statement of economic interests required to be filed with the county clerk shall be verified, dated, and signed by the person making the statement and shall contain substantially the following: Job title: 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 e-mail address (optional): **OUESTIONS:** 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. Date Sold (if applicable) Source of Income/Name of Asset 3. Excluding debts incurred on terms available to the general public, such as mortgages, student loans, and credit card debts, if you owed any single debt in the preceding calendar year exceeding \$10,000, list the creditor of the 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.

contractor, or office holder during the pre-	of which you or your spouse were an employee, ecceding calendar year other than the unit or ne person is required to file and the title of services.
Name of Unit of Government	Title or Nature of Services
5. If you maintain an economic relationship is known to you to be a lobbyist registered Illinois, list the name of the lobbyist bell relationship with the lobbyist. If you do relationship or a family member known to you to government in the State of Illinois, list '	not have an economic relationship with a be a lobbyist registered with any unit of
Name of Lobbyist	Relationship to Filer
gifts, or honorarium or honoraria, valued s received during the preceding calendar year or honoraria, excluding any gift or gifts to	ion, or entity that was the source of a gift or singly or in the aggregate in excess of \$500 or and the type of gift or gifts, or honorarium from a member of your family that was not known of government in the State of Illinois. If you
7. List the name of any spouse or immediate this statement employed by a public utility utility that employs the relative.	e family member living with the person making y in this State and the name of the public
Name and Relation	Public Utility
been examined by me and to the best of my complete statement of my economic interest Ethics Act. I understand that the penalty	for willfully filing a false or incomplete r imprisonment in a penal institution other
Printed Name of Filer:	
Date:	
Signature:	

	acknowledged of your Sta the Illinois Governmenta				nomic I	nterest,
The statement was	filed as of this date:					
			Date	to be en	tered by C	ounty Clerk
COM	PLETE BUT DO	NC	T	DE	TAC	H
grand California militaria del Antonio del California del Californ	Type or Hand Pri	nt :	Leç	gibl	Y	
		<u> </u>		esignami producti su	Çaka biya De Gallanda iya iya iya iya iya iya	
Your Name						
Office or position	n of employment for which	this	sta	atemen	nt is f	iled
Mailing Address				++************************************		
-						
	Obre o Odin wy Direch Barbi o Olimfe Olimfe Olimfe Olimfe o Olimfe Olimf		antiellegija liedokullenisya a klesses	ana siyina aliba a qiradiib ayadiga aliili digaa arab asiya fara da da ba	princises y a a signature d'una d'un distribut de della de un del un un del deligión de	handalayad i mandayya manajina Arabib Markil Ma
City	State					Zip Code
	ust be returned to the Ka is receipt to you, and yo			_		
Location:	719 S. Batavia Ave. Bldg	д. В				
	Geneva, IL 60134					
Mailing Address:	Kane County Clerk Attn: EIS 719 S. Batavia Ave. Geneva, IL 60134					

This will be returned to you when the statement is filed in the office of the Clerk.