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 19, 2024 - 2024 General Primary.

Receipt For:	Brenda Engelhardt 4N194 Wild Rose Rd Saint Charles, IL 60174
Filed: Novemb	per 27, 2023 at 8:30:00 AM.
Office: FOR P	RECINCT COMMITTEEPERSON, St. Charles 8 Party: Democratic
The following	have been received:
✓	Statement of Candidacy
✓	Loyalty Oath
_	Petition Pages / - 4
	Receipt for Economic Interest Statement (EIS)
Received fro	Deputy Clerk John A. Cunningham - Kane County Clerk Name and Title of Local Clerk/Secretary
<u> </u>	interiment i september propriet en metel file distribution file in in file i file i file i file i file i file i Placet description

Printed: 11/27/2023 9:33:25AM

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: 11/27/2023

Signature of Candidate or Agent

ATTACH TO	PETITION
AFIACITIO	PETITION

Suggested Revised March 2020 SBE No. P-1

STATEMENT OF CANDIDACY

NAME: Brenda Engelhardt	OFFICE: Democratic Precinct Committeeperson
ADDRESS - ZIP CODE: 4N194 Wild Rose Rd	A Full Term is sought, unless an unexpired term is stated here:year unexpired term
14134 Wild Hose Hu	DISTRICT: District 8
	PARTY: 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 (List all names during last 3 years)	UNTIL NAME CHANGED ON(List date of each name change)
STATE OF ILLINOIS County of Kank SS.	
4N194 Wild Rose Rd	Candidate) being first duly sworn (or affirmed), say that I reside St. Charles
(if unincorporated, list municipality that provides postal service) Zi Kane State of Illinois: that I	ip Code, in the County of am a qualified voter therein and am a qualified Primary voter of the
Democratic	m a candidate for Nomination/Election to the office of
Precinct Committeeperson 8th	District, to be voted upon at the primary election to be held on
March 19, 2024 (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 Stateme	ent of Economic Interests as required by the Illinois Governmental
Ethics Act and I hereby request that my name be printed u	pon the official(Name of Party)
Primary ballot for Nomination/Election for such office.	Brenda J. Lagelhardt (Signature of Candidate)
Signed and sworn to (or affinited) by (Name of Ca	before me, on 11-26-25 (insert month, day, year)
OFFICIAL SEAL HOWARD R. KATZ Notary Public - State of Illinois My Commission Expires 07/17/2026	(Notary Public's Signature)

4	ATTA	CH T	OP	FTIT	ION	
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10 ILCS 5/7-10.1

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

LOYALTY OATH

United States of America State of Illinois)	SS.	
_{I,} Brenda Engelhardt			, do swear (or affirm) that I am a citizen of the
United States and the State of Illinois,	that I a	am not	affiliated directly or indirectly with any communist
organization or any communist front or	rganizati	on, or a	any foreign political agency, party, organization or
government which advocates the over	throw o	f consti	tutional government by force or other means not
permitted under the Constitution of the U	Inited St	ates or	he Constitution of this State; that I do not directly or
indirectly teach or advocate the overthr	ow of th	e gover	nment of the United States or of this State or any
unlawful change in the form of the gover	nments	thereof	by force or any unlawful means.
Signed and sworn to (or affirmed on	d) by	Bre	(Signature of Candidate) Accepted Associate (Notary Public's Signature)

PRECINCT COMMITTEEPERSON PRIMARY PETITION

We, the	undersigned, members of		-1	qualified primary	
	Democrat Party, Kane State of Illin		Dranda Engelbers	44	
	4N194 Wildrose Rd.	ois, do hereby petition that	01.01-1	"	ho resides at
- Interest		in the City, Village, Unincon Zip Code 60174, County of	porated rifed or	of Illinois, shall be a	ncorporated, list
		on to the office of PRECINCT CO	MMITTEEPERSON , for St C	harles 8th Precinc	
name an	d precinct number), to be voted	for at the primary election to be	held on March 19, 2024 (da	te of election).	
If required	pursuant to 10 ILCS 5/7-10.2, com	plete the following (this information wil	I appear on the ballot)		
	FORMERLY KNOWN AS		TIL NAME CHANGED ON		
	(L	ist all names during last 3 years)	(List date of	each name change)	to.
	NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
	(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
Mu	us that Chronele	Harn Korpel Chia prette	4NOS6 Wild Ruse Rd	3t. Charles "	Kane
2.	Sui Snu	Sadie Smith	3N8YI WILL MARINE	Alharia	keene
3.	103	Lian O'Brien	7	St. Charles	Kane
40	not I that	MANK J Christon		d Standes	Kane
5.	Irlem Aristense	ARLENE CHRICTER	1 11 1 3	ej ,IL	1
8	ALLIM CATA	Lauren Carter	4N193 Wild Rose Ro	St Chartes!L	Kane
4/	Ton Planton	Mary Carter	n 11	n,IL	ч
8.	Set Dal	Robert Wick	576W638 W:11vis	25+ Chall	Kane
9.	11/10	Justin Bichus	3N758 Harthon DC	Stehnes "	Kare
10.	Jan ly	EDWARD FACTLY	3N771	St Charles	Rais
State of	IL	`)
	1/ .nd				
County		11	11.1101	11110.	AG
1, _		(Circulator's Name) do hereby		t Wild Ko	Se KO, in the
	age/Unincorporated Area of	T	porated, list municipality that provide		
11177	of Kolle , State o		f age or older (or 17 years of age and signed in my presence, not more that		
			e and belief the persons so signing w		T
100	voters of the Democra	11.	division in which the candidates is se		
		rectly stated, as above set forth.		-11	
			- Frende A	Inallas	1
		An 1 - 1-1	(Circulator	's Signature)	
Signed a	and sworn to (or affirmed) by	isierda Engline	before me on 11 26	, - 2 y	
	OFFICIAL SEAL	(Name of Circulator)	Insert	month, day, year)	
(SEAL) Notary Public - State of Illinol My Commission Expires 07/17/2	s 2026	(Notary Pu	blic's Signature)	
1	-	SHEET NO.	1	V	

PRECINCT COMMITTEEPERSON **PRIMARY PETITION**

Democrat

We, the undersigned, members of a	nd affiliated with the	Democrat Party and	qualified primary	electors of the		
Democrat Party, i	St Charles 8th Precin	ct (township name and pr	ecinct number) in	the County of		
Kane,State of Illino	s, do hereby petition that	Brenda Engelhar	dt wi	no resides at		
4N194 Wildrose Rd.	_ in the City, Village, Unincor	porated Area ofSt. Chali	es (if uni	ncorporated, list		
municipality that provides postal service)	Zip Code 60174 , County o	f Kane and State	of Illinois, shall be a	candidate of the		
Party for electio	n to the office of PRECINCT CO	MMITTEEPERSON, forSt C	harles 8th Precinct	t (township		
name and precinct number), to be voted	for at the primary election to be	held on March 19, 2024 (da	ate of election).			
If required pursuant to 10 ILCS 5/7-10.2, comp	lete the following (this information wil	Il appear on the hallet)				
FORMERLY KNOWN AS(Lis	t all names during last 3 years)	TIL NAME CHANGED ON(List date of	each name change)			
NAME	VOTEDIO DDINTED	OTDEET ADDRESS OF				
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY		
Dr. 1/1/01	NAME (Optional)		h . II			
Many Phyly Chrypett	Har Korbel Chia prett	4NOGE WILL Ruse RA	It. Charles	Kane		
2. Sur Snu	Sadie Smith	3N8YI Wild werd	Alharia	kens		
3. // 01/2	Lian O'Boin	3N to Wild Roserd	0 11 11	tura		
40 not All to	MANK J Christery	1100.00	of Charlill	Rance		
5.0	0-1 1- 0-1	15 Mil Out of the R	CIAM IL	Kane		
6 Lengthyslewer	HRIENE CHRICTEN	LENSON SOONID 1000 H	Ca ariaria	Koru		
DAMM ATTA	Lauren Carter	4N193 Wild Kose Po	St Chantes	fans		
Went arter	Mark Carter	14×193 W/ 16/18/02 Pd	St (Marles	Kare		
8. Post Dah	Robert Wick	574W638 W:11vis	25+ Chails	Kane		
9. 11/10_	Tustin Bichis	3 N 758 Hauthon DC	St. Charles IL	Kare		
10. Lly	EDWARD FACTLY	3N771	St Maron	Rano		
T	1-2-100 1 0(0)-1	1 7 7 1 1	15101812	Juste		
State of)) SS.			,		
County of Kan	j			\bigcirc		
Bunda Stacollant	(Circulator's Name) do hereby	certify that I reside at 4 N 194	+ Wild Pa	vo KO in the		
City/Village/Unincorporated Area of	7		s postal service)(Zip (-11		
City/Village/Unincorporated Area of SI Charles (if unincorporated, list municipality that provides postal service)(Zip Code) (County of Karle of Table 1 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 th				All the state of t		
filing of the petitions and are genuine and	that to the best of my knowledge	e and belief the persons so signing w	ere at the time of sig	ning the petition		
qualified voters of the Dentocratic Party in the political division in which the candidates is seeking nomination/elective office, and						
that their respective residences are correct	tly stated, as above set forth.	(2 Ir	-01-11			
		David Al	s Signature)			
	raida Enclo Inst	111-76-	a dignature)			
Signed and sworn to (or affirmed) by	(Name of Circulator)	before mer on / (Insert r	north, day, year)			
OFFICIAL SEAL		1/2 /2	1			
(SEAL HOWARD R. KATZ Notary Public - State of Illino	is 2026	(Notary Pu	blic's Signature)			
My Commission Expires 07/17/	SHEET NO.	_	1			
	SHEET NO					

PRECINCT COMMITTEEPERSON PRIMARY PETITION

Democrat Party, Kane ,State of Illino	in St Charles 8th Precin	(township name and pr	44	the County of
4N194 Wildrose Rd.	in the City, Village, Unincor	0. 0. 1	es (if uni	ncorporated, lis
municipality that provides postal service) Democrat Party for election	Zip Code 60174, County of on to the office of PRECINCT CO	0:0	of Illinois, shall be a harles 8th Precinct	
name and precinct number), to be voted		March 10, 2024	ite of election).	
, 10 20 1010	,			
If required pursuant to 10 ILCS 5/7-10.2, com	plete the following (this information wil	Il appear on the ballot)		
FORMERLY KNOWN AS	ist all names during last 3 years)	TIL NAME CHANGED ON(List date of	each name change)	S
	ist all flames during last 5 years)	(List date of	(3.9)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COOMIT
1. Sarly M. Wilcox	SANDY M WILLOX	3N787 HAWTHORN DR	ST CHARLES!	KAVE
2. Tours Red C	TIMOTHY & WILCOY	9N787 Hasthern A	St. Ofer ,IL	lased
3. Strew Mech.	Stever TNILCOX	310787 Hav thorn D.	Stickerpor	
4. Blende by hat	Brenda Encelhadt	4N194WildreseRd	Steharles	Kore
5. Any any Lither	Thomas W. Ensahalt	4 N 194 Wildrage Rd	St Chals, IL	itene
6. 102 2000	MARK KILLEEN	3N833 HAWTHER 1DR	STONAROLE	KANE
7 Hours Well	NANCYSMALL-K	TU 561 31823 HA	OTHOR/ 1005	CIIXAN
8. Ey Palis	AL Polich	36W 962 Theeron	570 IL	KAN
9. Edwitten	Ed Garzaro	3/21/1965 Tree-trole	St Claster IL	kne
19 May 1	Am y OBvien	3NGOT WKORUSE	80 "	KANE
State of FC Vicine)			
County of Karr				
. Brends A Incollard	(Circulator's Name) do hereby	certify that I reside at 14 N 19	4	, in th
City/Village/Unincorporated Area of 51	-y/) /	rporated, list municipality that provide	s postal service)(Zip	Code) (0017
County of State of	41	f age or older (or 17 years of age and		
a citizen of the United States, and that t	he signatures on this sheet were	signed in my presence, not more that	an 90 days preceding	the last day fo
filing of the petitions and are genuine an	d that to the best of my knowledge	e and belief the persons so signing v	vere at the time of sig	gning the petitio
qualified voters of the DelWCY a	Party in the political of	division in which the candidates is se	eeking nomination/ele	ective office, an
that their respective residences are corre	ectly stated, as above set forth.	Regado	Lucollar	+
	111	(Circulator	's Signature)	t
Signed and sworn to (or affirmed) by	grando Englih	ad before me, gn //	- 2002	
OFFICIAL SEAL HOWARD R. KATZ	(Name of Circulator)	May Insert	month, day, year)	
(SEADotary Public - State of Illinois My Commission Expires 07/17/202	6	(Notary Pu	blic's Signature)	
and the second	SHEET NO	3	1	

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PRECINCT COMMITTEEPERSON PRIMARY PETITION

We, the undersigned, members of a	nd affiliated with the	Democrat Party and	qualified primary	electors of the
Democrat Party, i	n St Charles 8th Precine	ct (township name and pr	ecinct number) in	the County of
	is, do hereby petition that	Desards Consilher		no resides at
4N194 Wildrose Rd.	in the City, Village, Unincorp	oorated Area of St. Chalr	es (if unit	ncorporated, list
municipality that provides postal service) Democrat Party for election	Zip Code 60174, County of n to the office of PRECINCT COI	Kane and State MMITTEEPERSON , for St C	of Illinois, shall be a harles 8th Precinct	
name and precinct number), to be voted	for at the primary election to be h	neld onMarch 19, 2024 (da	te of election).	
If required pursuant to 10 ILCS 5/7-10.2, comp		I appear on the ballot)		
(Lis	st 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
1. AlignBut	Alison Brand	- 36W525 Wild Puse	& Charles"	Kane
3.	-		,IL	
4.	+		,IL	
5.	 		,IL	
6.			,IL	
7.		1587897	\IL	
8.		2 Broom	(Z) ,IL	
9.		No.	JE ,IL	
10.		a	J₽ ,IL	
State of)	(F)	<i>[5]</i>	
County of Kurl) SS.	0/68795		
1. Brundo & Eagh Dr	(Circulator's Name) do hereby	certify that I reside at 4 N 19	4 Wildrose	Rd., in the
City/Village/Unincorporated Area of	Charles (if unincon	porated, list municipality that provide	s postal service)(Zip	Code)(1017)
County of Kath State of	that I am 18 years of	age or older (or 17 years of age and	d qualified to vote in I	llinois), that I am
a citizen of the United States, and that th	e signatures on this sheet were	signed in my presence, not more the	an 90 days preceding	the last day for
filing of the petitions and are genuine and	that to the best of my knowledge	e and belief the persons so signing v	vere at the time of sig	ning the petition
qualified voters of the De Mocra	Party in the political d	livision in which the candidates is se	eeking nomination/ele	ective office, and
that their respective residences are corre	ctly stated, as above set forth.	\mathbb{R}^{n}	$\subset ()$	
Signed and sworn to (or affirmed) by	rendu Englined (Name of Circulator)	before me, on 1176	's Signature) month, day, year)	
(SEAL) OFFICIAL SEAL HOWARD R. KATZ Notary Public - State of Illinois My Commission Expires 07/17/20		Horack	iblic's Signature)	
	SHEET NO	1	11.5	