

CONSOLIDATED ELECTION - APRIL 4, 2017

OFFICE: PARK DISTRICT COMMISSIONER

ELIGIBILITY/RESIDENCY: See Illinois Compiled Statute. (70 ILCS 1205/2-11)

CIRCULATION PERIOD: September 20, 2016 through December 19, 2016. (10 ILCS 5/10-4)

SIGNATURE REQUIREMENTS: See Attached. (70 ILCS 1205/2-11, 2-17)

NOMINATION PAPERS must contain:

1. **Statement of Candidacy:** CC #P-1A (10 ILCS 5/10-5, 10-5.1)
The Statement of Candidacy form must include, among other requirements, the candidate's name, the candidate's legal address and the office sought. The form of the candidate's name may include his or her given name, initials, or nickname. **Changes cannot be made after the filing of the nomination papers.**
2. **Petition for Nomination:** CC #P-4 (10 ILCS 5/10-3.1, 10-5.1)
The form of the candidate's name for inclusion on the ballot will be taken from the first numbered page of the nominating petition. The top of each petition page must include the candidate's name, legal address, title of office, term and district (if applicable). The form of the candidate's name should be the same on every petition for nomination page. The form of the candidate's name may include their given name, initials, or nickname. No degree or title may be used, with the exception of the title "Mrs."

Candidates must have the required number of signatures as indicated on the following page.

The person circulating the petition for nomination must complete and sign the bottom portion in the presence of a notary. Each petition page must be notarized. The person circulating the petition for nomination may not notarize their own circulator's affidavit and signature. Blank petition pages may be photocopied or additional forms are available from the Park District office. **All petition pages must be the same size (either legal or letter), fastened together and numbered.**

3. **Statement of Economic Interests:** (5 ILCS 420/4A-105, 4A-106)
Required by the Illinois Governmental Ethics Act, **this form must be filed with the County Clerk and a receipt issued.** *The receipt must be filed with the petition papers. The receipt is the only form that may be added to your petition papers once they have been filed. Filing the receipt later will not change the date or time of the original filing, but it must be filed with the Park District office by close of business on December 19, 2016.* **NOTE:** A candidate who filed a Statement of Economic Interests for the same unit of government within the calendar year need only file a duplicate receipt, which is available at the County Clerk's office.
4. **Loyalty Oath:** CC #P-1C (optional) (10 ILCS 5/7-10.1)
If completed, file with nomination papers.

FILING DATES AND PROCEDURES: (10 ILCS 5/10-6, 10-6.2)

1. Nomination papers are filed **Monday, December 12, 2016 through Monday, December 19, 2016, with the Park District office** during normal office hours. Petitions may be filed in person by the candidate or a representative, or by mail. **Nomination papers received in the mail before the first day of the filing period will be returned to the sender as not filed.**
2. Nomination papers will be stamped noting the day and hour filed. A receipt is issued to the filer. All petitions filed by persons waiting in line at the opening of normal office hours on the first day of filing, **December 12, 2016**, and those petitions received in the day's first mail delivery are deemed "**simultaneously**" filed. Two or more petitions filed within the last hour of the filing deadline, **December 19, 2016**, shall be deemed filed simultaneously for last position on the ballot.
3. Candidates for established political parties appear first on the ballot followed by new political party candidates and finally, by independent candidates. Ballot position within each of these categories is determined by the time of filing. A public lottery determines ballot position when two or more petitions from the same political party are simultaneously filed for the same office. The Park District office will notify candidates involved in the lottery of the time and place the lottery is to be held.

This packet of information is being provided by the Lake County Clerk's office as a courtesy to prospective candidates. Information and suggested forms are also available on the Illinois State Board of Elections website at www.elections.il.gov. It is important to note that Nominating Petition papers are subject to legal challenge by objectors if improperly completed. The Electoral Board, chaired by the Clerk, holds hearings to consider and resolve these objections. However, please be advised that the Clerk and staff are not able to provide legal opinions to individuals regarding their petition papers. Prospective candidates are encouraged to consult their own legal advisors on questions related to qualifications for office, preparation of petition papers, circulator requirements, signature requirements, etc., because once the petition papers are officially filed they cannot be changed or amended.

CONSOLIDATED ELECTION - APRIL 4, 2017
SIGNATURE REQUIREMENTS: NONPARTISAN CANDIDATES
PARK DISTRICTS
(70 ILCS 1205/2-11, 2-17)

PARK DISTRICT	OFFICE	MINIMUM SIGNATURES
*Barrington	Commissioner	25
*Barrington Hills	Commissioner	25
*Buffalo Grove	Commissioner	53
*Deerfield	Commissioner	42
≠Foss	Commissioner	25
≠Grandwood	Commissioner	25
Grayslake	Commissioner	41
Gurnee	Commissioner	53
Highland Park	Commissioner	55
≠ Lake Barrington Countryside	Commissioner	25
≠Lake Bluff	Commissioner	25
≠Lindenhurst	Commissioner	25
≠Long Grove	Commissioner	35
Mundelein	Commissioner	41
≠Round Lake Area	Commissioner	33
Vernon Hills	Commissioner	25
Wauconda	Commissioner	26
Waukegan	Commissioner	96
*≠Wheeling	Commissioner	25
Wildwood	Commissioner	25
Zion	Commissioner	45

*Denotes multi-county park districts where signature requirements are based on the total number of votes cast in all counties. "Minimum Signatures" provided here are based on Lake County election results, so please contact the other counties involved to obtain their election results and signature requirements.

≠ Your unit of government has one or more unexpired terms for this election based on information your unit of government provided to the Lake County Clerk in June 2016.

**NOTICE TO CANDIDATES WHO HAVE CHANGED NAMES
WITHIN THE LAST THREE YEARS**

P.A. 94-1090, Effective June 1, 2007 amended 10 ILCS 5/7-10.2, 10 ILCS 5/8-8.1 and 10 ILCS 5/10-5.1 to add the following requirement:

If a candidate has changed his or her name, whether by a statutory or common law procedure in Illinois or any other jurisdiction, within 3 years before the last day for filing the petition or certificate for that office, whichever is applicable, then (i) the candidate's name on the petition or certificate must be followed by "formerly known as (list all prior names during the 3-year period) until name changed on (list date of each such name change)" and (ii) the petition or certificate must be accompanied by the candidate's affidavit stating the candidate's previous names during the period specified in (i) and the date or dates each of those names was changed; failure to meet these requirements shall be grounds for denying certification of the candidate's name for the ballot or removing the candidate's name from the ballot, as appropriate, but **these requirements do not apply to name changes resulting from adoption to assume an adoptive parent's or parents' surname, marriage to assume a spouse's surname, or dissolution of marriage or declaration of invalidity of marriage to assume a former surname.**

Pursuant to P.A. 94-1090 and 10 ILCS 5/16-3, said information shall appear on the ballot along with the candidate's current name.

**STATEMENT OF CANDIDACY
NONPARTISAN**

Name _____ Phone _____

Address _____ City _____ Zip _____

Office _____ District _____ Term _____
(If Applicable)

If required pursuant to 10 ILCS 5/10-5.1, 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)*

STATE OF ILLINOIS }
COUNTY OF LAKE } SS.

I, _____, being first duly sworn (or affirmed), say that I reside at
(Candidate's Name)

_____ in the _____
(Street Address) *(City or Village or Unincorporated Area)*

of _____, _____ in the County of _____, State of Illinois;
(if unincorporated, list municipality that provides postal service) *(Zip Code)*

that I am a qualified voter therein; that I am a candidate for election to the office of _____

in the _____ to be voted upon at the Consolidated Election to be held on the
(City, School, College, or Special District)

4th day of April, 2017; and that I am legally qualified to hold such office and that I have filed (or 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 ballot for election to such office.

(Signature of Candidate)

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

before me, this _____ day of _____, 20____.
(Day) *(Month)* *(Year)*

(Signature of Notary Public)

(SEAL)

PETITION FOR NOMINATION NONPARTISAN CANDIDATE

We, the undersigned, qualified voters in the _____
(Name of District)

in the County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the political division aforesaid, to be voted upon at the Consolidated Election to be held on the 4th day of April, 2017.

Name _____ Phone _____
 Address _____ City _____ Zip _____
 Office _____ District _____
(If Applicable)

***FULL TERM**

***2-YEAR UNEXPIRED TERM**

***4-YEAR UNEXPIRED TERM**

(Please circle Full Term or applicable Unexpired Term above)

If required pursuant to 10 ILCS 5/10-5.1, 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)*

NOTE: YOUR NAME WILL APPEAR ON THE BALLOT EXACTLY AS STATED ABOVE. PLEASE PRINT OR TYPE CLEARLY.

VOTER PRINTED NAME	VOTER SIGNATURE	STREET ADDRESS OR RR NUMBER	CITY/VILLAGE	COUNTY
1.				Lake, IL
2.				Lake, IL
3.				Lake, IL
4.				Lake, IL
5.				Lake, IL
6.				Lake, IL
7.				Lake, IL
8.				Lake, IL
9.				Lake, IL
10.				Lake, IL

STATE OF ILLINOIS }
COUNTY OF LAKE } SS.

I, _____, do hereby certify that I reside at
(Circulator's Name)

_____, in the _____ of
(Street Address) *(City or Village or Unincorporated Area)*

_____, in the County of _____, State of Illinois;
(If unincorporated, list municipality that provides postal service) *(Zip Code)*

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 registered voters of the political division in which the candidate is seeking 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, this _____ day of _____, 20____.
(Name of Circulator) *(Day)* *(Month)* *(Year)*

(Signature of Notary Public)

(SEAL)

SHEET NO. _____

PETITION FOR NOMINATION NONPARTISAN CANDIDATE

We, the undersigned, qualified voters in the _____
(Name of District)

in the County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the political division aforesaid, to be voted upon at the Consolidated Election to be held on the 4th day of April, 2017.

Name _____ Phone _____
 Address _____ City _____ Zip _____
 Office _____ District _____
 (If Applicable)

***FULL TERM**

***2-YEAR UNEXPIRED TERM**
(Please circle Full Term or applicable Unexpired Term above)

***4-YEAR UNEXPIRED TERM**

If required pursuant to 10 ILCS 5/10-5.1, 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)

NOTE: YOUR NAME WILL APPEAR ON THE BALLOT EXACTLY AS STATED ABOVE. PLEASE PRINT OR TYPE CLEARLY.

VOTER PRINTED NAME	VOTER SIGNATURE	STREET ADDRESS OR RR NUMBER	CITY/VILLAGE	COUNTY
1.				Lake, IL
2.				Lake, IL
3.				Lake, IL
4.				Lake, IL
5.				Lake, IL
6.				Lake, IL
7.				Lake, IL
8.				Lake, IL
9.				Lake, IL
10.				Lake, IL

STATE OF ILLINOIS }
COUNTY OF LAKE } SS.

I, _____, do hereby certify that I reside at
(Circulator's Name)

_____, in the _____ of
(Street Address) (City or Village or Unincorporated Area)

_____, in the County of _____, State of Illinois;
(If unincorporated, list municipality that provides postal service) (Zip Code)

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 registered voters of the political division in which the candidate is seeking 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, this _____ day of _____, 20____.
(Name of Circulator) (Day) (Month) (Year)

(Signature of Notary Public)

(SEAL)

PETITION FOR NOMINATION NONPARTISAN CANDIDATE

We, the undersigned, qualified voters in the _____
(Name of District)

in the County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the political division aforesaid, to be voted upon at the Consolidated Election to be held on the 4th day of April, 2017.

Name _____ Phone _____
 Address _____ City _____ Zip _____
 Office _____ District _____
 (If Applicable)

***FULL TERM**

***2-YEAR UNEXPIRED TERM**
(Please circle Full Term or applicable Unexpired Term above)

***4-YEAR UNEXPIRED TERM**

If required pursuant to 10 ILCS 5/10-5.1, 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)

NOTE: YOUR NAME WILL APPEAR ON THE BALLOT EXACTLY AS STATED ABOVE. PLEASE PRINT OR TYPE CLEARLY.

VOTER PRINTED NAME	VOTER SIGNATURE	STREET ADDRESS OR RR NUMBER	CITY/VILLAGE	COUNTY
1.				Lake, IL
2.				Lake, IL
3.				Lake, IL
4.				Lake, IL
5.				Lake, IL
6.				Lake, IL
7.				Lake, IL
8.				Lake, IL
9.				Lake, IL
10.				Lake, IL

STATE OF ILLINOIS }
COUNTY OF LAKE } SS.

I, _____, do hereby certify that I reside at
(Circulator's Name)

_____, in the _____ of
(Street Address) (City or Village or Unincorporated Area)

_____, in the County of _____, State of Illinois;
(If unincorporated, list municipality that provides postal service) (Zip Code)

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 registered voters of the political division in which the candidate is seeking 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, this _____ day of _____, 20____.
(Name of Circulator) (Day) (Month) (Year)

(Signature of Notary Public)

(SEAL)

PETITION FOR NOMINATION NONPARTISAN CANDIDATE

We, the undersigned, qualified voters in the _____,
(Name of District)

in the County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the political division aforesaid, to be voted upon at the Consolidated Election to be held on the 4th day of April, 2017.

Name _____ Phone _____
 Address _____ City _____ Zip _____
 Office _____ District _____
(If Applicable)

***FULL TERM**

***2-YEAR UNEXPIRED TERM**

***4-YEAR UNEXPIRED TERM**

(Please circle Full Term or applicable Unexpired Term above)

If required pursuant to 10 ILCS 5/10-5.1, 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)*

NOTE: YOUR NAME WILL APPEAR ON THE BALLOT EXACTLY AS STATED ABOVE. PLEASE PRINT OR TYPE CLEARLY.

VOTER PRINTED NAME	VOTER SIGNATURE	STREET ADDRESS OR RR NUMBER	CITY/VILLAGE	COUNTY
1.				Lake, IL
2.				Lake, IL
3.				Lake, IL
4.				Lake, IL
5.				Lake, IL
6.				Lake, IL
7.				Lake, IL
8.				Lake, IL
9.				Lake, IL
10.				Lake, IL

STATE OF ILLINOIS }
COUNTY OF LAKE } SS.

I, _____, do hereby certify that I reside at
(Circulator's Name)

_____, in the _____ of
(Street Address) *(City or Village or Unincorporated Area)*

_____, in the County of _____, State of Illinois;
(If unincorporated, list municipality that provides postal service) *(Zip Code)*

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 registered voters of the political division in which the candidate is seeking 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, this _____ day of _____, 20____.
(Name of Circulator) *(Day)* *(Month)* *(Year)*

(Signature of Notary Public)

(SEAL)

Statement of Economic Interests to be filed with the County Clerk
(Type or Print)

Name: _____

Each Office or Position of Employment for which this Statement is Filed:

Full Post Office Address: _____

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If more space is needed, please attach supplemental listing.**

- 1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of \$5,000 fair market value, or from which dividends in excess of \$1,200 were received during the preceding calendar year: (In the case of real estate, location thereof shall be listed by street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor, or served in any advisory capacity, from which income in excess of \$1,200 was derived during the preceding calendar year:

Name	Address	Type of Practice
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding \$5,000 was received for professional services rendered during the preceding calendar year by the person making the statement:

- 4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 or more was realized during the preceding calendar year:

- 5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year, if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing, or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year:

- 6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file, from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity: (No time or demand deposit in a financial institution nor any debt instrument need be listed.)

- 7. List the name of any unit of government that employed the person making the statement during the preceding calendar year, other than the unit or units of government in relation to which the person is required to file:

- 8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year:

VERIFICATION

I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$1,000, or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment.

(Signature of Person Making Statement)

(Date)

LOYALTY OATH
(Optional)

United States of America }
State of Illinois } SS.

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)

before me, this _____ day of _____, 20____.
(Day) (Month) (Year)

(Signature of Notary Public)

(SEAL)