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 Agent

Receipt for Nominating Petition March 20, 2018 - 2018 General Primary.

Receipt For:	Kathleen Newcomb 163 Maureen Dr Elgin, IL 60123
Fi led: Novemb	per 28, 2017 at 2:12:00 PM.
Office: FOR F	PRECINCT COMMITTEEMAN, Elgin 43 Party: Democratic
The following	have been received:
✓	Statement of Candidacy
√	Loyalty Oath
√	Petition Pages 1-2
	Receipt for Economic Interest Statement (EIS)
Received fro	om: Cail Stathman
ī	By: Juboah Ruth Deputy Clerk
	John A. Cunningham - Kane County Clerk
	Name and Title of Local Clerk/Secretary
Printed: 11/28/2017	2:14:09PM
	Receipt for Notice of Obligation D-5
I hereby ackr	nowledge receipt of the Notice of Obligation which outlines obligations and responsibilities

Suggested Revised August, 2017 SBE No. P-1

STATEMENT OF CANDIDACY

	NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
	Kathleen Newcomb	163 MaureenDe Elgin, IL bola3	Democratic Committeeman	43 ECGIN	
	(for unexpired terms, specify "2 year unex	pired term" or "4 year unexpired ter	m" along with the office in th	e "OFFICE" space prov	rided above)
	If required pursuant to 10 ILCS 5/7-10.2	, 8-8.1 or 10-5.1, complete the f	ollowing (this information	will appear on the ba	allot)
FORMERLY KNOWN AS UNTIL NAME CHANGED ON (List all names during last 3 years) (List date of each name change)					
S	TATE OF ILLINOIS)			
	ounty of <u>Kane</u>) SS.)			
I, <u>Kathleen Newcomb</u> (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 163 Maureen Dr. in the City, Village, Unincorporated Area of					
re					•
Elgin (if unincorporated, list municipality that provides postal service) Zip Code 60/23, in					
· tl	ne County of <u>Kane</u>	, State of Illinois; that I	am a qualified voter th	erein and am a qu	ualified Primary
voter of the <u>Democratic</u> Party; that I am a candidate for Nomination/Election to the office of					
-	Committeeman	in the <u> </u>	strict, to be voted upon	at the primary ele	ction to be held
on MALCH 30, 3019 (date of election) and that I am legally qualified (including being the holder of any license					
ti	nat may be an eligibility requirement	for the office to which I seek	the nomination) to hol	d such office and t	hat 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>Demo Cratic</u> (Name of Party) Primary ballot for Nomination/Election for such office. When the petition filing period) a Statement of Economic Interests as required by the Illinois Demo Cratic (Name of Party) Primary ballot for Nomination/Election for such office. (Signature of Candidate)					
Governmental Ethics Act and I hereby request that my name be printed upon the official Demo Cratic					
(Name of Party) Primary ballot for Nomination/Election for such office.					
•	PREC 7 NOV 20	_	Karbeen	Jewsom	<u></u>
	 `\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		(Signati	re of Candidate)	•

Signed and sworn to (or affirmed) by <u>KATHLUEN NEWCOMB</u> (Name of Candidate)

before me, on MVEWBER 31,3017

(insert month, day, year)

(SEOfficial Seal Franklin Fredrick Ramirez Notary Public State of Illinois My Commission Expires 09/01/2021 (No ary Public's Signature)

10 ILCS 5/7-10.1

Suggested Revised July, 2004 SBE No. P-1C

LOYALTY OATH (OPTIONAL)

)	
)	SS.
)	
)))

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.

Karhleen Hewconl
(Signature of Clandidate)

Signed and sworn to (or affirmed) by <u>KATHLEEN</u> <u>NEWCOYNES</u> before me, (Name of Candidate)

on NOVEMBEL 21, 2017 (insert month, day, year)

Official Seal Franklin Fredrick Ramirez Notary Public State of Illinois My Commission Expires 09/01/2021 (Notary Public's Signature)

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an	d affiliated with the De	moemotic Party and	l qualified primary	electors of the
Democratic Party, in		(township name and p		
Kane State of Illinois	s, do hereby petition that	Kathleen Neu		no resides at
14 = 1		porated Area of Elgin		ncorporated, list
municipality that provides postal service) Z		1/	of Illinois, shall be a	
Democratic Party for election	n to the office of PRECINCT C			(township
name and precinct number), to be voted to	or at the primary election to be I	neid on(d	ate of election).	
If required pursuant to 10 ILCS 5/7-10.2, comple	ate the following (this information will	Language on the hellet		
•		•		
FORMERLY KNOWN AS(List	all names during last 3 years)	TIL NAME CHANGED ON(List date o	f each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	, ,
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
lines Gents	EAHEST PLANSTROP		13574 IL	Kane
Elizaveth miss	Dizabeth Zunia	201 S. Jane Dr.	El gin "	Kane
3. Hirch Corenin			,IL	
4 Mitch Deino	Mirch EsTENINO	136 S. Jane St.	EUNIN	Kane
5. Mous of Esternio	MONICH Estering	J .	Elq10	Kone
6. Day 6.	Levry Boller	- (20 Stane Dr	Etgin "	tano
* You Museurich	Jane Mursewick	16/1 Alism Dr.	Dain "	Kane
8. Chile State	Jose GINDING	1630 ALISON Dr	Eldin "	Kome
Frin Vanuale	JAMES DANGELEL	1651 ALISON OR.	Felgin IL	KANE_
10 Heresa Jennes	TheresA Kenned	x 1641 Alson Dr	EIG /N "	KANS.
State of Illinois)		- 	
County of Kane) SS.)			
1, Kathleen Newcomb	(Circulator's Name) do hereby o	certify that I reside at 163 Ma	zureen D	ル in the
City/Village/Unincorporated Area of £/	/	oorated, list municipality that provide		_
County of Nane, State of	/ / 1	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 the	hat to the best of my knowledge			
qualified voters of the Democrati	Party in the political di	vision in which the candidates is se	eking nomination/ele	ctive office, and
that their respective residences are correctly	y stated, as above set forth.	1/1/	,	
		Circulator)	euiconele s Signature)	· · ·
Signed and sworn an energy attigmed) by (A)	HLEEN NEUCOME	before me, on WOVEW E	30% 21. =~	. ت
Franklin Fredrick Ramirez Notary Public State of Illinois	(Name of Circulator)		nonth, day, year)	
(A) Ecolomission Expires 09/01/2021		- M		
***************************************	1	TNotary Pa	olic's Signature)	

PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and affiliated with the <u>Democratic</u> Party and qualified primary electors of the				
Demogratic Party, in Elgin #43 (township name and precinct number) in the County of				
Kane State of Illinois, do hereby petition that <u>Kathleen Neucomb</u> who resides at 163 Maureen Die. in the City, Village, Unincorporated Area of <u>Elgin</u> (if unincorporated, list				
municipality that provides postal service) Z		- · · · · · · · · · · · · · · · · · · ·	of Illinois, shall be a	ncorporated, list
<u>Democratic</u> Party for election				(township
name and precinct number), to be voted for		,		(10111101111
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	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	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	
Hourt 9. Natoria	David J. Nelson	149 Pauline DL.	Elgin IL	Kene
2. Elizabeth Shar	Elizabeth Sharf	136 Kathleen Dr	Elgin "	Kane
3. Mark Shaif	Marie Shalf	136 Kathleen Dr	Flgin ,IL	Kane
4. Krea den	Kecri SunD	1590 Pamela DR	Show il	KUNY
5. Juni dund	Jami Sund	1590 Pamela Dr	Elain ,IL	Kane
6. Paris Horales	Joyce Hoper	-3 1	Claim I	Kane
THE	0/1/1	11 (O 0 : M	es il	C
8. V A T	Beverly Newto	111 20 1 20	CA IL.	12
9. Nary of Jewier	Gary Newton		El gin	Nana
Tachleen / Cutorit	KathleenNewcons		Elgin "	Mane
Carla a. II Ducie	Carla A.MGuire	1595 Alison Dr.	Elgin "	Kane
State of Illinois)) SS.			
County of Kane) 33.			
1. Kathleen Newcomb	(Circulator's Name) do hereby	certify that I reside at 163 Ma	rureen Dr	<u>۔</u> , in the
City/Village/Unincorporated Area & El	<i>/</i> •	porated, list municipality that provide		
County of Tane State of T//. that I am 18 years of age or older (or 17 years of age and qualified to vote in Illinois), that I am				
a citizen of the United States, and that the	signatures on this sheet were	signed in my presence, not more that	an 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 Denocratic Party in the political division in which the candidates is seeking nomination/elective office, and				
that their respective residences are correct	tly stated, as above set forth.	Kathlean (Circulator	Mewro 's Signature)	nl_
Signed and sworn to (or affirmed) by	THUEN NEWCOM! (Name of Circulator)	B before me, on NOVEM	850_21, 20 month, day, year)	217
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	(· · · · · · · · · · · · · · · · · · ·	411		
(SEAL) Official Seal Francisco Ramirez Notary Public's Signature)				
Notary Public State of Illinois My Commission Expires 09/01/2021	SHEET NO	·~		