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:	David S. Stewart		
	48W068 Mc Nulty Rd		
	Maple Park, IL 60151		

Filed	I: Novem	ber 29, 2017 at 2:	14:53 PM.	
Office: FOR PRECINCT COMMITTEEMAN, Virgil 2 Party: Republic				Party: Republican
The	following	g have been recei	ved:	
	✓	Statement of Ca		
		Loyalty Oath		
	√	- Petition Pages	1-2	

Receipt for Economic Interest Statement (EIS)

Received from: David S. Stewart

D.,..

Deputy Clerk

John A. Cunningham - Kane County Clerk

Name and Title of Local Clerk/Secretary

Printed: 11/29/2017 2:15:26PM

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: MOVEMBER 29, ZOL7

Signature of Candidate or Agent

Suggested Revised August, 2017 SBE No. P-1

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DĮŞTRĮCT	PARTY
DAVIDS. STEWART	40WOLD MY LIVETY PD	PRECIPIET	1440000	PEPVBUCAL
			, , , , , , ,	
(for unexpired terms, specify "2 year un	ownized term" or "A year unexpired to	rm" along with the office in th	o "OUTICE" space pro	vided above)
If required pursuant to 10 ILCS 5/7-10.		-		,
·	•	• .	• •	•
(List all na	UNTIL mes during last 3 years)	NAME CHANGED ON _	(List date of each	name change)
STATE OF ILLINOIS)			
County of KAUE) SS.	•		
1, DAVID S. STEWAR	(Name of Ca	andidate) being first du	ly sworn (or affirm	ed), say that I
reside at 48WOGB MCNUL	<i>TV <u>POA1</u></i> , in	the City, Village	e, Unincorporate	ed Area of
MAPLE PARK (if un	nincorporated, list municipality	y that provides postal s	ervice) Zip Code	<u>6015/</u> , in
the County of KANE	, State of Illinois; that I	am a qualified voter th	nerein and am a qu	ualified Primary
voter of the PZPVBLICA	1/10 C. ()			
PRICINCT COMMITTEEMAN	in the PCT. DZ_Di	istrict, to be voted upon	at the primary ele	ction to be held
on MAPCH 20, 2018 (C	iate of election) and that I am	legally qualified (includi	ng being the holde	er of any license
that may be an eligibility requiremen	t for the office to which I seek	the nomination) to hol	d such office and	that I have filed
(or I will file before the close of the	petition filing period) a State	ement of Economic Int	erests as required	d by the Illinois
Governmental Ethics Act and I here	by request that my name be	printed upon the officia	al <u>pepubu</u> c	CACI
(Name of Party) Primary ballot for No	omination/Election for such of	fice.		
PH NO			7) 0	
	_	rount (ett purl	
Signed and swern to (or affirmed) by	~ ^ ~	_	ure of Candidate)	1
Signed and swern to (or affirmed) by	Name of Candidate)	<u>r</u> ←before	me, on \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	onth, day, year)
(SEAL)	-	(Notary	Public's Signature	e)

SEAL)

OFFICIAL SEAL ANGELA D. McCOY NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires July 19, 2020

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an	d affiliated with the <u>PEP</u>	<i>VBUCA以</i> Party and	qualified primary	electors of the
Party, in	VIRGIL PCT. O	(township name and pro	ecinct number) in	the County of
	s, do hereby petition that	DAVID S. STEW	ART wh	no resides at
48WOLE MCNULTY ROAD	_ in the City, Village, Unincor	porated Area of MAPLE P	<u>ARK</u> (if unit	ncorporated, list
municipality that provides postal service) Z	ip Code <u>60151</u> , County of	f <u>KANE</u> and State	of Illinois, shall be a	candidate of the
Party for election		· · · · · · · · · · · · · · · · · · ·		Z (township
name and precinct number), to be voted for	or at the primary election to be t	held on <u><i>MAPCH 20,7618</i></u> (da	te of election).	
If required pursuant to 10 ILCS 5/7-10.2, complete	ete the following (this information wil	l appear on the ballot)		
FORMERLY KNOWN AS	UN	TIL NAME CHANGED ON		
(List	all names during last 3 years)	(List date of	each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1. 11) 4 (/	7 / 5/	201587 11/2		
- The Olumes	1/411 Julmary	3N587 MERED 17H	Maple PACK	KANG
Dette Shometry	D'ette Shomway	310587 Merecialle	Made Park"	Kane
3. Mark J	Matthew Shumway	3N587 Mindry Rd	Made Dook ,IL	Kne
Bi O Quil I	1	n 3N800 thatcher Rd		Kane
5.0	1 - 11 /	1 / 1 / 1	/ _ [/	
I Danion Jm. R	Jeremian Lynch	3N800 That cherRd	Maple tark	Kane
Manulla Strak	Danielle Stojan	201807 Howard Rol.	I MANDO FOR IL ""	Kare
Plant	Philip Storan	2 /874 Howard	MAPLOPART	KANC
8.	Chris Stojan	2N807 Howard Rd	Mapk Pak "L	Kve
9. 7	- 0'		C 114	
Lana Bello	DIANA VIDOLE	† · · · · · · · · · · · · · · · · · · ·		Kane
Melanes Mesturan	Melanie Markos		Maple Park	Kone.
State of <u>TUUVOIS</u>)	Or.		
) SS.			
County of <u>KAME</u>	,			
LOAVID S. STEWART	(Circulator's Name) do hereby	certify that I reside at 48W068 N	ICNVITY ROA	D, in the
City/Village/Unincorporated Area of MAP	LE PARK (if unincor	porated, list municipality that provides	s postal service)(Zip (Code) <i>60151</i> ,
·		f age or older (or 17 years of age and		
a citizen of the United States, and that the				
filing of the petitions and are genuine and				
qualified voters of the FEPVBLICA		livision in which the candidates is se	eking nomination/ele	ctive office, and
that their respective residences are correct	tly stated, as above set forth.	Dock 7 (free	, ()	
		(Circulator	s Signature)	
Signed and awars to (as affirmed) by	and S Stanch	before me, on	22/17	
Signed and sworn to (or affirmed) by	(Name of Circulator)	(Insert	nonth, day, year)	
(SEAL)		anaele 1	M Con	
OFFICIAL SEAL	~	(Notary Pu	blic's Signature)	
ANGELA D. McCOY NOTARY PUBLIC, STATE OF ILLING	OIS SHEET NO	<u></u>		
My Commission Expires July 19, 20)20 🕴			

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an	d affiliated with the Papu	BUCAN Party and	qualified primary	electors of the
Party, in	VIRGIL PCT.OZ	(township name and pr	ecinct number) in	the County of
	, do hereby petition that	DAVID S. STEN	4.27 w	no resides at
		porated Area of NIA-PUL J	=	
municipality that provides postal service) Z				
		COMMITTEEMAN, for VIRGIC		(township
name and precinct number), to be voted to	or at the primary election to be t	neld on <i>MAPCU ZO, ZOID</i> Rda	te of election).	
If required pursuant to 10 ILCS 5/7-10.2, comple	ete the following (this information will	appear on the ballot)		
FORMERLY KNOWN AS	UNT	ΠL NAME CHANGED ON		
(List	all names during last 3 years)	(List date of	each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1. fr. g. mh	Jay Mulsuson	ZP158 Saddlerood	VIVE POUTLE	Kand
2. Then I wan	Eduard Govenz	4N430 Pin OghLn	Maple Partill	Kane
3. PAB	Robert Burgin	46W725 RT38	maple Parkill	Kane
4 Maria Sugar	Marcia Ruceia)	44. W725 R#39	Mark Poll	Kare
5 Richard Biddle	Richard Bloole	3W576 THOTELASIC	MAPLEPARE	KANE
6. //	1/ 1/ 1		Maple Park!"	1/
7 Jack J Hewar	Raren J. Dtewart	48W068 McNulty Road	" laple Pain.	Mane
8.			,IL	<u> </u>
9.			,IL	
10.			,IL	
		<u> </u>		<u> </u>
State of TUMOL3)) SS.			
County of KARLE)			
, DAVID S. STEWART	(Circulator's Name) do hereby	certify that I reside at 4BW06B	NGULTY PO	aD, in the
City/Village/Unincorporated Area of 11/04				_
County of KANE , State of Z	LUNDIS that I am 18 years of	age or older (or 17 years of age and	d qualified to vote in I	llinois), that I am
a citizen of the United States, and that the	signatures on this sheet were	signed in my presence, not more tha	an 90 days preceding	g 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 IZEPVBUICAM Party in the political division in which the candidates is seeking nomination/elective office, and				
that their respective residences are correctly stated, as above set forth.				
(Circulator's Signature)				
Signed and sworn to (or affirmed) by David S. Stewart before me, on (Insert month, day, year)				
(SEAL)	~-1	Ungela D.	mc Coy	
OFFICIAL SEAL (Notary Public's Signature) ANGELA D. McCOY				
NOTARY PUBLIC, STATE OF ILLING My Commission Expires July 19, 20	DIS SHEET NO	2		