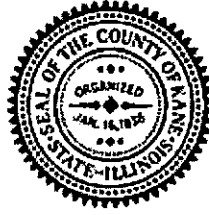


COUNTY OF KANE

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
www.kanecountyelections.org

Receipt for Nominating Petition March 15, 2016 - 2016 General Primary.

Receipt For: Howard R. Katz
1104 Lorlyn Cir Apt 3-C
Batavia, IL 60510

Filed: November 23, 2015 at 10:30:46 AM.

Office: FOR PRECINCT COMMITTEEMAN, Batavia 3 **Party:** Democratic

The following have been received:

- Statement of Candidacy
- Loyalty Oath
- Petition Pages *1 2 pgs*
- Receipt for Economic Interest Statement (EIS)

Received from:

Jean Cottro

By:

J. Cunningham

Deputy Clerk

John A. Cunningham - Kane County Clerk

Name and Title of Local Clerk/Secretary

Printed: 11/23/2015 10:35:51AM

Receipt for Notice of Obligation D-5

I hereby acknowledge receipt of the Notice of Obligation which outlines obligations and responsibilities under the Illinois Campaign Disclosure Act.

Date:

11/23/2015

Jean U Cottro
Signature of Candidate or Agent

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
Howard R. Katz	1104 Lorlyn Cir. #3C Batavia, IL 60510	Precinct Committeeman	Batavia 03	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 AS _____ UNTIL NAME CHANGED ON _____
(List all names during last 3 years) (List date of each name change)

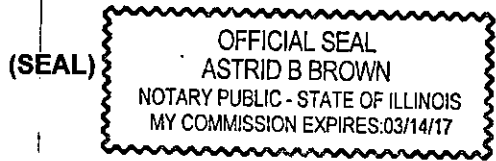
STATE OF ILLINOIS)
County of Kane) SS.

RECEIVED
5 NOV 23 AM 10:37
MILP COLINVA CLIENT

I, Howard R. Katz (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 1104 Lorlyn Cir. #3C in the City Village, Unincorporated Area (circle one) of Batavia (if unincorporated, list municipality that provides postal service) Zip Code 60510 in the County of Kane State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the Democratic Party; that I am a candidate for Nomination/Election to the office of Precinct Committeeman in the Batavia 03 District, to be voted upon at the primary election to be held on March 15, 2016 (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 Democratic (Name of Party) Primary ballot for Nomination/Election for such office.

Howard R. Katz
(Signature of Candidate)

Signed and sworn to (or affirmed) by Howard R. Katz before me, on 10-26-2015
(Name of Candidate) (insert month, day, year)



Astrid B. Brown
(Notary Public's Signature)

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and affiliated with the Democratic Party and qualified primary electors of the Democratic Party, in Batavia 03 (township name and precinct number) in the County of Kane, State of Illinois, do hereby petition that Howard R. Katz who resides at 1104 Lorlyn Cir. #3C in the City Village, Unincorporated Area (circle one) of Batavia (if unincorporated, list municipality that provides postal service) Zip Code 60510, County of Kane and State of Illinois, shall be a candidate of the Democratic Party for election to the office of PRECINCT COMMITTEEMAN, for Batavia 03 (township name and precinct number), to be voted for at the primary election to be held on March 15, 2016 (date of election).

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 12 rows of handwritten signatures and addresses.

State of Illinois County of Kane

ss. City of Batavia

I, Howard R. Katz (Circulator's Name) do hereby certify that I reside at 1104 Lorlyn Cir. #3C

in the City Village/Unincorporated Area (circle one) of Batavia (if unincorporated, list municipality that provides

postal service) Zip Code 60510, 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 Democratic 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.

Howard R. Katz (Circulator's Signature)

Signed and sworn to (or affirmed) by Howard R. Katz before me, on 10-26-2015 (Name of Circulator) (insert month, day, year)

Astrid B. Brown (Notary Public's Signature)



RECEIVED 15 NOV 23 AM 11:11

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and affiliated with the Democratic Party and qualified primary electors of the Democratic Party, in Batavia 03 (township name and precinct number) in the County of Kane, State of Illinois, do hereby petition that Howard R. Katz who resides at 1104 Lorlyn Cir. #3C in the City Village, Unincorporated Area (circle one) of Batavia (if unincorporated, list municipality that provides postal service) Zip Code 60510, County of Kane and State of Illinois, shall be a candidate of the Democratic Party for election to the office of **PRECINCT COMMITTEEMAN**, for Batavia 03 (township name and precinct number), to be voted for at the primary election to be held on March 15, 2016 (date of election).

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)

NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1 <u>Herbert R. Hewitt, Jr.</u>	<u>1066 Lorlyn Cir 2C</u>	<u>Batavia</u> IL	<u>Kane</u>
2		IL	
3		IL	
4		IL	
5		IL	
6		IL	
7		IL	
8		IL	
9		IL	
10		IL	
11		IL	
12		IL	

RECEIVED
NOV 23 AM 10:20
CLERK

State of Illinois)
County of Kane)

SS.

I, Howard R. Katz (Circulator's Name) do hereby certify that I reside at 1104 Lorlyn Cir. #3C

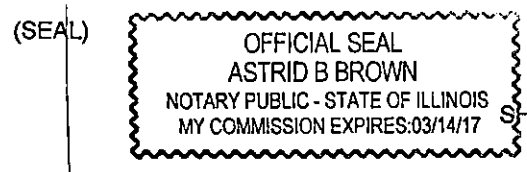
in the City Village/Unincorporated Area (circle one) of Batavia (if unincorporated, list municipality that provides

postal service) Zip Code 60510, 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 Democratic 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.

Howard R. Katz
(Circulator's Signature)

Signed and sworn to (or affirmed) by Howard R. Katz before me, on 10-26-2015
(Name of Circulator) (insert month, day, year)

Astrid B. Brown
(Notary Public's Signature)



SHEET NO. 2

Your Name Was Submitted for Filing by an Entity that You Represent
STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK
(Type or Hand Print)

Howard R. Katz

Name _____

Precinct Committeeman

Each office or position of employment for which this statement is filed _____

Full post office address to which notification of an examination of this statement should be sent

HOME ADDRESS:

1104 Lorlyn Cir. #3C

Batavia

60510

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 additional 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 the 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
NONE		
_____	_____	_____
_____	_____	_____
_____	_____	_____

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
NONE		
_____	_____	_____
_____	_____	_____
_____	_____	_____

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.

NONE

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.

NONE

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 of 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.

NONE

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.

NONE

7. List the name of any unit of government which 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.

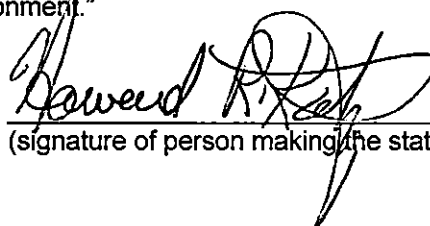
St. Charles Township

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.

NONE

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 the statement)

11-23-15

(date)

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.

Precinct Committeeman

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

TYPE OR HAND PRINT

Howard R. Katz

Name

1104 Lorlyn Cir. #3C

Address

Batavia

IL

60510

City

State

Zip Code

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

J. J. [Signature]
JANIE JOHNSON, CLERK

RECEIVED
15 NOV 23 AM 10:30