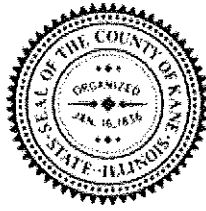


COUNTY OF KANE

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 April 2, 2019 - 2019 Consolidated Election.

Receipt For: Kathleen T. Hewell
519 Wing Ln
St Charles, IL 60174

Filed: December 10, 2018 at 8:30:00 AM.

0303

Office: FOR MEMBERS OF THE BOARD OF EDUCATION TO SERVE A FULL 4-YEAR TERM
Party: Non-Partisan

The following have been received:

- Statement of Candidacy
- Loyalty Oath
- Petition Pages 1-7
- Receipt for Economic Interest Statement (EIS)

Received from: Kathleen T. Hewell

By:

Deborah Ruchti

Deputy Clerk

John A. Cunningham - Kane County Clerk

Name and Title of Local Clerk/Secretary

Printed: 12/10/2018 9:03:15AM

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:

Dec. 10, 2018

Kathleen T. Hewell
Signature of Candidate or Agent

STATEMENT OF CANDIDACY

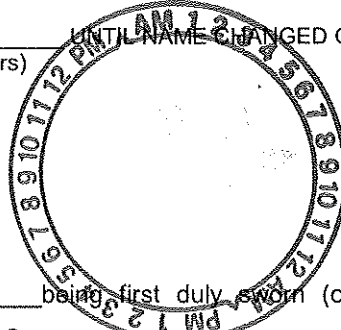
NONPARTISAN

NAME	ADDRESS-ZIP CODE	OFFICE	CITY, VILLAGE OR SPECIAL DISTRICT
KATHLEEN T. HEWELL	519 WING LANE ST. CHARLES, IL 60174	SCHOOL BOARD MEMBER	ST. CHARLES COMMUNITY UNIT SCHOOL DISTRICT #303

(for unexpired terms, specify "2 year unexpired term" or "4 year unexpired term" along with the office in the "OFFICE" space provided above) If required pursuant to 10 ILCS 5/10-5.1, 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.



I, KATHLEEN T. HEWELL being first duly sworn (or affirmed), say that I reside at 519 WING LANE, in the City/Village, Unincorporated Area of ST. CHARLES

(if unincorporated, list municipality that provides postal service) Zip Code 60174, in the County of KANE, State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/

Election to the office of SCHOOL BOARD MEMBER in the COMM. UNIT SCHOOL DISTRICT #303 Name of City, Village or Special District

to be voted upon at the election to be held on APRIL 2, 2019 (date of election) and that I am legally qualified 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 ballot for Nomination/Election to such office.

Kathleen T. Hewell (Signature of Candidate)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/8/18 (Name of Candidate) (insert month, day, year)

(SEAL)



Sheila M Griffin (Notary Public's Signature)

ATTACH TO PETITION

10 ILCS 5/7-10.1

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

LOYALTY OATH
(OPTIONAL)

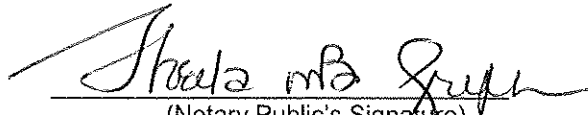
United States of America)
) SS.
State of Illinois)

I, KATHLEEN T. HEWELL, 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 KATHLEEN T. HEWELL before me,
(Name of Candidate)

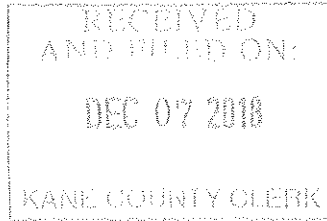
on 12/8/18
(insert month, day, year)


(Notary Public's Signature)

(SEAL)



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



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

COMPLETE BUT DO NOT DETACH

Type or Hand Print Legibly

SCHOOL BOARD MEMBER - ST. CHARLES CUSD #303
(office or position of employment for which this Statement is filed)

KATHLEEN T. HEWELL
Name

519 WING LANE
Address

ST. CHARLES IL 60174
City State Zip Code

All three pages must be returned to the Kane County Clerk for filing either in person or by mail. We will return this receipt to you, and you should keep this for your records.

Location: 719 S. Batavia Avenue, Building B
Geneva, IL 60134

Mailing Address: Kane County Clerk
ATTN: EIS
719 S. Batavia Avenue, Building B
Geneva, IL 60134

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER
ST. CHARLES COMM UNIT SCHOOL DISTRICT NUMBER 303 IN KANE & DUPAGE COUNTY, ILLINOIS

We, the undersigned, being (50 or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that
KATHLEEN T. HEWELL who resides at 519 WING LANE in the ST. CHARLES City, Village, Unincorporated Area
of ST. CHARLES, IL (if unincorporated, list municipality that provides postal service) in Township ST. CHARLES in said
district shall be a candidate for the office of SCHOOL BOARD MEMBER of the Board of Education (or Board of Directors) (full term) or
(vacancy) to be voted for at the Consolidated Election to be held on APRIL 2, 2019 (date of election).

(If running for an unexpired term state "2 year unexpired term" or "4 year unexpired term"):

If required pursuant to 10 ILCS 5/10-5.1, 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)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. <u>Charles F. Hewell</u>	<u>CHARLES F. HEWELL</u>	<u>519 WING LANE</u>	<u>ST. CHARLES, IL</u>	<u>KANE</u>
2. <u>Allison Hewell</u>	<u>ALLISON HEWELL</u>	<u>519 WING LANE</u>	<u>ST. CHARLES, IL</u>	<u>KANE</u>
3. <u>Kerrilyn Hewell</u>	<u>KERRILYN HEWELL</u>	<u>519 WING LANE</u>	<u>ST. CHARLES, IL</u>	<u>KANE</u>
4. <u>Rebecca McCabe</u>	<u>Rebecca McCabe</u>	<u>3035 Meadow</u>	<u>St Charles, IL</u>	<u>KANE</u>
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of ILLINOIS)
County of KANE) SS.

I, KATHLEEN T. HEWELL (Circulator's Name) do hereby certify that I reside at 519 WING LANE, in the
ST. CHARLES, IL City/Village/Unincorporated Area of ST. CHARLES, IL (if unincorporated, list municipality that provides postal service) (Zip

Code) 60174, County of KANE, State of ILLINOIS 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 than 90 days preceding the last day of 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 registered voters of the political division in which the candidate is seeking elective office, and their
respective residences are correctly stated, as above set forth.

Kathleen T. Hewell
(Circulator's Signature)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/8/18
(Name of Circulator) (Insert month, day, year)

Sheila M Griffin
(Notary Public's Signature)



PAGE NO. 1

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER
ST. CHARLES COMMUNITY UNIT SCHOOL DISTRICT NUMBER 303 IN KANE & DUPAGE COUNTY, ILLINOIS

We, the undersigned, being (50) or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that
KATHLEEN T. HEWELL who resides at 519 WING LANE in the (City) Village, Unincorporated Area
of ST. CHARLES, IL (If unincorporated, list municipality that provides postal service) in Township ST. CHARLES in said
district shall be a candidate for the office of SCHOOL BOARD MEMBER of the Board of Education (or Board of Directors) (full term) or
(vacancy) to be voted for at the Consolidated Election to be held on APRIL 2, 2019 (date of election).

(if running for an unexpired term state "2 year unexpired term" or "4 year unexpired term"):

If required pursuant to 10 ILCS 5/10-5.1, 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)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>Beverly Anderson</u>	<u>Beverly Anderson</u>	<u>1602 Jeanette Ave</u>	<u>St Charles IL</u>	<u>Kane</u>
<u>Diane Targos</u>	<u>Diane Targos</u>	<u>109 S. 12th St</u>	<u>St Charles IL</u>	<u>Kane</u>
<u>Margaret Hewell</u>	<u>Margaret Hewell</u>	<u>36 W 475 Huntersgate</u>	<u>St. Charles IL</u>	<u>Kane</u>
<u>Todd S. Hewell II</u>	<u>TODD S. HEWELL II</u>	<u>36 W 475 HUNTERS GATE</u>	<u>ST CHARLES IL</u>	<u>KANE</u>
<u>Todd S. Hewell II</u>	<u>Todd S. Hewell II</u>	<u>36 W 475 HUNTERS GATE</u>	<u>St. Charles IL</u>	<u>Kane</u>
<u>Kenneth True</u>	<u>KENNETH TRUE</u>	<u>39 W 100 DEAN LN</u>	<u>ST CHARLES IL</u>	<u>KANE</u>
<u>Jay Rasmussen</u>	<u>Jay A. Rasmussen</u>	<u>548 Wing Lane</u>	<u>St. Charles IL</u>	<u>Kane</u>
_____	_____	_____	_____	_____
<u>Tanner Hernandez</u>	<u>Tanner Hernandez</u>	<u>554 Wing Ln</u>	<u>ST CHARLES IL</u>	<u>Kane</u>
<u>Doug Walz</u>	<u>DOUG WALZ</u>	<u>520 Post Rd.</u>	<u>ST. CHAR IL</u>	<u>KANE</u>

State of ILLINOIS)
County of KANE) SS.

I, KATHLEEN T. HEWELL (Circulator's Name) do hereby certify that I reside at 519 WING LANE, in the
(City) Village/Unincorporated Area of ST. CHARLES, IL (if unincorporated, list municipality that provides postal service) (Zip

Code) 60174, County of KANE, State of ILLINOIS 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 than 90 days preceding the last day of 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 registered voters of the political division in which the candidate is seeking elective office, and their
respective residences are correctly stated, as above set forth.

Kathleen T. Hewell
(Circulator's Signature)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/8/18
(Name of Circulator) (insert month, day, year)

Sheila M Griffin
(Notary Public's Signature)

(SEAL)



SHEET NO. 2

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER

ST. CHARLES COMM UNIT SCHOOL DISTRICT NUMBER 303 IN KANE + DUPAGE COUNTY, ILLINOIS

We, the undersigned, being (50 or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that KATHLEEN T. HEWELL who resides at 519 WING LANE in the City Village, Unincorporated Area of ST. CHARLES, IL (If unincorporated, list municipality that provides postal service) in Township ST. CHARLES in said district shall be a candidate for the office of SCHOOL BOARD MEMBER of the Board of Education (or Board of Directors) (full term) or (vacancy) to be voted for at the Consolidated Election to be held on APRIL 2, 2019 (date of election).
(If running for an unexpired term state "2 year unexpired term" or "4 year unexpired term"):

If required pursuant to 10 ILCS 5/10-5.1, 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)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. <u>Woodne Griffin</u>			IL	
2. <u>W. Griffin</u>	W. GRIFFIN	3017 GLEN EAGLES	ST. CHARLES IL	KANE
3. <u>Woodson Griffin II</u>	WOODSON GRIFFIN II	3017 GLEN EAGLES	ST. CHARLES IL	KANE
4. <u>Jeffrey Funk</u>	JEFFREY FUNK	536 WING LN.	ST. CHARLES IL	KANE
5. <u>David Rosenberg</u>	David Rosenberg	531 Wing Ln	St. Charles IL	Kane
6. <u>Kelly Rosenberg</u>	Kelly Rosenberg	531 Wing Ln.	St. Charles IL	Kane
7. <u>William D. Hannah</u>	William D. Hannah	543 Wing Ln	St. Charles IL	Kane
8. <u>Meredith A Hannah</u>	Meredith A Hannah	543 Wing Ln	St. Charles IL	Kane
9. <u>Edward M. Marsh</u>	Edward M. Marsh	1711 Allen Lane	St. Charles IL	Kane
10. <u>Carolyn Funke</u>	Carolyn Funke	536 Wing	St. Charles IL	Kane

State of ILLINOIS)
County of KANE) SS.

I, KATHLEEN T. HEWELL (Circulator's Name) do hereby certify that I reside at 519 WING LANE, in the City Village/Unincorporated Area of ST. CHARLES IL (if unincorporated, list municipality that provides postal service) (Zip Code) 60174, County of KANE, State of ILLINOIS

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 than 90 days preceding the last day of 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 registered voters of the political division in which the candidate is seeking elective office, and their respective residences are correctly stated, as above set forth.

Kathleen T. Hewell
(Circulator's Signature)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/8/18.
(Name of Circulator) (Insert month, day, year)

Sheila M Griffin
(Notary Public's Signature)

(SEAL)



SHEET NO. 3

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER

ST. CHARLES COMMUNITY UNIT SCHOOL DISTRICT NUMBER 303 IN KANE & DUPAGE COUNTY, ILLINOIS

We, the undersigned, being (50 or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that KATHLEEN T. HEWELL who resides at 519 WING LANE in the City Village, Unincorporated Area of ST. CHARLES, IL (If unincorporated, list municipality that provides postal service) in Township ST. CHARLES in said district shall be a candidate for the office of SCHOOL BOARD MEMBER of the Board of Education (or Board of Directors) (full term) or (vacancy) to be voted for at the Consolidated Election to be held on APRIL 2, 2019 (date of election).

(If running for an unexpired term state "2 year unexpired term" or "4 year unexpired term"):

If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot)

FORMERLY KNOWN AS UNTIL NAME CHANGED ON

Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of ILLINOIS)
County of KANE)

SS.

I, KATHLEEN T. HEWELL (Circulator's Name) do hereby certify that I reside at 519 WING LANE in the City/Village/Unincorporated Area of ST. CHARLES, IL (if unincorporated, list municipality that provides postal service) (Zip Code) 60174, County of KANE, State of ILLINOIS

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 than 90 days preceding the last day of 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 registered voters of the political division in which the candidate is seeking elective office, and their respective residences are correctly stated, as above set forth.

Kathleen T. Hewell
(Circulator's Signature)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/18/18 (Name of Circulator) (insert month, day, year)

Sheila M Griffin
(Notary Public's Signature)

(SEAL)



SHEET NO. 4

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER

ST. CHARLES COMM SCHOOL DISTRICT NUMBER 303 IN KANE + DUPAGE COUNTY, ILLINOIS

We, the undersigned, being (50 or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that KATHLEEN T. HEWELL who resides at 519 WING LANE in the City, Village, Unincorporated Area of ST. CHARLES, IL (If unincorporated, list municipality that provides postal service) in Township ST. CHARLES in said district shall be a candidate for the office of SCHOOL BOARD MEMBER of the Board of Education (or Board of Directors) (full term) or (vacancy) to be voted for at the Consolidated Election to be held on APRIL 2, 2019 (date of election).
(If running for an unexpired term state "2 year unexpired term" or "4 year unexpired term"):

If required pursuant to 10 ILCS 5/10-5.1, 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)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>Carol Masin</u>	<u>Carol Masin</u>	<u>1863 Allen Ln.</u>	<u>St. C</u> IL	<u>Kane</u>
<u>Joseph Masin</u>	<u>JOSEPH MASIN</u>	<u>1863 ALLEN LN</u>	<u>ST C</u> IL	<u>Kane</u>
<u>Judy Green</u>	<u>Judy Green</u>	<u>1857 Allen Ln</u>	<u>St C</u> IL	<u>Kane</u>
<u>Donald Grimaldi</u>	<u>Donald Grimaldi</u>	<u>1845 Allen Ln</u>	<u>St Charles</u> IL	<u>Kane</u>
<u>Donald Grimaldi</u>	<u>DONALD GRIMALDI</u>	<u>1810 ALLEN LN</u>	<u>ST CHARLES</u> IL	<u>KANE</u>
<u>Jane C. Grimaldi</u>	<u>Jane C. Grimaldi</u>	<u>1810 Allen Ln.</u>	<u>St Charles</u> IL	<u>Kane</u>
<u>Val Kaspar</u>	<u>VAL KASPAR</u>	<u>1778 ALLEN LN</u>	<u>ST. CHARLES</u> IL	<u>Kane</u>
<u>Wallace Long</u>	<u>WALLACE LONG</u>	<u>1722 ALLEN LN</u>	<u>ST CHARLES</u> IL	<u>Kane</u>
<u>April Long</u>	<u>APRIL LONG</u>	<u>1722 ALLEN LN</u>	<u>ST CHARLES</u> IL	<u>KANE</u>
<u>Robert M Walsh</u>	<u>Robert M Walsh</u>	<u>518 Wing Ln</u>	<u>St Charles</u> IL	<u>KANE</u>

State of ILLINOIS)
County of KANE) SS.

I, KATHLEEN T. HEWELL (Circulator's Name) do hereby certify that I reside at 519 WING LANE, in the City/Village/Unincorporated Area of ST. CHARLES IL (if unincorporated, list municipality that provides postal service) (Zip Code) 60174, County of KANE, State of ILLINOIS

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 than 90 days preceding the last day of 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 registered voters of the political division in which the candidate is seeking elective office, and their respective residences are correctly stated, as above set forth.

Kathleen T. Hewell
(Circulator's Signature)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/18/18
(Name of Circulator) (Insert month, day, year)

(SEAL)



Sheila M Griffin
(Notary Public's Signature)

NO. 5

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER
ST. CHARLES COMM UNIT SCHOOL DISTRICT NUMBER 303 IN KANE & DUPAGE COUNTY, ILLINOIS

We, the undersigned, being (50 or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that
KATHLEEN T. HEWELL who resides at 519 WING LANE in the (City), Village, Unincorporated Area
of ST. CHARLES, IL (If unincorporated, list municipality that provides postal service) in Township ST. CHARLES in said
district shall be a candidate for the office of SCHOOL BOARD MEMBER of the Board of Education (or Board of Directors) (full term) or
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FORMERLY KNOWN AS _____ UNTIL NAME CHANGED ON _____
(List all names during last 3 years) (List date of each name change)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. <i>Erika Schiffbauer</i>	Erika Schiffbauer	542 Wing Ln	St. Charles, IL	Kane
2. <i>Tim Schiffbauer</i>	Tim Schiffbauer	542 Wing Lane	St. Charles, IL	Kane
3. <i>Susan Kersey</i>	Susan Kersey	500 Wing Lane	St. Charles, IL	Kane
4. <i>Maria C. Gullman</i>	Maria C. Gullman	511 Post Rd.	St. Charles, IL	Kane
5. <i>James M. Kane</i>	JAMES M. KANE	505 Post Rd	ST. CHARLES, IL	KANE
6. <i>Marimae J. Kane</i>	JAMES MARIMAE	505 Post Rd.	ST. CHARLES, IL	Kane
7. <i>Greg Schildmeyer</i>	GREG SCHILDMAYER	517 POST RD	ST. CHARLES, IL	KANE
8. <i>Jill Schildmeyer</i>	JILL SCHILDMAYER	517 Post Rd	St. Charles, IL	Kane
9. <i>Paul Gullman</i>	Paul Gullman	507 Wing Lane	St. Charles, IL	Kane
10. <i>Diane Gullman</i>	Diane Gullman	507 Wing Lane	St. Charles, IL	Kane

State of ILLINOIS)
County of KANE) SS.

I, KATHLEEN T. HEWELL (Circulator's Name) do hereby certify that I reside at 519 WING LANE, in the
(City/Village/Unincorporated Area of ST. CHARLES (if unincorporated, list municipality that provides postal service) (Zip

Code) 60174, County of KANE, State of ILLINOIS 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 than 90 days preceding the last day of 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 registered voters of the political division in which the candidate is seeking elective office, and their respective residences are correctly stated, as above set forth.

Kathleen T. Hewell

(Circulator's Signature)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/8/2018
(Name of Circulator) (Insert month, day, year)

Sheila M Griffin

(Notary Public's Signature)

(SEAL)



ST NO. 6

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER
ST. CHARLES COMM UNIT SCHOOL DISTRICT NUMBER 303 IN KANE & DUPAGE COUNTY, ILLINOIS

We, the undersigned, being (50 or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that
KATHLEEN T. HEWELL who resides at 519 WING LANE in the City Village, Unincorporated Area
of ST. CHARLES, IL (If unincorporated, list municipality that provides postal service) in Township ST. CHARLES in said
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(vacancy) to be voted for at the Consolidated Election to be held on APRIL 2, 2019 (date of election).

(If running for an unexpired term state "2 year unexpired term" or "4 year unexpired term"):

If required pursuant to 10 ILCS 5/10-5.1, 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)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>Catherine Norris</u>	Catherine Norris	534 Longmeadow Circle	St. Charles, IL	Kane
<u>John Norris</u>	John Norris	534 Longmeadow Circle	St. Charles, IL	Kane
<u>Chad Eskeli</u>	Chad Eskeli	526 Longmeadow	St. Charles, IL	Kane
<u>Kim Eskeli</u>	Kim Eskeli	526 Longmeadow	St. Charles, IL	Kane
<u>Gregory Hague</u>	Gregory Hague	532 Longmeadow	St. Charles, IL	Kane
<u>house Hague</u>	house Hague	" "	" "	" "
<u>Steve Thorne</u>	STEVE THORNE	538 Longmeadow Cr	St. Charles, IL	Kane
<u>Suzanne Thorne</u>	Suzanne Thorne	538 Longmeadow Cir	STC, IL	Kane
			, IL	
			, IL	

State of ILLINOIS)
County of KANE) SS.

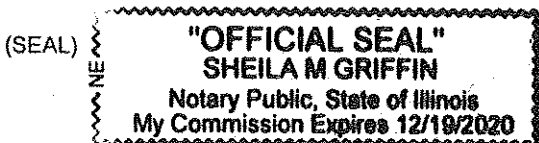
I, KATHLEEN T. HEWELL (Circulator's Name) do hereby certify that I reside at 519 WING LANE, in the
City/Village/Unincorporated Area of ST. CHARLES IL (if unincorporated, list municipality that provides postal service) (Zip

Code) 60174, County of KANE, State of ILLINOIS 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 than 90 days preceding the last day of 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 registered voters of the political division in which the candidate is seeking elective office, and their
respective residences are correctly stated, as above set forth.

Kathleen T. Hewell
(Circulator's Signature)

Signed and sworn to (or affirmed) by KATHLEEN T. HEWELL before me, on 12/8/18
(Name of Circulator) (insert month, day, year)

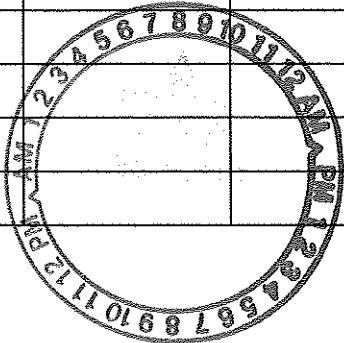
Sheila M Griffin
(Notary Public's Signature)



CERTIFICATION OF DELETIONS

I, KATHLEEN T. HEWELL, Candidate or Circulator (circle one) do hereby certify that I have properly initialed the deletions of signatures, listed hereinafter by page and line numbers, from the petition of KATHLEEN T. HEWELL (Name of Candidate) who is a candidate for election or nomination (circle one) to the office of SCHOOL BOARD MEMBER at the CONSOLIDATED Election to be held on APRIL 2, 2019 (date of election).

Page No.	Line No.	Page No.	Line No.	Page No.	Line No.
2	8				
7	6				



Kathleen T. Hewell
 (Signature of Person Deleting Signatures)

Only the person circulating the petition, or the candidate on whose behalf the petition is circulated, may strike any signature from the petition. If deletions are made, this **CERTIFICATION OF DELETIONS** shall be filed as part of the petition.