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 20, 2018 - 2018 General Primary.

Receipt For:	Chris Kempf 605 Souwanas Tr
	Algonquin, IL 60102
Filed: Decemb	per 4, 2017 at 12:30:00 PM.
Office: FOR P	RECINCT COMMITTEEMAN, Dundee 24 Party: Republican
Γhe following	have been received:
	Statement of Candidacy
	Loyalty Oath
√	Petition Pages /
<u></u>	Receipt for Economic Interest Statement (EIS)
Received fro	m:
i	By:
	Deputy Clerk
	John A. Cunningham - Kane County Clerk
	Name and Title of Local Clerk/Secretary
Printed: 12/4/2017 1	2:30:18PM

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 Discolsure Act.

Date: DEC 4, 2017

Signature of Candigate of Agent

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an			qualified primary	electors of the
(10)	DUNDES #2		recinct number) in	•
605 SOUWANAS TR	s, do hereby petition that in the City, Village, Unincor		~ · · · · · · · · · · · · · · · · · · ·	ho resides at
municipality that provides postal service) Z	,		of Illinois, shall be a	ncorporated, list
REPUBLICAN Party for election	•			(township
name and precinct number), to be voted for		d and a TH - U	ate of election).	
If required pursuant to 10 ILCS 5/7-10.2, comple	ete the following (this information wil	l appear on the ballot)		
FORMERLY KNOWN AS	UN1	TIL NAME CHANGED ON		
(List	all names during last 3 years)	(List date of	feach name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COUNTY
(VOTÉR'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COOKIT
Throng of Kenny	Nancy L Kenst	605 Soviesayas	FLGONDOUN	KANE
2 Med Trent	CHRIS L KEMPF	GOS SOOWANAS	ALGONGON	KANS
3. Wern John /	WERNED MILO	220 NATOKA	ALGONOUD	KANE
I Spel Weledon	HODY WINBLY	1210 WWAKE	Alsa "	Kine
Dr. ymeur	Jen Yonamine	1485 Manhatas	Algorauin"	Kane
6 Don My	DOUG YONDMINE	م مرا	ALGONAUN	KANE
7. Joseph Toward.	Todal TopperT	1245 Onaway Tol	Alponyun	Kone
8. A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A	Same Conser	/	Seo IL	W n
	TOW FOT	1665 Marhates Tr.	Hangain	1 1/10
6/2 HOTA	2 10 10 10 10	MSS M	'A 3'S 5"	D LMAN
- CAROLI CW W	Love Christer	er 1680 Menous Tr	South	
State of JUINUIS)) SS.			} }
County of KANE)			
, CHRIS KEMPF	(Circulator's Name) do hereby	certify that I reside at 605	SOUWAN	in the
City/Village/Unincorporated Area of Albe		porated, list municipality that provides	s postal service)(Zip (Code) <u>6462</u>
County of KANE, State of	that I am 18 years of	age or older (or 17 years of age and	I qualified to vote in II	linois), that I am
a citizen of the United States, and that the	-		· · ·	•
filing of the petitions and are genuine and to qualified voters of the REPUBLICA	•		<i>-</i>	/ / * .
that their respective residences are correct	,	ivision in which the candidates is se	eking nomination/efe	ctive office, and
that their respective residences are correct	iy stated, as above set lottil.	I has of	suff	
	TIME Vom	(Circulator	s Signature)	-
Signed and sworn to (or affirmed) by	(Name of Circulator)	Ambetora representation of 31	nonth, day, year)	
(0541)	(Name of Circulator)	AHMED J SIDDIQUI	med tana	, a.d.
(SEAL)	NO Months	MART PUBLIC - STATE OF ILLINOIS 1	blic's Sigheture)	
	SHEET NO.	7 0 F 2	J	

PRECINCT COMMITTEEMAN PRIMARY PETITION

Ne, the undersigned, members of and	d affiliated with the REP	UBCICAN Party and	qualified primary	electors of the
A E POLI CATIV Party, in	DUNDEE # 6	(township name and pr	ecinct number) in	the County of
	, do hereby petition that		102	no resides at
	in the City, Village Unincorp		(ncorporated, list
nunicipality that provides postal service) Zi REPUBL/CAMParty for election	p Cade 6000000000000000000000000000000000000	COMMITTEEMAN, for DUNG	of Minois, shall be a	candidate of the (township
name and precinct number), to be voted to	r at the primary election to be h	neld on MARCH 20TH (de	ate of election).	
frequired pursuant to 10 ILCS 5/7-10.2, comple	te the following (this information will	• • •		
FORMERLY KNOWN AS(List	UNT all names during last 3 years)	TIL NAME CHANGED ON(List date of	each name change)	
NAME (VOTER'S SIGNATURE)	VOTER'SPRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1.0	DAVID GAVALDS	1450 wwaki Hungare	60102	hones
2 Birling	BENJAMIN WEFFER	lyos manitudias th	ALCONOLONDE	KAWE
3.	Auron Stice	1130 Man: 40 T-1	ALGONIAUN	Kae
1. The Coto	TIM COTE	1075 MANITO TE ALGONALINA	ALGOROWIN	RANE
5. Loevre Cote	LAURIE COTE	ALGONOUN	ALCONOUND	KANE
6. Bridan Enger	Barbora Empor	1455 Wabica TR.	4/(80202-1t	Kana
7.	<u> </u>		Д, Д	
B.			.11.	•
9.			,lL	
10.			,IL	-
State of IUCINOIS)	<u> </u>	-	
County of KANE) SS.)			
CHRIS KEMPF	(Circulator's Name) do hereby (certify that I reside at 665	SOUWANAS	S in the
City/Vallage/Unincorporated Area of/4/	GOOQUIN (it unincorp	porated, list municipality that provide	s postal service) (Zip (Code) 60/02
County of KANE State of	/Cthat I am 18 years of	age or older (or 17 years of age and	d qualified to vote in I	linois), that I am
a citizen of the United States, and that the	-	- ''		·
illing of the petitions and are genuine and t qualified voters of the <u>REPVBUCA</u>				
hat their respective residences are correct				
	,	The My	(affighature)	
	HRIS KAMPA	before me, on	20 17	
Signed and sworn to (or affirmed) by	(Name of Circulator)		ponth, day, year)	
(SEAL)	OFFICIAL AHMED J SI NOTARY PUBLIC - ST MYKOMMISSION E	DDIQUI (Notary Pu	med fanna blic's Signature)	ud
	SHEET NO.	2 OF 2		

Suggested Revised August, 2017 SBE No. P-1

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
CHRIS	605 SOUWANAS TR ALGONQUINIL GOIOZ	PRECINCT COMMITTEETHN	DUNDES 24	REPUBLICAN

(for unexpired terms, specify "2 year unexpired term" or "4 year unexpired term" along with the office in the "OFFICE" space provided above)

• • • •		•	··· ····· spars provided above,
If required pursuant to 10 IL	CS 5/7-10.2, 8-8.1 or 10-5.1, com	plete the following (this info	ormation will appear on the ballot)
FORMERLY KNOWN AS		UNTIL NAME CHANGE	FD ON
	(List all names during last 3 years		(List date of each name change)
STATE OF ILLINOIS)) ss.		E COII
County of	/ 0 >		MAC OF THE PROPERTY OF THE PRO
, CHRIS K	-	ne of Candidate) being	first duly sworn for affirmed), say that
	SOUWANAS	_, in the City,	Village, Unincorporated Area o
ALGONQUIN			postal service) Zip Code <u>60/02</u> ir
À	· ·		voter therein and am a qualified Primary
voter of the REPOB	Party;	that I am a candidate	for Nomination/Election to the office of
			ed upon at the primary election to be held
			(including being the holder of any license
) to hold such office and that I have filed
			omic Interests as required by the Illinois
Governmental Ethics Act ar	nd I hereby request that my na	ame be printed upon the	e official <u>KEPUBLICA</u>
(Name of Party) Primary bal	lot for Nomination/Election for		(Signature of Candidate)
Signed and sworn to (or affir	med) by Chris K (Name of Cand	empfidate)	before me, on 10 30 17 (insert month, day, year)
(SEAL)	AHN NOTARY PU MY COMM	FICIAL SEAL ED J SIDDIQUI BLIC - STATE OF ILLINOIS SSION EXPIRES:02/07/21	Three award (Notary Public's Signature)