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 6, 2021 - 2021 Consolidated Election.

Receipt For: Heidi J. Fairgrieve 37W340 Red Gate Rd St Charles, IL 60175 Filed: December 14, 2020 at 9:14:00 AM. Office: FOR MEMBERS OF THE BOARD OF ED. TO SERVE A FULL SB 303 4-YEAR TERM Party: Non-Partisan The following have been received: Statement of Candidacy Loyalty Oath Petition Pages 1-8 Receipt for Economic Interest Statement (EIS) Received from: Heidi J. Fairgrieve John A. Cunningham - Kane County Clerk Name and Title of Local Clerk/Secretary Printed: 12/14/2020 9:21:17AM 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: 12-14-2020

Suggested Revised March 2020 SBE No. P-1A

STATEMENT OF CANDIDACY

NONPARTISAN

NAME:	OFFICE:
Heidi J Fairgrieve	School Doard IV lember A Full Term is sought, unless an unexpired term is stated here:year unexpired term
ADDRESS – ZIP CODE: 37W340 Red Gate Road 60175	CITY. VILLAGE OR SPECIAL DISTRICT: Saint Charles
If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the	
FORMERLY KNOWN AS UN (List all names during last 3 years)	(List date of each name change)
STATE OF ILLINOIS) County of Kane)	RECEIVED
Heidi J Fairgrieve bei	ng first duly sworn (or affirmed), say that I reside at
37W340 Red Gate Rd, in the City, Village, U	nincorporated Area of Saint Charles
(if unincorporated, list municipality that provides postal service)	Zip Code 60175 , in the County of alified voter therein, that I am a candidate for Nomination/
Election to the office of School Board Member	in the Saint Charles (Name of City, Village or Special District)
to be voted upon at the election to be held on April 6, 202	•
	ose of the petition filing period) a Statement of Economic Interests
as required by the Illinois Governmental Ethics Act and I here	eby request that my name be printed upon the official ballot for
Nomination/Election to such office.	(Signature of Candidate)
Signed and sworn to (or affirmed) by Heidi J Fairgrie (Name of Candida	before me, on 12/12/2020 (insert month, day, year)
(SEAL) "OFFICIAL SEAL" JULIET GABER Notary Public, State of Illinois My commission expires 06/29/23	Gult Selon (Notary Public's Signature)

ATTACH TO DETITION	
ATTACH TO PETITION	
All Indii i di milioni	-

10 ILCS 5/7-10.1

(SEAL)

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

LOYALTY OATH (OPTIONAL)

United States of America)	SS.		
State of Illinois)	00.		
, Heidi J Fair	grieve	, do	swear (or affirm) that I am	a citizen of the
United States and the State of II	linois, that I	am not affiliated	directly or indirectly with	any communist
organization or any communist fr	ont organiza	ation, or any forei	gn political agency, party,	organization or
government which advocates the	overthrow	of constitutional	government by force or o	ther means not
permitted under the Constitution of	f the United	States or the Cons	stitution of this State; that I	do not directly or
indirectly teach or advocate the o	verthrow of	the government of	of the United States or of t	his State or any
unlawful change in the form of the	governmen	ts thereof by force	or any unlawful means.	
			(Signature of Ca	Auf Hull
				X
Signed and sworn to (or a	offirmed) by	Heidi J F	airgrieve	before me,
		(Name	e of Candidate)	
on 12/12/2020	_,			1
(insert month, day, year)	"OFFICIAL S JULIET GA y Public, Stat	BER	July (Notary Public	Signature)

X...BIND HERE...X

Suggested Revised March 2019

SBE No. P-7 PETITION FOR NOMINATION TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER IN Kane SCHOOL DISTRICT NUMBER 303 COUNTY, ILLINOIS or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that who resides at _____ in the City, Village, Unincorporated Are We, the undersigned, being who resides at _____ in the City, Village, Unincorporated Area (If unincorporated, list municipality that provides postal service) in Township _____ in the City, Village, Unincorporated Area _____ in said Heidi J Fairgrieve Saint Charles district shall be a candidate for the office of School Board Member of the Board of Education (or Board of Directors) (full term) or 40ril6,2021 _ (date of election). (vacancy) to be voted for at the Consolidated Election to be held on year unexpired term A Full Term is sought, unless an unexpired term is stated here: If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot) UNTIL NAME CHANGED ON FORMERLY KNOWN AS (List all names during last 3 years) (List date of each name change) STREET ADDRESS OR CITY, TOWN OR VOTER'S PRINTED NAME COUNTY VILLAGE RR NUMBER (VOTER'S SIGNATURE) NAME (optional) 5. o meword St. Chas en Dr. 56. Charle State of SS (Circulator's Name) do hereby certify that I reside at 7N461 Homeward (if unincorporated, list municipality that provides postal service) (Zip City/Village/Unincorporated Area of LLINOIS Code) [0017 that I am 18 years of age or older (or 17 years of State of , County 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. (Circulator's Signature) 12/12/20

(SEAL)

Signed and sworn to (or affirmed) by

"OFFICIAL SEAL" JULIET GABER Notary Public, State of Illinois My commission expires 06/29/23 (Notary Public's Signature)

(Insert month, day, year)

before me: on

SHEET NO.

(Name of Circulator)

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER IN Kane SCHOOL DISTRICT NUMBER 303 COUNTY, ILLINOIS or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that who resides at 37W340 Red Gate Rd in the City, Village, Unincorporated Are We, the undersigned, being who resides at ______in the City, Village, Unincorporated Area

(If unincorporated, list municipality that provides postal service) in Township ______in the City, Village, Unincorporated Area
in said Heidi J Fairgrieve Saint Charles district shall be a candidate for the office of School Board Member of the Board of Education (or Board of Directors) (full term) or (date of election). Apri (vacancy) to be voted for at the Consolidated Election to be held on year unexpired term A Full Term is sought, unless an unexpired term is stated here: If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot) UNTIL NAME CHANGED ON FORMERLY KNOWN AS (List date of each name change) (List all names during last 3 years) CITY, TOWN OR STREET ADDRESS OR NAME VOTER'S PRINTED COUNTY VILLAGE RR NUMBER (VOTER'S SIGNATURE) NAME (optional) Heartland Cane 2 3. A SS. LLAHW(Circulator's Name) do hereby certify that I reside at 370 City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip ane Code) 60175, County of MOLC State of 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. (Circulator's Signature allaneve before me, on (Insert month, day, year) (Name of Circulator)

(SEAL)

"OFFICIAL SEAL"
JULIET GABER
Notary Public, State of Illinois
My commission expires 06/29/23

SHEET NO. 2

(Notary Public's Signature)

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER IN Kane SCHOOL DISTRICT NUMBER 303 COUNTY, ILLINOIS or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that who resides at 37W340 Red Gate Rd in the City Village Unincorporated Are We, the undersigned, being Heidi J Fairgrieve in the City, Village, Unincorporated Area who resides at (If unincorporated, list municipality that provides postal service) in Township Saint Charles Saint Charles district shall be a candidate for the office of School Board Member of the Board of Education (or Board of Directors) (full term) or 6,2021 _ (date of election). OM (vacancy) to be voted for at the Consolidated Election to be held on year unexpired term A Full Term is sought, unless an unexpired term is stated here: If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot) UNTIL NAME CHANGED ON FORMERLY KNOWN AS (List date of each name change) (List all names during last 3 years) STREET ADDRESS OR CITY, TOWN OR NAME VOTER'S PRINTED COUNTY VILLAGE RR NUMBER (VOTER'S SIGNATURE) NAME (optional) 6N307 Old Homestad St Charles ane gaber 3. 5. 6 7. 8. 9. SS. TOPLE OCICCUlator's Name) do hereby certify that I reside at 311 City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip ane Code) OD 15, County of State of_ 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. (Circulat taingneve becomb e before me, on (Insert month, day, year) "OFFICIAL SEAL" (SEAL) JULIET GABER (Notary Public's Signature)

Notary Public, State of Illinois My commission expires 06/29/23

SHEET NO.

SBE No. P-7

Saint Charles SCHOO	L DISTRICT NUMBER 30	3 IN Kane	COUNT	Y, ILLINOIS
We, the undersigned, being (or more) (or 10% or more) (or 5° 37W340	% or more) of the voters residing wit Red Gate Rd in t	ne City, Village, Uninc	
of Saint Charles (If unin	corporated, list municipality that	provides postal service) in Township	Saint Charles	in said
district shall be a candidate for the office	of School Board Member	of the Board of Education (o	Board of Directors) (full term) or
(vacancy) to be voted for at the Consolidation	ated Election to be held on	prillo, 2021 (date of el	ection).	
A Full Term is sought, unless an unex If required pursuant to 10 ILCS 5/ FORMERLY KNOWN AS	10-5.1, complete the following (this in	year unexpired term formation will appear on the ballot) TIL NAME CHANGED ON		
(List	all names during last 3 years)	(List date o	f each name change)	
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
mana	Michelle Cesile	41 WW3 SaldlebrokD1	Campton :115	Kance
A. Mariello	Kathleen Granz	x 110 waterside Dr	Southelsin	Kane
The state of the s	Mark Husen	110 Harrisine DR	South Ager "	Kono
4.	Dovid ROTZ	SN74 Leda LN	St. Chris	Kone
(Kobert tack	Roberta RachL	610 Steeplechage R	L St Charles	Kane
Mohael Backl	MICHAEL RAEHL	610 STEEPLECHASE)	OST CHARLES	KAME
Hancy @ Depsley	NANCY A HENSLE	LOG STEEPLECHA	F RO. STOHA	RLES KAN
8.	STEPE HENSLEY	609 STEEPLECHASE RD	ST. CHARLES	KANE
(Sture	SHERRI PING	L ZITOS COURL	STUNE	5 KAI
Buja Poleg	Ben Rinker	2704 Royal Kings Ct	St. Charks"	Kane
State of Illinois	_) _)			
County of Kane	_)		, Q , A	. 21
. Heide Fairgrie	Circulator's Name) do hereby	certify that I reside at $37 \omega 3^{\circ}$	to Hedla	tend in the
City/Village/Unincorporated Area of	Saint Charles	(if unincorporated, list municipalit	y that provides postal	service) (Zip
Code) CD175 County of age and qualified to vote in Illinois), that more than 90 days preceding the last days signing were at the time of signing the prespective residences are correctly state	ay of filing of the petitions and are petition registered voters of the p	es, and that the signatures on this se genuine and that to the best of my	knowledge and belie	ny presence, no of the persons s
respective residences are correctly state	u, as above set totul.	Widi (Circulato	alfulu r's Signature)	C
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on Decon	sert month, day, year)	0
(SEAL) "OFFICIAL SEAL" JULIET GABER		Guls (Notary P	Jahn ublic's Signature)	
Notary Public, State of III My commission expires 06/2		4	**************************************	

X...BIND HERE...X

Suggested Revised March 2019 SBE No. P-7

PETITION FOR NOMINATION

	DISTRICT NUMBER 303			
Ne, the undersigned, being (o Heidi J Fairgrieve	who resides at 37W340	% or more) of the voters residing with Red Gate Rd in the	e City, Village, Uninc	
Saint Charles (If uninco	orporated, list municipality that p	provides postal service) in Township	Saint 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 Consolidate		Pril 6, 2021 (date of ele	ection).	
A Full Term is sought, unless an unexpi If required pursuant to 10 ILCS 5/10 FORMERLY KNOWN AS	1-5.1, complete the following (this int	year unexpired term formation will appear on the ballot) FIL NAME CHANGED ON		
(List a	I names during last 3 years)	(List date of	each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR VILLAGE	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	11227102	
1. Joseph Bloo	Joseph Brusko	643 LAKERIDER DR	SOUTH ILLCON	KAN
Eusko Busko	Lynore Brusko	643 Lakeridge Dr	South Elgin	Kane
3. Elizabeth JHolomb	Elizabeth L. Holans	5N850 BakerHillnd	St. Chars "	Kane
4. Karas Jolyanh	Kava Holcomb	5N850 Baker Hill A	St. chaule's	Kaine
5. 1 25 12	Tracy Granzyk	36W80Z Red Gate Ct.	St. Charles it	Vane
6. MMGrany	Megan Granzyk	36W818 Red Gate Ct	St Charles"	Kane
" Som Jung	STEVE GRANZYK	764818 Roll Gate Ct	St Charles	KANE
"implim	Ann Wing	2073 Lilyland Ln.	S.Elgin "	Kane
"Nan &B"	Jamie OBrie	385 Deiton In.	S. Elgin "	Kene
20 tapling	Danelle Harplin	35 Denton Lane	S. Elgin	Kone
State of Illinois)) SS.		V	
County of Kare	(Ο . A .	0.
Heidel Fairgrieve	(Circulator's Name) do hereby	certify that I reside at 37,00340	Hedlate	that, in the
City/Village/Unincorporated Area of	aint Charles	(if unincorporated, list municipality	that provides postal	service) (Zip
Code) 0175, County of age and qualified to vote in Illinois), that I more than 90 days preceding the last day signing were at the time of signing the perespective residences are correctly stated,	am a citizen of the United State of filing of the petitions and are tition registered voters of the po	es, and that the signatures on this shapen genuine and that to the best of my	knowledge and belie	ny presence, no f the persons so
respective residences are correctly stated,	as above ser rorun.	Old (Circulator	S Signature	£
Signed and sworn to (or affirmed) by He	(Name of Circulator)	before me, on Decemb	er 13 2020 ert month (day year))
Carried Control		\sim . ()	0.1	

TO THE COUNTY CLERK OR CO				
	DISTRICT NUMBER 303			Y, ILLINOIS
Heidi J Fairgrieve	who resides at 37W340	% or more) of the voters residing with Red Gate Rd in the	e City, Village, Uninc	
Saint Charles (If uninc	orporated, list municipality that p	provides postal service) in Township	Saint 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 Consolidate	and the second s	pril 6, 202 (date of ele	ection).	
A Full Term is sought, unless an unexpi If required pursuant to 10 ILCS 5/10	0-5.1, complete the following (this int			
FORMERLY KNOWN AS(List a	Il names during last 3 years)	FIL NAME CHANGED ON(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	
1	DAVID RINKER	2704 ROYALKINGS Cq	STCHARLES	KANE
Jagget L	Dambet rel	2706 Rosal	STUAS	Kane
3CAN 1	Justin Well	Kingo Ct	StClan	lane
(4.	FRIN GRUNZKE	2607 Tumbony	STC "	Dane
5- Hami Dakyous	Laurielvons	4650 Grandfield Dr	StC "	Kane
6. 1 12000 11 13	7		,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	
state of Illinois county of Kare)) SS.) (Circulator's Name) do hereby	certify that I reside at <u>37</u> <u></u>	o Red Coat	ekd in the
City/Village/Unincorporated Area of	aint Charles	(if unincorporated, list municipality	y that provides posta	service) (Zip
Code) County of age and qualified to vote in Illinois), that I more than 90 days preceding the last day signing were at the time of signing the perespective residences are correctly stated,	of filing of the petitions and are tition registered voters of the po	es, and that the signatures on this she genuine and that to the best of my	knowledge and belie	my presence, not of the persons so
Signed and sworn to (or affirmed) by	eldi J Fairgner	re before me, on Decen	's Signature) Sev 12 ert month, day, year)	eve , 2020
(SEAL) "OFFICIAL SEAL" JULIET GABER Notary Public, State of III My commission expires 06/	linois	(Notary Pt	ublic's Signature)	

SBE No. P-7

Saint Charles SCHOOL	. DISTRICT NUMBER $\frac{30}{100}$	3_ _{IN} Kane	COUNT	Y, ILLINOIS
Heidi J Fairgrieve	or more) (or 10% or more) (or 5° who resides at	% or more) of the voters residing with Red Gate Rd in the	nin said district, hereb ne City, Village, Uninc	
Saint Charles (If uninc	corporated, list municipality that i	provides postal service) in Township	Saint 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 Consolidat	11	0H) 6.2021 (date of ele		
Full Term is sought, unless an unexp		year unexpired term formation will appear on the ballot)		
FORMERLY KNOWN AS	UN ⁻	TIL NAME CHANGED ON	each same abanga)	
NAME (List a	all names during last 3 years) VOTER'S PRINTED	STREET ADDRESS OR	each name change) CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1.	Rocid Overeya	390 Ven Da Lani	Kane L	7
2. January Thou	Jennifer Fetzer	2082 Holt In Decky	5. Elgin IL	Kane
3 Collegion OSMIN	Flizabeth Dany	2070 Lily Pond La.	S. Elain."	Kane
4. Mendill Homes	Meredit Hauses	South Elein, Il 6017	S- Elpin"	Keme
5. Collen Lang	Colleen Kowalay	370 RobinGlent	S. E/5 12	Kanl
6.	Patrick Hauson	South Elan IL 60177	S. Elgin ,IL	Kane
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	
State of Illinois)) SS.			
County of Kane) 33.		\bigcirc \land	\circ
Heidil Fairgrieve	(Circulator's Name) do hereby	certify that I reside at 370034	O Ked Cat	e-Kal in the
City/Village/Unincorporated Area of	aint Charles	(if unincorporated, list municipality	that provides posta	service) (Zip
code) 6175, County of Hans	e, State of		years of age or old	
age and qualified to vote in Illinois), that I more than 90 days preceding the last day signing were at the time of signing the perespective residences are correctly stated	of filing of the petitions and are etition registered voters of the pe	e genuine and that to the best of my	knowledge and belie	of the persons
,	,	Loidi	ALLY AUC 's Signature)	a
Signed and sworn to (or affirmed) by H	(Name of Circulator)	before me, on(Ins	ert month, day, year)	2020
(SEAL) "OFFICIAL SE JULIET GABI	AL"	Onla	081	

Suggested Revised March 2019 SBE No. P-7

PETITION FOR NOMINATION

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER IN Kane SCHOOL DISTRICT NUMBER 303 **COUNTY, ILLINOIS** 50 or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that who resides at 37W340 Red Gate Rd in the City, Village, Unincorporated Are We, the undersigned, being who resides at ______in the City, Village, Unincorporated Area

(If unincorporated, list municipality that provides postal service) in Township Saint Charles ______in said Heidi J Fairgrieve Saint Charles district shall be a candidate for the office of School Board Member of the Board of Education (or Board of Directors) (full term) or 6, 2021 (date of election). April (vacancy) to be voted for at the Consolidated Election to be held on year unexpired term A Full Term is sought, unless an unexpired term is stated here: 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 date of each name change) (List all names during last 3 years) STREET ADDRESS OR CITY, TOWN OR NAME VOTER'S PRINTED COUNTY VILLAGE (VOTER'S SIGNATURE) RR NUMBER NAME (optional) ,IL 5000 valcussell une ,IL 2. 3. ,IL 4. ,IL 1 O FILL 5. 6. .IL 7. .IL-8. JL: 9. ,IL U 10. ,IL TILINOIS SS. QUALIVE (Circulator's Name) do hereby certify that I reside at 37W340 City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip 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. (Circulato Heidi J rieve before me, on (Insert month, day, year) "OFFICIAL SEAL"
JULIET GABER (SEAL (Notary Public's Signature) Notary Public, State of Illinois My commission expires 06/29/23

SHEET NO.

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 Boa	rd Member	=
(office or position of emplo	syment for which this Statement is file	d)
Heidi J Fai		
37W340 Kg. Address	d Coate Road	
H. Charles	IL	60175
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

RECEIVED AND FILED ON: DEC 1 4 2020

KANE COUNTY CLERK

PECEIVED
2020 DE 14 AM 9: 14

Phacemonylor