COUNTY OF KANE

John A. Cunningham KANE COUNTY CLERK 719 S. Batavia Ave., Bldg. B Geneva, IL 60134



Phone: (630) 232-5990 Fax: (630) 232-5870 www.kanecountyelections.org

Receipt for Nominating Petition April 6, 2021 - 2021 Consolidated Election.

Receipt For:	Kim Withycombe
	2968 Talaga Dr.
	Algonquin, IL 60102
Filed: Decemb	per 17, 2020 at 10:07:00 AM.
Office: FOR M Party: Non	MEMBERS OF THE BOARD OF EDUCATION TO SERVE A FULL 4-YEAR TERM
The following	have been received:
	Statement of Candidacy
✓	Loyalty Oath
	Petition Pages 1-8
√	Receipt for Economic Interest Statement (EIS)
Descionation	
Received fro	m: Kim Withycombe
E	By: Jaborah Rushy-
	Deputy Clerk
	John A. Cunningham - Kane County Clerk
	Name and Title of Local Clerk/Secretary
Printed: 12/17/2020	10:22:09AM
	Receipt for Notice of Obligation D-5
I hereby ackn	owledge receipt of the Notice of Obligation which outlines obligations and responsibilities
under the IIIIn	ois Campaign Discolsure Act.
. ~	17 202
Date:	11-2020
	Signature of Candidate or Agent

ATT	ACH TO	PETITION	
AIII	ACH IO	PETITION	

Suggested Revised March 2020 SBE No. P-1A

STATEMENT OF CANDIDACY

NONPARTISAN

NAME:	OFFICE:
Kim Withycombe	to a supported form
	A Full Term is sought, unless an unexpired term is stated here: year unexpired term CITY. VILLAGE OR SPECIAL DISTRICT:
ADDRESS – ZIP CODE:	
2968 Talaga Drive - 60102	Algonquin
* *	
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 UN	TIL NAME CHANGED ON
FORMERLY KNOWN AS UN (List all names during last 3 years)	(List date of each name change)
OTATE OF HANDIS	
STATE OF ILLINOIS) SS.	
County of Kane) SS.	
LZ: VAPUL I	
Kim Withycombe,	ng first duly sworn (or affirmed), say that I reside at
	nincorporated Area of Algonquin
(if unincorporated, list municipality that provides postal service)	Zip Code 60102 in the County of
Malloom	
McHenry , State of Illinois; that I am a qua	lified voter therein, that I am a candidate for Nomination/
Board of Education	Algonquin
Election to the office of Board of Education	n the Name of City Village or Special District)
to be voted upon at the election to be held on April 6, 2021	(date of election) and that I am legally qualified
to hold such office and that I have filed (or I will file before the clo	se of the petition filing period) a Statement of Economic Interests
as required by the Illinois Governmental Ethics Act and I here	by request that my name be printed upon the official ballot for
Nomination/Election to such office.	
Nomination/Election to such onice.	
Signed and sworn to (or affirmed) by Kim Withy C	(Signature of Candidate)
a B H . Wing Withus	mbe 101 12020
Signed and sworn to (or affirmed) by Kim With 9 C (Name of Candidat	e) before me, on 2 1 2 2 20 20 e) (insert month, day, year)
S = 8 E	
出 3	
Emericanian in the second	HUN
OFFICIAL SEAL	(National Distriction Community Comm
(SEAL HARSHA PATEL NOTARY PUBLIC - STATE OF ILLINOIS	(Notary Public's Signature)
MY COMMISSION EXPIRES:08/19/23	

A T	エムヘロ エん	PETITION	
AI	IACHIC	PEHION	

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	Ś	00.	
Kim Withycom	ibe	, do s	wear (or affirm) that I am a citizen of the
United States and the State of Illinois	i, that I a	m not affiliated d	lirectly or indirectly with any communist
organization or any communist front of	organizatio	on, or any foreigr	n political agency, party, organization or
government which advocates the ove	rthrow of	constitutional go	overnment by force or other means not
permitted under the Constitution of the	United Sta	ates or the Constit	tution of this State; that I do not directly or
indirectly teach or advocate the overth	row of th	e government of	the United States or of this State or any
unlawful change in the form of the gove	ernments	thereof by force o	or any unlawful means.
		,	(Signature of Candidate)
on 1214 2020. (insert month, day, year)	ed) by	Kim (Name o	of Candidate)
OFFICIAL SEAL (FIARSHA PATEL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/19/23	5	a	(Notary Public's Signature)

TO THE COUNTY CLERK OR C		. 1	AVING JURISDIC	TION OVER
Community Wet school	DISTRICT NUMBER 🛂	DOIN Kare	COUNT	TY, ILLINOIS
We, the undersigned, being (or more) (or 10% or more) (or 5 who resides at <u>2968</u>	% or more) of the voters residing wi	thin said district, here the City, Village, Unin	by petition that corporated Area
. []]	corporated, list municipality that	provides postal service) in Township		in said
district shall be a eandidate for the office of	1000	of the Board of Education (c		(full term) or
(vacancy) to be voted for at the Consolida A Full Term is sought, unless an unexp		(date of e	lection).	
If required pursuant to 10 ILCS 5/1	0-5.1, complete the following (this in	year unexpired term formation will appear on the ballot)		
FORMERLY KNOWN AS(List a	UN' all names during last 3 years)	TIL NAME CHANGED ON	f each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1. Tracy Sharkey	Tracy Sharkey	4 Bed forct Ct	Algonquin	MUHEROL
Ray Palermo	Kathy Palermo	2972 Talaga Dr	Algonauin	MCHENTY
3. 1 Me Mues	Dicole Palermo	2972 Talaga pr.	Algongun	McHenry
- Vat (Irgan)	PATRILIA ORGAN	2972TALAGADE	AL LONGUN	MCHENRY
5. Svitlana Tsys	Svitlanos Tsys	2916 Talaga dr	Algongain, IL	Mc Henry
6. Heat	Michail Storsishin	2976 Talaga dr	Algonquin	MeHenry
7. Dan Duncan	Dan Dincan	2978 talaga Dr	Alsonguin IL	McLoury
8. Telepha	Victor Pacini	2988 Talaga Dr.	Algorgia	MeHenry
9. Shan Trancisco	ShapON FRANCISCO	3006 Talaga	algun ,IL	mother
- Thomas Pambo	THOMAS RAMBE	3002 TALARA DR	Discosoin	MELLE
State of)		, ,	
County of) SS.			
. Lim Withy cambe	(Circulator's Name) do hereby c	ertify that I reside at 2968		UL, in the
City/Village/Unincorporated Area of	lagnavin	_ (if unincorporated, list municipality	that provides postal	service) (Zip
Code) 100 102, County of Matte	State of	IC that I am 18	B years of age or olde	r (or 17 years of
age and qualified to vote in Illinois), that I amore than 90 days preceding the last day	am a citizen of the United States	s, and that the signatures on this sh	eet were signed in m	v presence not
signing were at the time of signing the pet respective residences are correctly stated,	ition registered voters of the po	litical division in which the candidat	e is seeking elective	office, and their
, and the same and	as above set form.	1/		
Signed and support to (as attended to 1)	a Cothulas		s Signature)	20
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on(Ins	ert month, day, year)	
OFFICIAL SEAL	3	,	M	
(SEAL) HARSHA PATEL	-		Color	
MY COMMISSION EXPIRES:08/19/23	SHEET NO	(Notary Pu	blic's Signature)	

Rev

PETITION FOR NOMINATION

Suggested		
vised March 2019		
SBE No. P-7		
ICTION OVER		

TO THE COUNTY CLERK OR CO		- 110		
-	. DISTRICT NUMBER $\underline{\mathscr{S}}$	on Runc	COUNT	Y, ILLINOIS
1/ / /		% or more) of the voters residing wit		
Kim Withy combe		Talage Drue int		
of (If unincondistrict shall be a candidate for the office o		provides postal service) in Township		in said
(vacancy) to be voted for at the Consolidat		(date of el		(full term) or
A Full Term is sought, unless an unexp	A CONTRACTOR OF THE CONTRACTOR	year unexpired term	ection).	
If required pursuant to 10 ILCS 5/1	0-5.1, complete the following (this in	formation will appear on the ballot)		
FORMERLY KNOWN AS(List a	UN'	TIL NAME CHANGED ON(List date o	f each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
2 Julie Cum	Kim Mc Camant	2967 Talaga Dr	Alonguin "L	Mettenny
are Tour	Eric Forsell	2949 Talaga Dr	Algonyun	Meherry
3. De Reikund	Rig Frekamp	2947 Talaga D.	Algorpulu	Me Heury
4.	Yazmin yerz	2945 Talgea Dr	A Kandin "	on Henry
5. Wille Pen	MATTER Verne	2942 Townson	Algora will	mellon
6. Time if Corrado	Vincent Corredo	2937 Talaga Dr.	Algrania	cheury
7. Jun Paker	THOMAS BAILER	2935 TALAGA ON	ALGWAV NIL	Mettanku
8. TipheBaker	ANNE BAKER	2935 Talga DV	// ,IL	11
9. Janualle	Tenniker Ru	2929 ta Paga	algargin	Methy
10. Mi Tselfi	Midve longth	2829 TALACIA	AC .IL	ale
State of)			
County of) SS.			
1. Kim Wothycombe	(Circulator's Name) do hereby o	ertify that I reside at 2916 To	laga Drue	, in the
City/Village/Unincorporated Area of	lagonquia	(if unincorporated, list municipality	J	service) (Zip
Code) VO(07, County of MAHEA	State of	TL that I am 18	s vears of age or olde	or (or 17 years of
age and qualified to vote in Illinois), that I	am a citizen of the United State	s, and that the signatures on this sh	eet were signed in n	ny presence, not
more than 90 days preceding the last day signing were at the time of signing the pet	tition registered voters of the po	genuine and that to the best of my ditical division in which the candidat	knowledge and belie e is seeking elective	office, and their
respective residences are correctly stated,	as above set forth.	1/		
		X_		
		(Circulator	s Signature)	
Signed and sworn to (or affirmed) by	Mithycomb (Name of Circulator)	before me, on	2/14/21	20
	(Name of Circulator)	(Ins	ert month, day, year)	
OFFICIAL SEAL	77	4	elun	
(SEAL) HARSHA PATEL	11	(Notary Pu	blic's Signature)	
MY MY COMMISSION EXPIRESIDE 19	OI S	h	oo o orginature/	

SBE No. P-7

TO THE COUNTY CLERK OR CO	DUNTY BOARD OF ELEC	TION COMMISSIONERS HA	VING JURISDIC	TION OVER
Community Unit SCHOOL	DISTRICT NUMBER _ S	00 IN Kare	COUNT	Y, ILLINOIS
We, the undersigned, being (50)	or more) (or 10% or more) (or 59	% or more) of the voters residing with	hin said district, herei	by petition that
11:00		provides postal service) in Township		in said
district shall be a candidate for the office of	Foard Member	of the Board of Education (or	Board of Directors)	(full term) or
(vacancy) to be voted for at the Consolidat		(date of ele	ection).	
A Full Term is sought, unless an unexpi If required pursuant to 10 ILCS 5/10 FORMERLY KNOWN AS	0-5.1, complete the following (this in	/ yéar unexpired term formation will appear on the ballot) FIL NAME CHANGED ON		
NAME (List a	Il names during last 3 years)	(List date of	each name change)	
(VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. Laura Petrovic	Laura Pekpik	11 Clara	Ale "	methour.
100 her	Dyoti Starme	luclara ct	AR ,IL	nchenky
3. Cupos	CELAR FREITAS	6 CLAREA CT	ALC IL	MCHENTRO
1 Ans	Hannyka Brices	2 Clara G.	Alg, IL	Mikenny
5. Dimila Miras	PAMER NUERO	3031 TALAGA DP	ALC: IL	MCHAUR
Pleapy	Flena Medini	3015 Talqqq Dr	A/S .IL	Hettory
1.	Robert THINGIA	2995 TAY A Dr	ALS .IL	mcher
8.	Anthony Anderson	2997 Talaan De	ALG ,IL	Moherny
9. Just Day 2	Dinitra Tsithe	5 2987 Talega Dr.	Als ,IL	Mickey
10. Aung Muto	ANDY MIETO	2979 TALAGA	ALG ,IL	MHENDE
State of)) SS.			
County of)		~	
. Kim Wothycombe	(Circulator's Name) do hereby o	ertify that I reside at JAV8Ta	Maga Dru	, in the
City/Village/Unincorporated Area of	nonson	_ (if unincorporated, list municipality	that provides postal	service) (Zip
Code) 1002, County of Matters		that I am 18	years of age or olde	r (or 17 years of
age and qualified to vote in Illinois), that I a more than 90 days preceding the last day signing were at the time of signing the pet	of filing of the petitions and are ition registered voters of the po	genuine and that to the best of my I	knowledge and belief	the persons so
respective residences are correctly stated,	as above set forth.	//		
		(Circulator's	s Signature)	
Signed and sworn to (or affirmed) by	(Name of Circulator)	Cociole IIIe, oil	214 2ert month, day, year)	ا مدر
OFFICIAL SEAL HARSHA PATEL	7			
SEMOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/19/23		(Notan But	olio's Signatura)	
2000 EAT INCO.00/ 19/23	.8	1 (Notary Put	olic's Signature)	

SHEET NO. ____

TO THE COUNTY CLERK OR C	OUNTY BOARD OF ELEC	CTION COMMISSIONERS HA	AVING JURISDIC	TION OVER
Commity that school	L DISTRICT NUMBER 3	D IN Var	COUNT	TY, ILLINOIS
We, the undersigned, being (5)		% or more) of the voters residing wi		
of Alana (If unin district shall be a candidate for the office of		provides postal service) in Township		
(vacancy) to be voted for at the Consolida				(idil terrir) or
A Full Term is sought, unless an unexp	pired term is stated here:	year unexpired term		
FORMERLY KNOWN AS	10-5.1, complete the following (this in	formation will appear on the ballot) TIL NAME CHANGED ON		
	all names during last 3 years)	(List date of	f each name change)	-
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1 AH that	Scott WITHY COMBE	1 - 1 N -	ALCONOLIN "	Mallener
2. L. Levas	Leanne Forlax	93 Kelsey Cs	A16	Milleras
3. Doner Thy	Darren Forley	B Kelsey Cs	A16 ,IL	McHenny
1 (Neidstron	MICHELLE NORDSTROM	S88TELLIRIDE DR.	GILBERTS"	KANE
	- Eric Nordstron	588 TELLREDEDR	GILBERTS"	KANE
6. Nel find	m. kelejilel	1640 Crube Coss. D	Algorian ,IL	Kare
Honrell "	Heather Poplek	1440 Creeks Crossing	Algongain	Kane
9. Me Demma	Su Demmit	1600 Creeks Crossin	Agongui	Kene
10. Deplich	Liasol Schlicht	1590 Creek Cross en	harrin	KADO
JOE Grsekian	Se leselian	158; Cheens Gronn L	Alsongun	Kere
State of)) SS.			
County of	j	80 80 A B 2 B		
. Km Wathycombe	(Circulator's Name) do hereby c	ertify that I reside at	Talaga Dra	<u>) </u> , in the
City/Village/Unincorporated Area of	Lagonzou	_ (if unincorporated, list municipality	y that provides postal	service) (Zip
Code) 10002, County of 11 4	State of	that I am 1	B years of age or olde	er (or 17 vears of
age and qualified to vote in Illinois), that I more than 90 days preceding the last day	of filing of the petitions and are	s, and that the signatures on this shanning and that to the best of my	neet were signed in n	ny presence, not
signing were at the time of signing the perespective residences are correctly stated	tition registered voters of the po , as above set forth.	ditical division in which the candidat	te is seeking elective	office, and their
		\mathcal{A}		
		(Circulator	's Signature),	
Signed and sworn to (or affirmed) by	im Withycom	be before me, on	2/14/20	020
	(Name of Circulator)	(Ins	ert month, day, year)	
OFFICIAL SEAL HARSHA BATTI	7	H	lund	
SEAL) HARSHA PATEL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/19/23		(Notary Pu	blic's Signature)	
	SHEET NO	4		

TO THE COUNTY CLERK OR C	OUNTY BOARD OF ELEC	CTION COMMISSIONERS HA	VING JURISDIC	TION OVER
Community Unit school	. DISTRICT NUMBER $\underline{\mathcal{S}}$	<u>oo</u> in <u>Kane</u>	COUNT	Y, ILLINOIS
We, the undersigned, being (50		% or more) of the voters residing with		
of Alaphau (If unine		provides postal service) in Township		
district shall be a candidate for the office of	-Con C IACO	of the Board of Education (or	r Board of Directors)	(full term) or
(vacancy) to be voted for at the Consolida		(date of ele	ection).	
A Full Term is sought, unless an unexp If required pursuant to 10 ILCS 5/1	0-5.1, complete the following (this in	'year unexpired term formation will appear on the ballot)		
FORMERLY KNOWN AS(List	uN' all names during last 3 years)	TIL NAME CHANGED ON	looch name abana)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	each name change) CITY, TOWN OR	Manufacture 1
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1. David Rodriguez	245	1940 Cosma Way	Algonquinil	Kane
2. David Woloszyk	Land logo sugh	2220 Barrett Dr	Algorge "	Kane
and alley	Jason Bustop	2212 Barrott Pr	Algorquin	Kay
- A - A - A - A - A - A - A - A - A - A	MICHAEL SHARKEY	4 BEDFORD CT	ALGONOVIU	MCHENRY
6.00	Stars Bollo	1656 florthe for ORN	Afortin	Marken
2 Law Joy To	Marcy Buffo	1656 Huntington Dr N	Algonquin "	McHenru
8.	Kelly Bailey	20% Brindlewood	Algongun	Mattern
6. May 1	Todd Bailer	2070 Brindlevesod	Alamquia	mcHem
10. 10. W	Rosaler Ogden	7Horper Court	Algoritain	Metenri
"icusy gg	Cristine Crista	2308 Stonegate	Algoragin	Kane
State of)) SS.			
County of) 33.			
. Kon Worthycombe	(Circulator's Name) do hereby c	ertify that I reside at	Talaga Dr.	, in the
City/Village/Unincorporated Area of	laonzoin	_ (if unincorporated, list municipality	that provides postal	service) (Zip
Code) MI County of MC	State of	That I am 18	years of age or older	r (or 17 years of
age and qualified to vote in Illinois), that I amore than 90 days preceding the last day	am a citizen of the United States	s, and that the signatures on this she	eet were signed in m	v presence not
signing were at the time of signing the pet respective residences are correctly stated,	ition registered voters of the po	litical division in which the candidate	is seeking elective	office, and their
, and a serious, states,	as above set form.	1/_		
	(1) Ho	(Circulator's		,
Signed and sworn to (or affirmed) by	(Name of Circulator)	be before me, on 2	rt month, day, year)	
S		1001	6	
(SEAL) OFFICIAL SEAL		- fwc		
HARSHA PATEL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/19/23	SHEET NO	(Notary Pub	lic's Signature)	

TO THE COUNTY CLERK OR C	OUNTY BOARD OF ELEC	CTION COMMISSIONERS HA	VING JURISDIC	TION OVER
Community Vist school	L DISTRICT NUMBER	Bon Lave		TY, ILLINOIS
We the undersigned, being (50)	or more) (or 10% or more) (or 5	% or more) of the voters residing wit		i i, illinois
I'm Wothycombe	who resides at 2968	Tallance Of the voters residing with	hin said district, here	by petition that
1		provides postal service) in Township	ne City, Village, Unin	corporated Are
district shall be a candidate for the office of				
(vacancy) to be voted for at the Consolida	ted Election to be held on	of the Board of Education (or		(full term) or
A Full Term is sought, unless an unexp	ired term is stated here:	(date of ele) (date of ele)	ection).	
If required pursuant to 10 ILCS 5/1	0-5.1, complete the following (this in	formation will appear on the ballot)		
FORMERLY KNOWN AS(List:	all names during last 3 years)	TIL NAME CHANGED ON		
NAME	VOTER'S PRINTED	STREET ADDRESS OR	each name change) CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1. Chym any	Christie Kostell	y 1591 (reeks	,IL	
		cossine Driv	Alono, IL	Van
3. flotte Owol	50077 P Dall	2205 RANNETY	1 Alsou	KALL O
5.	George Bocta	· 2211 Barrett Dr	Algonavin	Kane
6.	Laura Debiulio	3 sheffield CL	Algongerin	Kgae
7. 10/11	Baden Lope	2219 Barren DV	Marsine	LEVRE
8	Michel Gall	2771 Berett Din	Alscigus, IL	Kare
EW WWW	Challes > Morles	12225 Bur off 1)	Hooveney	Kuny
Mon Die	Monica Giacomina	2234 Buriett Dr	Algore, m. IL	Kone
10,	Josh Neumann	2232 Barrett Dr	Hagnayn .IL	Konc
State of)			
County, of) SS.			
. I'm withycoupe	(Circulator's Name) do hereby ce	ertify that I reside at 1968 To	Maga Isa	C, in the
City/Village/Unincorporated Area of	Connocin	_ (if unincorporated, list municipality t	7	
Code) OND County of Mr HEN	3117	T		
age and qualified to vote in Illinois), that I a	m a citizen of the United States	, and that the signatures on this she	years of age or older et were signed in my	presence, not
igning were at the time of signing the peti espective residences are correctly stated, a	tion registered voters of the polices above set forth.	tical division in which the candidate	nowledge and belief is seeking elective of	the persons so office, and their
h. *		A/		
	ž			
W.	m (1) House	7 (Circulator's	, -	()
signed and sworn to (or affirmed) by	(Name of Circulator)		t month, day, year)	
OFFICIAL CEAL				
SEALHARSHA PATEL		M	Con	
NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/19/23		(Notary Publi	c's Signature)	
INT COMMISSION EXPERIENCE	SUFFERNO	0		

TO THE COUNTY CLERK OR CO	OUNTY BOARD OF ELEC	CTION COMMISSIONERS HA	AVING JURISDIC	TION OVER
Chillengty Unit school	DISTRICT NUMBER 3	DOIN Kare	COUNT	Y, ILLINOIS
We, the undersigned, being (50)	who resides at \(\frac{\mathcal{HQ}}{\mathcal{B}} \)	Idaga DWC int	he City, Village, Unin	corporated Area
of Clange (If uninc	corporated, list municipality that p	provides postal service) in Township		in said
district shall be a candidate for the office o (vacancy) to be voted for at the Consolidat		of the Board of Education (or		(full term) or
A Full Term is sought, unless an unexp	The state of the s	111	ection).	
If required pursuant to 10 ILCS 5/10	0-5.1, complete the following (this in	formation will appear on the ballot)		
FORMERLY KNOWN AS(List a	UN7 all names during last 3 years)	TIL 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	COUNTY
1. Down Low	Sara Leschke	590 Telluride Dr.	Gilberts	Karre
2. dylya, Romak	Sylvia Romazak	579 Telluride De	Gilberts	Kane
3 Mile DO	Nich Pomazale	579 Telluide D.	Gilbertz"	Kane
"Matuism	NATALLE SIMPSON	557 Telluride dr.	Gilberts "	Kaw
5. Oktion Thele	OLTION XHECK	595 Telluride Dr	Gilberts"	Lane
7			,IL	
8.			,IL	
9.		V	,IL	
			,IL	
10.			,IL	
State of)			
County of) SS.			
17. 11% 11	(Circulator's Name) do hereby of	(0,1,1)	Talaga D	, in the
City/Village/Unincorporated Area of	Manguu	_ (if unincorporated, list municipality	that provides postal	service) (Zip
Code) OND, County of Mage and qualified to vote in Illinois), that I amore than 90 days preceding the last day signing were at the time of signing the pet respective residences are correctly stated,	ition registered voters of the pol	s, and that the signatures on this sho	cnowledge and helief	y presence, not
stated,	as above set forth.			
		(Circulator's	Signature)	
Signed and sworn to (or affirmed) by	m Withycomb			020
	(Name of Circulator)	(Inse	rt month, day, year)	
OFFICIAL SEAL				
SEAL) HARSHA PATEL		(Notary Pub	olic's Signature)	
MY COMMISSION EXPIRES:08/19/23	SHEET NO.	7	o oignature)	

TO THE COUNTY CLERK OR CO	OUNTY BOARD OF ELEC	TION COMMISSIONERS HA	VING JURISDIC	TION OVER
Community Unit school	. DISTRICT NUMBER $\underline{\mathscr{Z}}$	DIN Kane	COUNT	Y, ILLINOIS
Kim Withylambe	who resides at 2968	or more) of the voters residing with the voter	ne City, Village, Unin	corporated Area
district shall be a candidate for the office o		/		- Company of the Comp
(vacancy) to be voted for at the Consolidat				(ium toilin) oi
A Full Term is sought, unless an unexp			,	
If required pursuant to 10 ILCS 5/1 FORMERLY KNOWN AS	0-5.1, complete the following (this in	formation will appear on the ballot)		
(List a	all names during last 3 years)	TIL NAME CHANGED ON(List date of	each name change)	<u> </u>
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
Colleen Salonshi	Colleen Grahams	Algonouin TLGOID	2 Alcanovim	motherry
2 de gue	Amanda Gabawskii	700 Fenview Circle	Algonquin	McHenr
me Labouski	Megan Grabowski	700 Fenview Circle	Algonguin	Mottenru
4. Chis Brokwoh	CHRIS GRABOUSKI	700 FENDIEW CIRCLE	ALGONQUIN	McHenri
5.			,IL	
6.			,IL	
7.			,L	
8.			,IL	
9.			,IL	
10.			,IL	
State of County of I. KIM WHAYCOUDE) SS.) (Circulator's Name) do hereby c	ertify that I reside at 29168 T	alaga Dru	le, in the
Code) County of County of Code) Code) County of County of County of County of Code age and qualified to vote in Illinois), that I is more than 90 days preceding the last day signing were at the time of signing the pet respective residences are correctly stated,	of filing of the petitions and are ition registered voters of the po	s, and that the signatures on this she genuine and that to the best of my l	years of age or olde eet were signed in n knowledge and belie	er (or 17 years of ny presence, not f the persons so
Signed and sworn to (or affirmed) by	m Withyromb		s Signature)	~
- Survey of diffilled by _ + s	(Name of Circulator)	(Inse	rt month, day, year)	M. Jacobs
OFFICIAL SEAL (SEAL) HARSHA PATEL	7	h	and	
NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/19/23	SHEET NO.	(Notary Put	olic's Signature)	

Page No. Line No.
·

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.

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

Board Member on Board of Education

(office or position of employment for which this Statement is filed)

Kim Withycombe			
Name			
2968 Talage Dri	ve		
Address			
Algonquin	IL	60102	
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

Candichetz

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COMPLETE BUT DO NOT DETACH

Type or Hand Print Legibly

_ Board of Edu	reation Board	Meulsel
(office or position of employ	ment for which this Statement is	filed)
Lim Wothyco	mbe	
Name	-	
2968 Talaga	Drwe	
Address		
Algongoun	IL	60100
City)	State	Zip Code

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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 17 2020

KANE COUNTY CLERK