

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
As shown on the ballot: Michael E. Walker	Address: 35W618 Kane Ave City, Village, or Unincorporated Area: St Charles Zip Code: 60174	PRECINCT COMMITTEEMAN	Township/Ward: St. Charles Precinct: 11	Republican

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 change)

STATE OF ILLINOIS }
County of Kane } SS.

I, Michael E. Walker (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 35W618 Kane Ave, in the City, Village, Unincorporated Area (circle one) of St Charles (if unincorporated, list municipality that provides postal service) Zip Code 60174, in the County of Kane, State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the Republican Party; that I am a candidate for Election to the office of Precinct Committeeman in the County of Kane, to be voted upon at the primary election to be held on February 2, 2010 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 Statement of Economic Interests 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.

[Handwritten Signature]
(Signature of Candidate)

Signed and sworn to (or affirmed) by Michael E. Walker before me, on 10/30/2009
(Name of Candidate) (insert month, day, year)

[Handwritten Signature]
(Notary Public's Signature)

(SEAL)



RECEIVED
OCT 30 AM 11:06
KANE COUNTY CLERK

CERTIFICATION OF DELETIONS

I, Michael E. Walker, Candidate or Circulator (circle one) do hereby certify that I have properly initialed the deletions of signatures, listed hereinafter by page and line numbers, from the petition of Michael E. Walker (Name of Candidate) who is a candidate for election or nomination (circle one) to the office of Precinct Committeeman #11 at the General Primary to be held on February, 2, 2010.

Page No.	Line No.	Page No.	Line No.	Page No.	Line No.

(Signature of Person Deleting Signatures)

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.

CERTIFICATE OF ATTACHED LIST OF DELETIONS

We, the undersigned persons who have stricken signatures from the attached hereby certify that there is/are zero page(s) of **CERTIFICATION OF DELETIONS** listing signatures which have been stricken, and are attached hereafter to the petitions of Michael E. Walker (Name of Candidate) who is a candidate for election to the office of Precinct Committeeman #11 at the General Primary to be held on February 2, 2010.

The following are the page numbers indicated on the attached **CERTIFICATION OF DELETIONS**:

(CANDIDATE)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

Every person striking signatures from the petition shall each sign this certificate. This certificate shall be filed as part of the petition, shall be numbered, and shall be attached immediately following the last page of voters' signatures and preceding any **CERTIFICATE OF DELETION** sheet.

SHEET NO. 1

PRECINCT COMMITTEEMAN PRIMARY PETITION

KANE COUNTY DEPT. OF HEALTH REC'D 09 OCT 30 11 PM 2009 PRECINCT 11

We, the undersigned, members of and affiliated with the Republican Party and qualified primary electors of the Republican Party, in St. Charles (township name and precinct number) in the County of Kane, State of Illinois, do hereby petition that Michael E. Walker who resides at 35W618 Kane Ave in the City, Village, Unincorporated Area (circle one) of St. Charles (if unincorporated, list municipality that provides postal service) Zip Code 60174, County of Kane and State of Illinois, shall be a candidate of the Republican Party for election to the office of PRECINCT COMMITTEEMAN, for St. Charles Precinct 11 (township name and precinct number), to be voted for at the primary election to be held on February 2, 2010.

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)

Table with 4 columns: NAME (VOTER'S SIGNATURE), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of Illinois } SS. County of Kane }

I, MICHAEL E. WALKER (Circulator's Name) do hereby certify that I reside at 35W618 KANE AVE

in the City/Village/Unincorporated Area (circle one) of ST CHARLES (if unincorporated, list municipality that provides postal service) Zip Code 60174, County of KANE, State of IL that I am 18 years of age or older, 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 qualified voters of the Republican Party in 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 MICHAEL E. WALKER before me, on 10/06/2009 (Name of Circulator) (insert month, day, year)

(Notary Public's Signature)



SHEET NO. 1