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:	
	1444 Spring Leaf Dundee, IL 60118
Filed: Decemb	per 2, 2019 at 1:27:00 PM.
Office: FOR F	PRECINCT COMMITTEEPERSON, Dundee 31 Party: Democratic
The following	have been received:
✓	Statement of Candidacy
\$	Loyalty Oath
_/	Petition Pages /- 2
	Receipt for Economic Interest Statement (EIS)
Received fro	Devin McCrate
1	By: Deputy Clerk
	50 30 50
	Name and Title of Local Clerk/Secretary
	Name and Title of Local Clerk/Secretary
Printed: 12/2/2019	1:27:31PM
	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.

Signature of Candidate or Agent

PRECINCT COMMITTEEPERSON PRIMARY PETITION

We, the undersigned, members of			qualified primary	
	inDUNDEE 31	(township name and pr	recinct number) in	the County of
	nois, do hereby petition th		***	ho resides at
1444 SPRING LEAF		orporated Area ofWEST DUI	NDEE (if uni	ncorporated, list
	tion to the office of PRECINCT C	OMMITTEEPERSON, for	of Illinois, shall be a DUNDEE 31	candidate of the (township
name and precinct number), to be vote	ed for at the primary election to be	e held onMARCH 17, 2020(da	ate of election).	
If required pursuant to 10 ILCS 5/7-10.2, cor	molete the following (this information)	will appear on the hallot\		
FORMERLY KNOWN AS		INTIL NAME CHANGED ON		
(List all names during last 3 years)		f each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1 All Paran		971 Angle TARN	W. Dunter IL	KANE
2 D. M. alter		971 Angle TARN 829 ROYAL LV.	,lL	Kane
Eller		11	ال ار	11
J. Brog		860 VILLAGS DIK	WOWOEZE	KANG
5. 9 Dedon		894 Village Ote	W Druste"	Kane
6. PWARPERUN,	P.WARFIEN	681 LINDSKYCT	W Puse!	KARE
Thirted. Him	LINDA M. HOSE	e 1540 TARTANS 9	W. DUNDEE	KANE
8. John Llises	JUHN HISER	1540 11 10	W.D. IL	KAN
· was	Cathran Sarsan	Y 1422 Ange Tarn	W.D."	
10 Conto Oral	ROBO WELL	1403 Augle TARN	W. Dustre "	Kave
State of Illinois	3			
County of Kare	- { ss.			
Devin Mercita	— <i>'</i>	HAM SOL	h 1. (
City/Village/Unincorporated Area of U		y certify that I reside at 1444 5gg		, in the
, and the 2 to		orporated, list municipality that provide of age or older (or 17 years of age and		
a citizen of the United States and that				
filing of the petitions and are genuine a				하는 아이는 이 아이들은 사람이 되는 것이 아니는 사람이 되었다.
qualified voters of the Danier		division in which the candidates is se		2 2 12
that their respective residences are con	[일본] [19] [19] [19] [19] [19] [19] [19] [19	2		
		- Me	- President	
T	Devin Mc Crate	Circulator	s Signature)	
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on	month, day, year)	
(SEACHISE A DULMAGE BERAN	(Name of Circulator)	(O ₀ 0 (O)	1 D.	
Villicial Stal	1	(Notary Pu	blic's signature)	
Notary Public - State of Illinois My Commission Expires Aug 3, 202	0	l l		
	SHEET NO.			

PRECINCT COMMITTEEPERSON PRIMARY PETITION

KANE State of Illino	ois, do hereby petition that in the City, Village, Unincor	porated Area ofWEST DU	NDEE (if unit	no resides a ncorporated, li
nunicipality that provides postal service) DEMOCRATIC Party for election	Zip Code 60118 County on to the office of PRECINCT CO	f KANE and State	e of Illinois, shall be a DUNDEE 31	candidate of th
name and precinct number), to be voted	for at the primary election to be	held onMARCH 17, 2020 (d	late of election).	
required pursuant to 10 ILCS 5/7-10.2, com FORMERLY KNOWN AS(L		TIL NAME CHANGED ON	of each name change)	
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. M	Devin Mc Crate	1444 Spring Leaf	west in I	Kane
2. Muyate	Devin McCrate Kerry McCrate	1444 spring Leaf	W. Dunder"	Kum
3.			,L	
4.			,íL	
5.			,lL	
6.			,IL	
7.			,IL	40000
8.			,IL	
9.			,IL	
10.			,IL	
ounty of Kane Devin McCrafe		certify that I reside at 1444 5	priy Leaf	in 1
ity/Village/Unincorporated Area of ω		rporated, list municipality that provid If age or older (or 17 years of age ar		
citizen of the United States, and that			93	59
ling of the petitions and are genuine ar ualified voters of the Democrad	[1] [10명 (1997년) - [10명 (1997년) (1997년) [17	ge and belief the persons so signing division in which the candidates is a		
nat their respective residences are com		D &	seeking Normination ven	scove onice, a
Signed and sworn to (or affirmed) by	Devin McCrate	before me, on	12/2015	Name of the agent according
-	(Name of Circulator)		t month, day, year)	
(SEAD) NISE A DULMAGE BERAN Official Seal	Š.	(Notary F	Public's Signature)	$\overline{}$
Notary Public - State of Illinois My Commission Expires Aug 3, 202	SHEET NO.	7		

Suggested Revised March, 2019 SBE No. P-1

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
DEVIN MCCRATE	1444 SPRING LEAF WEST DUNDEE, IL 60118	PRECINCT COMMITTEEPERS ON	DUNDEE 31	DEMOCRAT C
		A Full Term is sought, unless an unexpired term is stated here: year unexpired term		English (p. 141) and the english of the control

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) STATE OF ILLINOIS SS. Kane County of DEVIN MCCRATE (Name of Candidate) being first duly sworn (or affirmed), say that I 1444 SPRING LEAF reside Village. Unincorporated WEST DUNDEE (if unincorporated, list municipality that provides postal service) Zip Code KANE the County of , State of Illinois; that I am a qualified voter therein and am a qualified Primary DEMOCRATIC voter of the Party; that I am a candidate for Nomination/Election to the office of PRECINCT COMMITTEEPERSON 31 District, to be voted upon at the primary election to be held 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 DEMOCRATIC Governmental Ethics Act and I hereby request that my name be printed upon the official (Name of Party) Primary ballot for Nomination/Election for such office. (Signature of Candidate) Signed and sworn to (or affirmed) by (Name of Candidate) DENISE A DULMAGE BERAN Official Seal Notary Public - State of Illinois My Commission Expires Aug 3, 2020 (SEAL) (Notary Public's Signature)