COUNTY OF KANE

John A. Cunningham KANE COUNTY CLERK

KANE COUNTY CLERK 719 S. Batavía Ave., Bldg. B Geneva, IL 60134



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

Signature of Candidate or Agent

Receipt for Nominating Petition

	April 4, 2023 - 2023 Consolidated Election.
Receipt For:	Jeff Gorman 5N870 Beaver Ct Saint Charles, IL 60175
Filed: Decemb	per 12, 2022 at 8:30:00 AM.
Office: FOR M Party: Nor	MEMBERS OF THE BOARD OF EDUCATION TO SERVE A FULL 4-YEAR TERM 30
The following	have been received:
✓	Statement of Candidacy
<u>√</u>	Loyalty Oath
√	Petition Pages 1-4
- ✓	Receipt for Economic Interest Statement (EIS)
1	By: Deboah Rully Deputy Clerk
	John A. Cunningham - Kane County Clerk
	Name and Title of Local Clerk/Secretary
Printed: 12/12/2022	8:54:02AM
	Receipt for Notice of Obligation D-5
	nowledge receipt of the Notice of Obligation which outlines obligations and responsibilities nois Campaign Discolsure Act.

12.12-22

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 OF EDV	Wind	MEMBER	
(office or position of employment for v	งกich this Stz	tement is filed)	
JEHR GORMAN).		
Name		·	
SNB70 BEAVER	G.		
Address			,
77 CHARLES	1/_		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



Suggested Revised March 2019 SBE No. P-7

TO THE COUNTY CLERKIOR CO	OUNTY BOARD OF ELEC	h .	AING TAKIRDIC.	TION OVER
	DISTRICT NUMBER $\underline{\mathcal{S}}_{\!\scriptscriptstyle 0}$	·		Y, ILLINOIS
We, the undersigned, being (o	or more) (or 10% or more) (or 5% who resides at 5 / V 8 70	For more) of the voters residing with ENWER CT in the	ún said district, hereb ie City, Village, Unirío	
	orporated, list municipality that p	provides postal service) in Township	1	Thi said
district shall be a candidate for the office of	BONDO MEMBER		Board of Directors) (full term) or
vacancy) to be voted for at the Consolidate	ed Election to be held on $\underline{-R}$	PAIL 4, 2023 (date of ele	ection).	
A Full Yerm is sought, unless an unexpir If required pursuent to 10 ILCS 5/10	red term is stated here:	year unexpired term		
FORMERLY KNOWN AS	UNT	IL NAME CHANGED ON		
(List #	h names during last 3 years) VOTER'S PRINTED	(List date of STREET ADDRESS OR	each name change) CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1. Mudull Sunos	Michelle Lorson	11N172 Juliet DR	Elquh "	Kine,
2 kg order	Kristin Braden	WAI93 Normern Light	St Unaly	Kary
3 00	Rachel Book	6NISS E. Sonet Views	St. Chros	Kane
Mays Auch	AMEN ALMORD	SNY101 Meadownew Con	St. Chulis	lane
With a Struct	Shella Carman	-94870 Bauch 0;	St. Charles	- XOHAL
a tome domnus	Yyonne Thomas	45Well Hillyrawin	/amps/ile	'Kan
2 Ryan Shomm	Ryan Thomas	45WZelf171Viale	Hampehre	Kant
8. Con Thomas	GARY THOMMES	45W ZOI HILLUREN	Utamasing "	KANE
3. D. At	Day Tucker	But Ct	S. Charles "	Cane
- William	Cindy Braden	6NORE autum In	St-Chen IL	Kan
State of [LL]N 015)) ss.			
county of KANIE) 33.			
. Terr Gormon	(Circulator's Nama) do hereby o	ertify that I reside at $\underline{5N870}$	BSAVER G	in the
City/Village/Unincorporated Area of	TT. CHARLES	(if unincorporated, list municipality	that provides postal	service) (Zip
code) <u>60175</u> county of <u>KA</u>	いん state of	しいのら that Jam 18	years of age or cide	r (of 17 years of
age and qualified to vote in Minols), that I amore than 90 days preceding the last day	am a cifizen of the United State	s, and that the signatures on this sh	eet were signed in it	ly presence, not
signing were at the time of signing the pet	ition registered voters of the po	genome and may to the best of my t litical division in which the candidate	riomecye and bulle e is seeking/pjective	office, and their
respective residences are correctly stated,	as above set forth.	,	111/9-	
		41		
		(Cinculator)	s Signature)	
Signed and swom to (or affirmed) by	JEH GORMAN			27-
	(Name of Circulator)	/ linse	ert month, day, year)	\overline{a}
		Wall ha	MIK	/)
(SEAL)	www.	STANK NEW STANKE	plic's Signature)	- Carrie
SHEILA MAUREEN GORI OFFICIAL SEAL Notary Public, State of Illi	ingis SHEET NO		are orginalists)	
My Commission Expli March 04, 2024	res			

TO THE COUNTY GLERK OR CO Entrage Con. Unit school		_	VING JURISDIC COUNT	
We, the undersigned, being (or more) (or 10% or more) (or 5%	% or more) of the voters residing with	nin sald district, hereb	y petition that
		BEAVER CT. in the provides postal service) in Township		in said
of(If unino district shall be a candidate for the office of				
(vacancy) to be voted for at the Consolidate				,
(If running for an unexpired term state "			<u> </u>	
If required pursuant to 10 ILCS 5/10 FORMERLY KNOWN AS	CAU CAU	TIL NAME CHANGED ON		
NAME (List a	I names during last 3 years) VOTER'S PRINTED	STREET ADDRESS OR	cach name change) CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
Johnster Conn	Denniford CON	348 (assidy lane	elgin "	Fane
2 / rav. 5 Parry	JA G V-	4361449 Your Vally	Forthwhee "	Kal
3. Heather McGaran	Heather Mostown	n43W449 Prairie Valley 151	St. Charles"	Kane
4. Clusters Orhum	Christing Johnson			Kane
5 Dleess	Bethany Boer	6N225 Northern Light Ln	StOnaron	Kane
Exput Cerlinario	Jennifer Centionan	D 293 Monument Gi Elgi	15 PS/ 1	Kane
mh	Jason Boel	6N225 Worthen lighter	s+Charks"	Kane
8.	Eigh Lesson	11 N 172 Juliet Du	Elin	une
º Min	MICHAEL BOETZ	UNISTSURETYIEUS	STOYARUSIL	KANE
10.	Zachary Gorman	5 N 8 70 Paver Ct	St. Charlest	Kane
State of LLINOIS	}			
County of KANE) SS.			
1. JEH GORMAN	(Circulator's Name) do hereby o	certify that I reside at <u>5N670</u>	Beaver Ct.	, in the
City/Village/Unknoorporated Area of 5	r. CNARLEZ	(if unincorporated, list municipality	r that provides postal	service) (Zip
Code) 60175 County of KANE	, State of	NUNO15 that I am 18	years of age or olde	r (or 17 years o
age and qualified to vote in Illinois), that I more than 90 days preceding the fast 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 per respective residences are correctly stated,		nedali division in which the candidate	e is seeking elective	onice, and their
		4116	7	
-	True / man	/ / / / ·	s Signature)	_
Signed and swom to (or affirmed) by	(Name of Circulator)		ert month day (year)	<u> </u>
SHEILA MAUREEN GOR	MAN	WARDON I	11 d (KT)	
OFFICIAL SEAL Notary Public, State of III	ŀ	(Notary Pu	blic's Signature)	
My Commission Expi March 04, 2024	SHEET NO.	\mathcal{U}	<u>.</u>	

TO THE COUNTY CLERK OR CO	_		AVING JURISDICTION OVER
COMPAR DN UNIBOHOOL	DISTRICT NUMBER $3c$	IN KANE	COUNTY, ILLINOIS
We, the undersigned, being		X or more) of the voters residing with	7 7
/ A - #-	who resides at _5N 870		he City, Village, Unincorporated Area
		provides postal service) in Township <u> </u>	
district shall be a candidate for the office of (vacancy) to be woted for at the Consolidat		PRIL 4, 2023 (date of et	
A Full Term is sought, unless an unexpl			
If required pursuant to 10 E.CS 5/10	-6.1, complete the following (this in	•••	
	d names during last 3 years)		(each name change)
NAME ACCURATE COMMENTS	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	
1 Port	HIVEX WARD	43 W349 Bawo LA	St. Chola Kone
	Giry Davis	Guors Pranziella D.	St Chat Kne
3 Kathy Davis	tathy Dai	6NO13 Prairie Val	Ley Stokas Kary
Shoma Han	Showing Heines	6NOBS Harrie Valley	St. Cloib Lane
5 My Din	Jeff Hainy	C CIM ANORE SOCAS	St. Chalo Kana
<u> </u>	Boom Samuelian	43US1560Pmaa.	ST CHANGE ESTE
Hum Ingroun	Olmus Pamuenas	431595 60 Maz a	of come # pour
" My Sil	Mass Snydes	43W319 Beaux La	So Charles & Kane
* Teresa Snyder	Tenena Druga	436319 Beaver Ln	St Charles Kana
10 Cove	GAVW HOCKLINA	43W352BUCKET	ST CHINOS KANE
State of 141NO15)		
County of KANE) SS.)		
, JEH GORMAN	(Circulator's Name) do hereby o	certify that I reside at 50870	BEAVER G. india
City/Village/Unincorporated Area of	r. Charuzs	(if unincorporated, list mainleipality	y that provides postal service) (Zip
code) 60175, county of KAN	E. State of	1	8 years of age or older (or 17 years of
age and qualified to vote in Minois); that I	am a crizen of the United State	a, and that the signatures on this st	seet were aloned in my presence, not
more than 90 days preceding the last day signing were at the time of signing the pe	ition registered voters of the po	genume and that to the best of my Afficial division in which the candidat	knowledge and belief the persons so to is seaking elective office, and their
respective residences are correctly stated,	as above set forth.	4.6	N
		4/11/	<i></i>
	<i>x</i> /	//Circutation	'a Signature)
Signed and sworn to (or affirmed) by	VEHT GORMAN		BER 11. 2022
	(Name of Circulator)	// (h)s	ert month, day, year)
		VINOU IN	1/11/16
SHEILA MAUREEN GO OFFICIAL SEA	RMAN	(Notary Fu	blic's Signature

SHEILA MAUREEN GORMAN OFFICIAL SEAL Notary Public, State of Illinois My Commission Expires March 04, 2024

Suggested Revised March 2019 SBE No. P-7	

TO THE COUNTY CLERK OR CO	JUNTY BOARD OF ELEC	TTON COMMISSIONERS HA	VENG JURISDIC	TION OVER	
COMPAR CON UNISCHOOL	DISTRICT NUMBER 3	IN KANE	COUNT	Y, ILLINOIS	
We, the undersigned, being (or more) of the voters residing with		<i>~</i> · · · · · · · · · · · · · · · · · · ·	
1 1	who resides at _5N670		e City, Villege, Unit		
district shall be a candidate for the office of		provides postal service) in Township		in said	
(vacancy) to be voted for at the Consolidate		of the Board of Education (or 100μ) (date of ele		(gray gestur) ca.	
A Full Term is sought, unless on unempl	red here is stated here:	year unerwired term	ACCOUNT.		
If moving consent to 10 ii C9 SH:	LPC 1 commission than federation (Principal	formation will appear on the ballet)			
FORMERLY KNOWN AS (List a	f names during test 3 years)	TIL NAME CHANGED ON(List date of	each tramo chango)		
rous;	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COLDUN	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY	
	Holacuhauga	5N713 Autumn (D) St. Charles II	St. CHARTER	18906	
2 70ch	NATE OCTAVE	IN 279 SANCTUARY	STOHS	KANE	
"Commentalion	JENNIFER DOEN	5N948 W GUNGET VIEWS	5. WAOUS	KANE	
Cip Ser	ERK DOEN	SUGARW. SWODER VICTUS	8) ameles	KANS	
thurbyshall	Courtnut Shanlet	5n279 Sanctuary Ln	St Charles	Fane	
7	MANIN GARDA	45w807 Man 1 75 8	47hD.	Kone	
" Cy 305 de	any copes	Usu809 Mon wille	Simula	Kine	
10/4/2	Meghan leman	42W775 Nunetvine	H. Charlet	kane	
10/ alph	ALEKAYDER	6NO35 PRAIRIE	STCHANGE	1cANS	
- Model to	Mchael E1519	43w391 gophe/ci	Stchales	Kane	
State of) } 5S.				
THE GORMAN	;	C.18- /			
	ρ .	entity that I reside at <u>5NB70</u>	EAVER (7	in the	
	K CHARVES	(F unincorporated, list municipality	that provides postal	service) (Zip	
code) 60175 county of KAN		CUNDIS mattern 18	yeens of age or olds	-/	
age and qualified to vote in lithous); that (:	ion a citizen of the United States	and that the piecetures on this ele-			
more than 90 days preceding the last day signing were at the time of signing the par-	""ON FEDSIETED WIDER OF The DO	genume and that to the best of my l Most division in which the condicate	mwicdge and balist is seeking election	The persons so	
respective residences are correctly stated.	as above set forth.	1.1	77		
	4		3 Signature)		
Signed and swom to (or affirmed) by VEH CROKINGV before me, on 1) Excenden 11, 2022					
	(Name of Circulator)	Mr. A	etmonde, day, year)	> -	
optics -		(<i>XII I I 0)</i>	1 111 (N.	$b \rightarrow$	
SHEILA MAUREEN (AL	Notary Fa	riic's Sigmature)		
My Commission I March 04, 20	Expires SHEET NO	4/			

TO THE COUNTY CLERK OR CO	DUNTY BOARD OF ELEC	TION COMMISSIONERS HA	ving jurisdic	TION OVER
CHIPPE (ON WIECHOOL	. DISTRICT NUMBER $\underline{{}^{3\!c}}$	N KANK	COUNT	Y, ILLINOIS
We, the undersigned, being (න් ආක්ෂාන නෙක්ක (නෙක්කාල මේ	iin said district, here!	yyptilion t iet
JEH CORMEN	who resides at _5N 670	Dealer (1 Int	e City, Vällaga, Unit (corporated Ages
		providas postal service) in Township		in said
listict shall be a candidate for the office of	<u> KGARD Mitmby</u>	of the Board of Education (or		(tull term) er
vacancy) to be voted for at the Consolidat		10212 4, 2023 (date of etc.	ection).	
l Full Term is sought, unless en unexpi if required pursuant to 10 B.CS 570	ired taxis is stated here: 0-5.1, complete the following (this in	year crexphed term forestion will aspear on the ballott		
FORMERLY KNOWN AS	UNT	FIL NAME CHANGED ON		
NAME	VOTER SPRINTED	STREET ADDRESS OR	each name change) CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1 Saca Elstr	Souge ELIL	43×391 Goder J.	& Charlis	Kare
2 DAVID JAMANK	and frid	6N393 PrairieVally	St. Chabs	Kane
2/12abeth Kral	Spring & druk	6NSB Prairie Va	to He was	es Cane
* KEHH STEET	KEITH PSTOUT	43UTCH TWIGHT IN	Stehales	Kone.
- de la matoria	Heather Stout	43W72 Twilight La	St Charles. "	Kanl
A BOK	Arry Bohn	43W318 Creekside	St Charta	Kane
A JACK	Bleff fred	5N451 HAZIMUON	5-ChAS	KAN
100/1	Mendan	484 212 Ferson Cot	Stelmes	Kou
10.	Charles	43WH2 HARSON,	51. Charles	Vave-
LUZINOIS	Kathy Vigliorti	45N26D Feson Ct	St. Charles	<u>kae</u>
1/00) ss.			
)	centify that I reside at 5NB70	Ranca C	
7	A *	Entary that I reside at <u>"/ " {2 (∨)</u>	JEHVER- CT	in the
1	k Charues	(if unincorporated, list oversicipality	that provides postal	service) (Zip
ode) 601/5 County of KAN	E State of	CUNDIS that i am 18	years of age or olde	t (at 17 years of
ge and qualified to vote in Himois); that it core than 90 days preceding the tast day	OF LIES OF THE DESCRIPTION AND AND	s, and that the signatures on this sti considerand that to the best of my l	est were algred in m	ry presence, not
igning were at the time of algoing the pel espective residences are correctly stated,	won recisioned voters of the oc	Clical division in which the candidate	s is seeking elective	office, and their
Appeared Completes as Constituting States.	BE STOLE BOX KALLE	/		11/1
		71		> ////#X
,	7.00	, .	s Signature)	THAN D
ligned and swom to (or affirmed) by	VEH GORMAN	manage i interioris — Chianges e Lita		2/10
	(Nizme of Circulator)		int month, day, year)	\widehat{A}
SHEILA MAUREEN GOR OFFICIAL SEAL	IMAN		Mic's Signature)	
My Commission Exp	eionit	5	en e niji kamej	
March 04, 2024				

X...BOND HERE...X

Suggested Revised March 2019

PETITION FOR NOWNATION

88E No. P-7

TO THE COUNTY CLERK OR CO	SUNTY BOARD OF ELEC	TION COMMISSIONERS HA	VING JURISDIC	TION OVER		
CONTRACT LOW WITSCHOOL	DISTRICT NUMBER 30	IN KANE	COUNT	Y, ELLINOIS		
		L or more) of the voters residing with		· 3		
JEH Common	who resides at _ 5 7V670_		ne Cžly, Višage, Unin(c	orporated Area		
of <u>Sec CNARUES</u> (If untinco		rovides postal service) in Township		in said		
district shall be a candidate for the office of	BOARD Numbe	of the Board of Education (or	Board of Directors) (tulli term) cr		
(vacancy) to be voted for at the Consolidate		PRIL 4, 1023 (date of el	ection).			
A Full Term is speght, widow on unwith thequired pursuant to 10 ECS 6/10	red term is stated bere:	year enexpired term				
FORMERLY KNOWN AS	UNI	TEL NAME CHANGED ON				
NAME (List a)	names during test 3 years)		each name change)			
MOTER'S SIGNATURE	VOIETS PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CETY, TOWN OR VILLAGE	COUNTY		
1.	2 // /		<i>*</i> , , ,			
2 1	a. Hodgson	52347 5996 tag	-com WARZ	KANE		
January Mexico-	Kristen A DeMarco	5N675 Trail Ridge V.	/ -	KANE		
JAMA MANAI	Dana Petric	43W649 (128)WA	- \w\ . / -	KANE		
2 Huell	はまるころ	5N603 Tail Ridge Pa	compiler form	KANE		
	Abby Drommyha	sen 6N40ESunsatu	us StOWA	12770WE		
Kh	PENER CHAN	434416 MORINGS105	Sticinus 1	KANE.		
" MARKERE	Mariheric	5N868 France Valley	SA MAR	VANE		
8.			J. J.	KANE		
9.			Д	KANS		
10.	,	<u></u> -	<u></u>	KANK		
State of 1414015	_		<u> </u>			
1100)) SS.					
	j	·				
JEH GORMAN.	(Circulator's Name) do hereby o	entity that I reside at 50870	BEAUGA G	, in the		
City/Village/Linkscorporated Area of	e Charles	_ (if wincorporated, list muzicipality	itial prodice postal	tanica) (7in		
code) 60175, county of KAN		Language				
age and qualified to vote in (Einois), that I is	an a citizen of the Linded State	s, and that the signatures on this sh	i yeers of age or cide sect were signed in m	W Droconera wet		
more than 90 days preceding the last day signing were at the time of signing the pet	of Wing of the petitions and ere	centing end that to the best of my	knowledge and belief	The nemme en		
respective residences are correctly stated,	as above set forth.	المرابعة الم	I B GCCCT (S GENTYLA	Calco, and the		
)		1110)			
/	in .	(Chronital)	s Skyresture)			
Signed and swom to (or allimped) by	Tuce Commen	-7	- 1 ₁	2022		
	(Name of Charletor)		ert month, day, year)			
(W) bealing 1 1 AGK						
SHEILA MAUREEN GO	RMAN	SHULL				
OFFICIAL SEA	L Minois	(Notary Pu	blic's Signature)			
My Complession Ex March 04, 2024	pires SHEET NO	<u></u>				
						

ATTACH TO I	PETITION
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Suggested Revised March 2020 SBE No. P-1A

STATEMENT OF CANDIDACY

NONPARTISAN

NAME:	OFFICE:
	SCHOOL BOARD MEMBER
JEHL GORMAN	A Full Term is sought, unless an unexpired term is stated here:
ADDRESS 7TD COOK	CITY, VILLAGE OR SPECIAL DISTRICT:
SNB70 BEAVER CT. ST. CHARLES IL 60175	<u> </u>
ALCOHOLOGY -	CCUSD 301
51. CHARLES, IL 60175	
If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the	e following (this information will appear on the ballot)
FORMERLY KNOWN ASUN	VTIL NAME CHANGED ON
(List all names during last 3 years)	(List date of each name change)
STATE OF ILLINOIS)	
Manic) SS.	
county of KANE	
JEH GOOM -	
J, NZAT (∄UH*WAS bein	ng first duly sworn (or affirmed), say that I reside at
1, TEXT (GORMAN) bein 5NB70 BEAVER G: , In the City, VIII age, Ur	incorporated Alea of
(if unincorporated, list municipality that provides postal service):	
State of Illinois; that I am a qual	lifled voter therein, that I am a candidate for Nomination/
free Chance Mader	CCIRO Zal
Election to the affice of <u>SUMBA</u> BOARD MEMBER i	(Name of City Village or Special District)
to be voted upon at the election to be held on APRIC 4, 7	<u>のとく (date of election) and that I am legally qualified</u>
	se of the petition filing period) a Statement of Economic Interests
	,
as required by the Illinois Governmental Ethics Act and I herel	by request that my name be printed upon the official ballot for
Nomination/Election to such office.	111h
	/11/1/_
	(Signature of Candidate)
虚./	′ n
Signed and swom to (or affirmed) by VEH GORM	before me, on FEEFMBER 11, 2002
(Name of Candidate	e) (insert month, day, year)
	Mike Line Ka
	e (DIUN EN 11 EUN JAMI 4.1
	\ <i>XX \ I I \ I I \ I \ U (I) ANN (A</i>
	SHULL WILLIAM -
OFFICIAL SEAL	(Notary Public's Signature)
OFFICIAL SEAL Notary Public, State of Illinois My Commission Expires	(Notary Public's Signature)

	ÇER	RTIFICATION O	F DELETIONS		
JEA	16 GORMO	N	S. 41 1.4		hereby certify that
nave properly initials	ed the deletions of	signatures, listed	nereinafter by pag	iator (circle one) do e and line numbers, a candidate for ele ne <u>(MYSAL) MATEA</u>	from the petition o
circle one) to the off	oorania√ ice of BoAran	Name of 4	Candidate) who is ~ MEMBEat th	a candidate for ele ∧S∉AΩ£1620∧\ el	ction or nomination Election to be
neld on	4,2023	(date of election).	10 10 10 V	
	'	Т	<u></u>	1	1
Page No.	Line No.	Page No.	Line No.	Page No.	Line No.
1	5				
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		1			
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	· _ · _ · · · · · · · · · · · · · · · · 				
	1		+		<u> </u>
	1	_1		1/1/2	<u> </u>
				411	
			(Signal	dre of Person Deletin	g 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.

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, JEW GORMAN 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 JCH GrmQU before me, UName of Candidate)
on <u>Otober, 31, 30</u> 73 (insert month, day, year)
(Notary Public's Signature)

STEILS MAUREEN GORMAN
OFFICIAL SEAL
Notary Public, Stele of tilingis
My Commission Expires
March 04, 2024

Your Name Was Submitted for Filing by an Entity that you Represent STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK (Type or Hand Print Clearly)

JEH GORMAN	J	
Name BOARD OF FOL	XATION MEMBER	
Each office or position of employme	ent for which this Statement is filed	100
5NB70 BEAVER	G. ST. CHARLES, IL	60175
Full Post Office Address/Home Add	ress to which notification of an examination	of this statement should be sent
	GENERAL DIRECTIONS	<u> </u>
considered to be the same as the ir in this statement. If additional space 1. List the name and instrument of which the person is required to file \$5,000 fair market value or from with the case of real estate, location	olled by the person making this statement) iterest of the person making the statement. Ite is needed, please attach supplemental life ownership in any entity doing business with , in which the ownership interest held by the hich dividends in excess of \$1,200 were receithereof shall be listed by the street address.	Campaign receipts shall not be included sting. In a unit of local government in relation to be person at the date of filing is in excess on eived during the preceding calendar year. In or if none, then by legal description.) No
•	ial institution, nor any debt instrument shall	l be listed. Position of Management
Business Entity	Instrument of Ownership	
statement was an officer, director,	of practice of any professional organization associate, partner or proprietor or served in rived during the preceding calendar year.	
NONE NoNE	Address	Type of Practice
which the person is required to file	ervices rendered (other than to the unit or unit) to each entity from which income exceeding calendar year by the person making the	ing \$5,000 was received for professional

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 pr more was realized during the preceding calendar year.
5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year. NONE
6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.
7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file. NONE
8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year.
VERIFICATION "I declare that this statement of economic interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Binois Governmental Ethics Act. I understand that the penalty for willfully filling a false or incomplete statement shall be give not to exceed \$1,000 or imprisonment in a penal institution other than the penitential short to exceed one year or both fine and imprisonment". [Signature of person making the statement] [Cozz (date)]

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