PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and affiliance of the party, in party, in perty, in pe	ition that CILAM (township ition that CILAM For the City, Village) Unincorporated Area (costal service) Zip Code (COSS), Count on to the office of PRECINCT COMMITTEE	name and precinct number) in SECK which will be come of Sulfan C y of Kane and State of Illinois, second	the County of Kane no resides at (if
If required pursuant to 10 ILCS 5/7-10.2, comp	plete the following (this information will app	pear on the ballot)	
FORMERLY KNOWN AS(List all names d	UNTIL NAME CHAN uring last 3 years)	GED ON(List date of each	n name change)
NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
Theele I erser	84 MoenSt	alors	Kane County, IL
Frene U. Dreyn	325 maple st	Sugar Grove	Kane County, IL
36 Mb Degr	325 MAPLE ST	SUCAR GROVIE	Kane County, IL
Jons al King	195 McCarpor St,	JUGAL GROVE	Kane County, IL
5 July W. Freek	195 Mlanon A.	Sugar Grone	Kane County, IL
6 Paule Strong	103 snowst.	Sugar 6 rove	Kane County, IL
7 / Fin Forms	103 Snow	Jugan Grove	Kane County, IL
8 Janie O. Lambert	300 maple	Slegan Grove	Kane County, IL
9 Folger S. Cambert	300 Maple	Sugar Glove	Kane County, IL
10 Claw & FOXI	80 auka	Augy Sten	Kane County, IL
State of Illinois County of Kane SS. SS. KECIC	(Circulator's Name) do hereby certify that I	reside at GIMAPLE	STREET
in the City Village Unincorporated Area (circle			
postal service) Zip Code 60934, County older, that I am a citizen of the United States, preceding the last day for filing of the petitions at the time of signing the petition qualified voten seeking elective office, and that their respective	of MANE, State of I. and that the signatures on this sheet were and are genuine and that to the best of my keeps of the NEFUBLICAN Pa	that I am e signed in my presence, not re knowledge and belief the perso rty in the political division in whi	118 years of age or more than 90 days
	Will (Circul	ator's Signature)	
Signed and sworn to (or affirmed) by Will	(Name of Circulator)	before me, on(insert m	onth-day, year)
(SEAL)	R. G.	(Notary Public's Signature)	
"OFFICIAL SEAL" R. ALEX WESTHOFF	SHEET NO/	TY CLERK	6: 5E
Notary Public, State of Illinois My commission expires 02/18/12		•	4 00

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and affilial and the state of allinois, do hereby petition of the APLE STATES party for election (township name and precinct number), to be well as the state of the sta	tion that Unicorporated Area (ciostal service) Zip Code 60554, County on to the office of PRECINCT COMMITTER	name and precinct number) in what we have a second of the	the County of Kane no resides at	
If required pursuant to 10 ILCS 5/7-10.2, comp	plete the following (this information will appe	ear on the ballot)		
FORMERLY KNOWN AS	UNTIL NAME CHANG	GED ON		
(List all names di	uring last 3 years)	(List date of each	name change)	
NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY	
1 William & Ken	61 MAPLE	SULAR GROVE	Kane County, IL	
2 Kahl Kinney	103 Main St	Sugar Grove	Kane County, IL	
3 Lorraine Runney	103 Main St.	Jugar Grow sel	Kane County, IL	
4 Delmar F. Kinghbatur	92 maple St.	Sugar Drove Se.	Kane County, IL	
5			Kane County, IL	
6			Kane County, IL	
7			Kane County, IL	
8			Kane County, IL	
9			Kane County, IL	
10			Kane County, IL	
State of Illinois		9		
County of Kane SS.				
WILLIAM F. KECK	(Circulator's Name) do hereby certify that I r	eside at 61 MAPLE	STREET	
in the City/Village/Unincorporated Area (circle one) of Sular Croux (if unincorporated, list municipality that provides				
postal service) Zip Code 6554, County older, that I am a citizen of the United States, a preceding the last day for filing of the petitions a at the time of signing the petition qualified voters seeking elective office, and that their respective	and that the signatures on this sheet were not are genuine and that to the best of my kn sof the AEPUBLICAN Pare residences are correctly stated, as above	signed in my presence, not moved and belief the person by in the political division in which set forth.	18 years of age or nore than 90 days	
		tor's Signature)		
Signed and sworn to (or affirmed) by WILLIAM F. KECK before me, on WOUEMSER 2, 200.9 (Name of Circulator). (insert month, day, year)				
	(Name of Circulator)	(insert mo	onth, day, year)	
(SEAL)	K. Cej	(Notary Public's Signature)		
OFFICIAL SEAL" R. ALEX WESTHOFF Notary Public, State of Illinois My commission expires 02/18/12	SHEET NO			

Revised July, 2007 SBE No. P-1

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
WILLIAM F. KECK	Address: 6 MAPLE STREET City, Village, or Unincorporated Area: 5 GROVE Zip Code: 60554	PRECINCT COMMITTEEMAN	Township/Ward: Sit 4 Am Gracue Precinct:	REPUBLICAL

60554	
If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 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 changed on the change of the	
(List date of each name of	nange)
STATE OF ILLINOIS County of Kane SS.	
I, WITHIAM F. KECK (Name of Candidate) being first duly sworn (or affirmed), say that	l reside
at 61 MAPLE STREET, in the City, Village, Unincorporated Area (circle or	ne) of
SUCAN GROVE (if unincorporated, list municipality that provides postal service) Zip Code 60554	<u>'</u> , in the
County of Kane, State of Illinois; that I am a qualified voter therein and am a qualified Primary voter	of the
Party; that I am a candidate for Election to the office of Precinct Committeema	n in the
County of Kane, to be voted upon at the primary election to be held on Febrary 2, 2010 and that I am legally qualified (in	cluding
being the holder of any license that may be an eligibility requirement for the office to which I seek the nomination) to ho	ld such
office and that I have filed (or I will file before the close of the petition filing period) a Statement of Economic Inter-	ests as
required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the	official
REPUBLICAN (Name of Party) Primary ballot for Election for such office.	
(Signature of Candidate)	
Signed and sworn to (or affirmed) by WILLIAM F. KECK before me, on worm belt z. (insert month, day	<u>₹∞9</u> . , year)
(SEAL) (Notary Public's Signature)	
(SEAL) (Notary Public's Signature)	
"OFFICIAL SEAL" R. ALEX WESTHOFF Notary Public, State of Illinois My commission expires 02/18/12	

ATTAOLIT	OPETITION
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10 ILCS 5/7-10.1

United States of America

Revised July, 2004 SBE No. P-1C

LOYALTY OATH

State of Illinois)	SS.			
1, WILLIAM	F. K	ECK	_, do swear (or	affirm) that I ar	m a citizen of the
United States and the State of Illin	nois, that I	am not affil	iated directly o	or indirectly with	n any communis
organization or any communist fro	nt organizat	tion, or any	foreign politica	l agency, party	, organization o
government which advocates the	overthrow o	of constitution	onal governmen	nt by force or	other means no
permitted under the Constitution of t	he United S	States or the	Constitution of	this State: that I	do not directly o

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 WILLIAM F. KECK before me, (Name of Candidate)

on Novem B 2 2, 2009 (insert month, day, year)

(Notary Public's Signature)

(SEAL)

"OFFICIAL SEAL"
R. ALEX WESTHOFF
Notary Public, State of Illinois
My commission expires 02/18/12

09 NOV -2 AM 8: 54

THORNED IN