

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 17, 2020 - 2020 General Primary.

Receipt For: Kathleen Newcomb
163 Maureen Dr
Elgin, IL 60123

Filed: November 25, 2019 at 11:33:00 AM.

Office: FOR PRECINCT COMMITTEEPERSON, 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 from: _____

Howard R. Katz

By: _____

Yvonne Tarizon
Deputy Clerk

John A. Cunningham - Kane County Clerk

Name and Title of Local Clerk/Secretary

Printed: 11/25/2019 11:35:00AM

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: _____

11-25-19

Howard R. Katz
Signature of Candidate or Agent

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
Kathleen Newcomb	163 Maureen Dr. Elgin, IL 60123	PRECINCT COMMITTEE PERSON <small>A Full Term is sought, unless an unexpired term is stated here: ___ year unexpired term</small>	ELGIN	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)

RECEIVED
 2019 MAR 05 11:33
 KANE COUNTY CLERK

STATE OF ILLINOIS)
 County of Kane) SS.

I, Kathleen Newcomb (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 163 Maureen Dr. in the City, Village, Unincorporated Area of ELGIN (if unincorporated, list municipality that provides postal service) Zip Code 60123, 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 COMMITTEE PERSON in the 43rd District, to be voted upon at the primary election to be held on MARCH 17, 2020 (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.

Kathleen Newcomb
Kathleen Newcomb
 (Signature of Candidate)

Signed and sworn to (or affirmed) by Kathleen Newcomb before me, on 11-19-19
(Name of Candidate) (insert month, day, year)

OFFICIAL SEAL
 Howard R. Katz
 NOTARY PUBLIC, STATE OF ILLINOIS
 My Commission Expires 7-17-2022
 (SEAL)

Howard R. Katz
 (Notary Public's Signature)

PRECINCT COMMITTEEPERSON PRIMARY PETITION

We, the undersigned, members of and affiliated with the DEMOCRATIC Party and qualified primary electors of the DEMOCRATIC Party, in ELGIN (township name and precinct number) in the County KANE, State of Illinois, do hereby petition that Kathleen Newcomb who resides 163 Maureen Dr. in the City, Village, Unincorporated Area of ELGIN (if unincorporated, list municipality that provides postal service) Zip Code 60123, County of KANE and State of Illinois, shall be a candidate of the DEMOCRATIC Party for election to the office of **PRECINCT COMMITTEEPERSON**, for ELGIN 43 (township name and precinct number), to be voted for at the primary election to be held on March 17, 2020 (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)

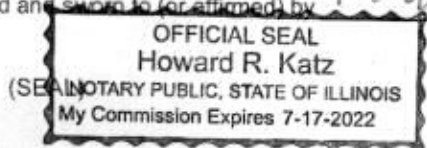
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>Jane Murszewick</u>	<u>Jane Murszewick</u>	<u>1611 Alison Dr.</u>	<u>Elgin IL</u>	<u>Kane</u>
<u>Jose Gutierrez</u>	<u>Jose Gutierrez</u>	<u>1630 Alison Dr</u>	<u>Elgin IL</u>	<u>Kane</u>
<u>James H. Daniels</u>	<u>JAMES H. DANIELS</u>	<u>1651 ALISON DR.</u>	<u>ELGIN IL</u>	<u>KANE</u>
<u>Roy E. Prince</u>	<u>ROY E. PRINCE</u>	<u>50 N JANE DR</u>	<u>ELGIN IL</u>	<u>KANE</u>
<u>Katie Ebert</u>	<u>Katie Ebert</u>	<u>50 North Jane Dr</u>	<u>Elgin IL</u>	<u>Kane</u>
<u>Carol Panaderos</u>	<u>CAROL PANADEROS</u>	<u>50 N JANE DR</u>	<u>ELGIN IL</u>	<u>KANE</u>
<u>Larry Boller</u>	<u>Larry Boller</u>	<u>605 JANE DRIVE</u>	<u>ELGIN IL</u>	<u>KANE</u>
<u>Kay K...</u>	<u>Kay K...</u>	<u>1689 Luntor</u>	<u>Elgin IL</u>	<u>Kane</u>
<u>Barbara Alleton</u>	<u>Barbara Alleton</u>	<u>151 Pauline</u>	<u>Elgin IL</u>	<u>Kane</u>

State of Illinois)
 County of Kane) SS.

I, Kathleen Newcomb (Circulator's Name) do hereby certify that I reside at 163 Maureen Dr in the City/Village/Unincorporated Area of Elgin (if unincorporated, list municipality that provides postal service)(Zip Code) 60123. County of Kane, State of Ill 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 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 candidates is seeking nomination/elective office, and that their respective residences are correctly stated, as above set forth.

Kathleen Newcomb
 (Circulator's Signature)

Signed and sworn to (or affirmed) by Kathleen Newcomb before me, on 11-19-19
 (Name of Circulator) (Insert month, day, year)



Howard R. Katz
 (Notary Public's Signature)

PRECINCT COMMITTEEPERSON PRIMARY PETITION

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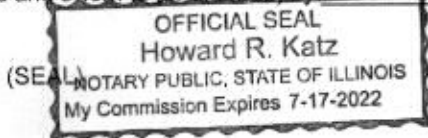
Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of handwritten entries.

State of Illinois) County of Kane) SS.

I, Kathleen Newcomb (Circulator's Name) do hereby certify that I reside at 163 Maureen Dr, in the City/Village/Unincorporated Area of Elgin (if unincorporated, list municipality that provides postal service)(Zip Code) 60123, County of Kane, State of Ill 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 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 petitioner qualified voters of the Democratic 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.

Kathleen Newcomb (Circulator's Signature)

Signed and sworn to (or affirmed) by Kathleen Newcomb before me, on 11-19-19 (Name of Circulator) (Insert month, day, year)



Howard R. Katz (Notary Public's Signature)

