### **COUNTY OF KANE**

John A. Cunningham

under the Illinois Campaign Discolsure Act.

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



Election Department Phone: (630) 232-5990 Fax: (630) 232-5870

www.kanecountyelections.org

Signature of Candidate or

### **Receipt for Nominating Petition**

March 18, 2014 - 2014 General Primary.

Receipt For:	Kevin Smith 149 Lake Shore Dr Carpentersville, IL 60110
Filed: Decemb	per 2, 2013 at 10:04:03 AM.
Office: FOR M	IEMBER OF THE COUNTY BOARD DISTRICT 23 Party: Democratic
The following	have been received:
$\checkmark$	Statement of Candidacy
<b>√</b>	Loyalty Oath
<b>√</b>	Petition Pages (-3)
<b>√</b>	Receipt for Economic Interest Statement (EIS)
Received fro	m: DAVED REECE
E	By:
	John A. Cunningham - Kane County Clerk
	Name and Title of Local Clerk/Secretary
Printed: 12/2/2013 1	0:04:42AM
	Receipt for Notice of Obligation D-5
I hereby ackn	owledge receipt of the Notice of Obligation which outlines obligations and responsibilities

Suggested Revised July, 2007 SBE No. P-1

#### STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
Kevin Smith	149 Lake Shore Carpontersulle, IL 60110	Or. County Bond Member	23	Democratic

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 ASUNTIL NAME CHANGED ON \$\frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2}
(List date of each name change)
STATE OF ILLINOIS  SS.  County of Kane  SS.
County of <u>Kane</u> ) ss.
I, <u>Beuin</u> (Name of Candidate) being first duly swom (or affirmed), say that I reside
at / 49 Lake Shore Dr. in the City, Village, Unincorporated Area (circle one) of
Carpenters.ville (if unincorporated, list municipality that provides postal service) Zip Code 60/10, in the
County of <u>Kane</u> , State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of
the <u>Democratic</u> Party; that I am a candidate for Nomination/Election to the office of
Count's Board Member in the 23 District, to be voted upon at the primary election to be held on
March 18, 2014 (date of election) 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 <u>Democrative</u> (Name of Party)
Primary ballot for Nomination/Election for such office.
la Grand
(Signature of Candidate)
Signed and sworn to (or affirmed) by Kevin Smith before me, on December 1, 2013
(Name of Candidate) (insert month, day, year)
(SEAFFICIAL SEAL (Notary Public's Signature)
NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES OCTOBER 9, 2017
MIT ODININGOOD EN MED OOF OR A TOTAL

# COUNTY BOARD MEMBER (counties that elect members from districts) PRIMARY PETITION

We the undersigned, members of and affiliat	ed with the <u>Democratic</u> y Board District <u>23</u> , County of	Party and qualified primar	ry electors of the State of Illinois, do
hereby petition that	who resides at	149 Laka Slova	(A) in the
City, Village Unincorporated Area (circle one) service) Zip Code 60//0 County of	of <b>Corplanters Ulla</b> (if un f <b>Kone</b> and St	nincorporated, list municipality that ate of Illinois, shall be a c	at provides postal
Party for the not	mination for the office of COUNTY BOA	RD MEMBER, County Board Dist	rict <u>23</u>
in the County of Kane March 18, 2014 (date of election	in the State of Illinois, to be vote	d for at the primary election	to be held on
If required pursuant to 10 ILCS 5/7-10.2, compl		opear on the ballot)	
FORMERLY KNOWN AS	UNTIL NAME CHA		
(List all names du	ring last 3 years)	(List date of each	name change)
NAME	STREET ADDRESS OR	CITY, TOWN OR	]
(VOTER'S SIGNATURE)	RR NUMBER	VILLAGE	COUNTY
1 This Rame	1940 Riverwood Dr	Algonauin IL	Kano
2 Yethy Keelle	1930 Kwerwooda	Harraun 1	Kane
3 ( Spena	1930 RIVERWOOD DR	Alaenamen 1	KANE_
* anne 2 ecc	1930 Riverupo	Algonquin "	Kane
5 May Rosce	1930 Riverwood	Hangun 1	hone
6 Julia Coural	1920 RIVEYWOOD P.	Algoria "	Kune
7 9 L	1920 Riverwood dr.	Alabhauin "	tane
8 my	1940 RIVER NOVER	Albandavin 1	KANE
9 Lally many	1940 Riverwood	Algonavin "	Kune
10 Ada Huellin	1941 RIVERWOOD	ALGONOVIN "	KANE
11 MARY HIELEN	194 RIVERWOOD	ALGONQUIN IL	KANE
12 LISA BONO	1800 RIVELWOOD	Algonquin 1	KANR
State of Ilragos		V	
County of Kane	SS.		
	Circulator's Name) do hereby certify that	t I reside at 149 10Ke 5	hora PR
in the City/Village/Unincorporated Area circle of	4 4 /	(if unincorporated, list municipal	
postal service) Zip Code Gollo, County o		Mrs. that I am 1	18 years of age or
older, that I am a citizen of the United States, a	ind that the signatures on this sheet we	ere signed in my presence, not m	ore than 90 days
preceding the last day for filing of the petitions ar at the time of signing the petition qualified voters		r knowledge and belief the person Party in the political division in wh	
is seeking nomination/elective office, and that the		stated, as above set forth	
	_fr	un Izu	
<b>/</b>		(Circulator's Signature)	1 2
Signed and sworn to (or affirmed) by 1500	(Name of Circulator)	before me, on _ Pecember	(, 40/5
	(Marile of Circulator)	(insert m	iontn, day, year)
(SEAL)		(Notary Public's Signature)	
OFFICIAL SEAL MARTIN MCCORMACK	SHEET NO	(	
NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES OCTOBER 9, 2017			

#### COUNTY BOARD MEMBER

## (counties that elect members from districts) PRIMARY PETITION

We, the undersigned, members of and affilia  Party, in Cour hereby petition that  Recirc			State of Illinois, do
City, Village Unincorporated Area (circle one) service) Zip Code 60//0 County of	of Kane and	unincorporated, list municipality that State of Illinois, shall be a c	andidate of the
in the County of	omination for the office of <b>COUNTY BO</b> in the State of Illinois, to be vo on).	PARD MEMBER, County Board Distr ted for at the primary election	to be held on
If required pursuant to 10 ILCS 5/7-10.2, comp	plete the following (this information will	appear on the ballot)	
FORMERLY KNOWN AS(List all names d	UNTIL NAME CH	ANGED ON(List date of each	name change)
<u> </u>		<u> </u>	
NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
· Marin E . Krich	149 maple treate	Carpointarsuil/a IL	Kore
2 Ponds Fyish	149 maple tree la	Confrontonsulle "	Kare
3 Santer Way	162 Phassont Trail	Confortoscrite 1	KONF
4 Bur Bente	156 SUNSET DR.	Canlenversulle 1	KONT
5 Dorothy Bruhn	156 SuiseT DR.	Carponta surile "	Kane
· Stry Danckun	161 SunseT DR	Carpentonxy//e "	Kance
Winder Jinder	161 Sansat DR	Cantentravelle "	KANE
Jan 3 James	270 WINDING CANY	ON WAY ALGORNA	BANK
Tours off	167 SKYline DA	Canta tosonte	Kone
10 bestie deep	1675K9/100 DR	Cantentorsulle "	SAM=
11 /X m takou	224 SanseT PR	Canfon Yorsulle 11	Krue
12 Milli Kalw	224 Sanset DR	Canfortage 11	Karre
State of <u><b>I</b>///no/9</u>	SS.	•	
County of Kane )			- 4
1, Bourn Smith	(Circulator's Name) do hereby certify th	nat I reside at <u>/ 49 / 4Ke</u> 2	hore dr
in the City/Village Unincorporated Area circle	one) of Carpenters u/le	(if unincorporated, list municipal	ity that provides
postal service) Zip Code, County older, that I am a citizen of the United States, preceding the last day for filing of the petitions a	and that the signatures on this sheet v	were signed in my presence, not m	8 years of age or ore than 90 days
at the time of signing the petition qualified voter is seeking nomination/elective office, and that	s of the <i>Democratic</i>	Party in the political division in wh	nich the candidate
	_le	un I mu	
1/	6 . 11	(Circulator's Signature)	1 2 13
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on Pecemb	onth, day, year)
(SEAL)		1 the	,
OFFICIAL SEAL	SHEET NO	(Notary Public's Signature)	
MARTIN MCCORMACK NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES OCTOBER 9, 2017			

# COUNTY BOARD MEMBER (counties that elect members from districts) PRIMARY PETITION

We, the undersigned, members of and affiliat	ted with the Democratic	Party and qualified prima	ry electors of the
Party, in Count hereby petition that Beurn	y Board District 23 County of Sm/+6 who resides at /	1 Kane in the :	State of Illinois, do in the
City, Village Unincorporated Area (circle one)	of Carpentarsulle (if u	nincorporated, list municipality the	at provides postal
Service) Zip Code 60170 County of Party for the no	mination for the office of COUNTY BOA	tate of Illinois, shall be a c IRD MEMBER, County Board Dist	andidate of the
in the County of Kane	in the State of Illinois, to be vote		
March 18, 2014 (date of election	n).		
If required pursuant to 10 ILCS 5/7-10.2, compl	ete the following (this information will a	ppear on the ballot)	
FORMERLY KNOWN AS	UNTIL NAME CHA	NGED ON	
(List all names du	ring last 3 years)	(List date of each	name change)
NAME	STREET ADDRESS OR	CITY, TOWN OR	
(VOTER'S SIGNATURE)	RR NUMBER	VILLAGE	COUNTY
1 Thudow esses	718 Southwind	Carpenterswille	Kane
2 M Dave Chart	149 love store or	condentersuite "	thone
3 bour No	149 /9 Ke Share de	Confordasville 1	Kane
* Samaia donock	149 Lake Shore Dr.	affiniter Lult	Kane
- 5M CATO SCIENCES	235 Robin Co-	Carpentus Ville	Ray
0	235 Pali		
7 M 200	2 25 Pd . W	Consideración. Il	
The Carrie	0233 KUDL DEN. (	A	Marc
8 63600	235 Mobin LA	Carpentersuille "	Kane
		L	
11			
12			
+11: 1:			
State of Illinois	SS.		
County of Kave			
1. Keuin Smith	Circulator's Name) do hereby certify tha	t I reside at <u>149 /a Ke</u>	Shore Pr
in the City/Village/Unincorporated Area (Circle of	ine) of Carponters Ville	(if unincorporated, list municipal	lity that provides
postal service) Zip Code 60//0 , County of	f Kane State of Z	2//10015 that I am	18 years of age or
older, that I am a citizen of the United States, a	and that the signatures on this sheet we	ere signed in my presence, not m	ore than 90 days
preceding the last day for filing of the petitions ar at the time of signing the petition qualified voters	of the <b>Sensolve</b> and that to the best of m	y knowledge and belief the person _ Party in the political division in wh	is so signing were hich the candidate
is seeking nomination/elective office, and that the		stated, as above set forth	-
	Je.		~
		(Circulator's Signature)	i 1
Signed and sworn to (or affirmed) by Key	in Smith	before me, on <del>DeCen</del>	16er 1, 2013
•	(Name of Circulator)		onth, day, year)
, (SEAL)		1/2-	
OFFICIAL SEAL MARTIN MCCORMACK	SHEET NO. $3$	(Notary Public's Signature)	
NOTARY PUBLIC STATE OF ILLINOIS	SHEET NO.		
MY COMMISSION EXPIRES OCTOBER 9, 2017		·	

ATTACH TO PETITION
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10 ILCS 5/7-10.1

OFFIEFALSEAL

MARTIN MCCORMACK NOTARY PUBLIC STATE OF ILLINOIS MY COMMISSION EXPIRES OCTOBER 9, 2017 Suggested Revised July, 2004 SBE No. P-1C

#### LOYALTY OATH (OPTIONAL)

United States of America
) SS. State of Illinois )
I, Keuin 5. Sunth, 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 Keyin Saith before me,  (Name of Candidate)  on Pecein V. / 2013  (insert month, day, year)  (Notary Public's Signature)

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

(COMPLETE BUT DO NOT DETACH)

Receipt is hereby acknowledged of your Statement of Economic Interests, filed pursuant to the Illinois Governmental Ethics Act. The Statement was filed as of this date.

office or position of employment for which this statement is filed)

TYPE OR HAND PRINT

AND FILED ON:

KANE COUNTY CLERK

All 3 pages must be returned to the Kane County Clerk for filing either in person or by mail. We will return this receipt to you.

LOCATION:

719 S. Batavia Ave., Bldg. B

Geneva

MAILING ADDRESS:

Kane County Clerk

719 S. Batavia Ave., Bldg. B Geneva, Illinois 60134