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: Joy Y. Duerr

415 Oak St Saint Charles, IL 60174 Filed: November 27, 2023 at 12:36:00 PM. Office: FOR PRECINCT COMMITTEEPERSON, St. Charles 5 Party: Democratic The following have been received: Statement of Candidacy Loyalty Oath Petition Pages 1-2 Receipt for Economic Interest Statement (EIS) Received from: John A. Cunningham - Kane County Clerk Name and Title of Local Clerk/Secretary Printed: 11/27/2023 12:38:57PM 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

Suggested Revised March 2020 SBE No. P-1

STATEMENT OF CANDIDACY

Joy Y Duerr	Precinct Committeeperson		
ADDRESS – ZIP CODE:	A Full Term is sought, unless an unexpired term is stated here:year unexpired term		
415 Oak Street St Charles, IL 60174	DISTRICT: St Charles 05		
	Democratic		
If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete to	he following (this information will appear on the ballot)		
FORMERLY KNOWN AS (List all names during last 3 years)	(List date of each name change)		
STATE OF ILLINOIS) County of KANE) SS.	NOV 27 PM 12:		
Joy Y Duerr (Name of	Candidate) being first duly sworn (or affirmed), same that I reside		
at 415 Oak Street, in the City	y, Village, Unincorporated Area ofSt Charles		
(if unincorporated, list municipality that provides postal service) Zi	p 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		
	05 District, to be voted upon at the primary election to be held on		
March 10, 2024	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	nt of Economic Interests as required by the Illinois Governmental		
Ethics Act and I hereby request that my name be printed u	pon the official Democratic (Name of Party)		
Primary ballot for Nomination/Election for such office.			
	Signature of Candidate)		
Signed and sworn to (or affirmed) by Joy Due (Name of Ca	before me, on 112 2023. Indidate) (insert month, day, year)		

(SEAL)

OFFICIAL SEAL SUSAN KRAMER SANDERS Notary Public - State of Illinois My Commission Expires Apr. 20, 2027 (Notary Public's Signature)

PRECINCT COMMITTEEPERSON PRIMARY PETITION

We, the undersigned, members of Democratic	04.011 05		qualified primary	
Faity,		(township name and pr Joy Y Duerr		
415 Oak Street	ois, do hereby petition that			no resides at
	in the City, Village, Unincorp		(11 01111	ncorporated, list
municipality that provides postal service Democratic Party for electi	on to the office of PRECINCT COI		of Illinois, shall be a St Charles 05	candidate of the (township
name and precinct number), to be voted	for at the primary election to be h	neld on March 19, 2024 (da	ate of election).	
If required pursuant to 10 ILCS 5/7-10.2, com	ploto the following (this information will	access on the hellet		
FORMERLY KNOWN AS(L	ist all names during last 3 years)	TL NAME CHANGED ON(List date of	each name change)	
NAME.	VOTEDIO DEILITED			
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1 / C	NAME (optional)			N
ConstanceSleves	w Constance Stevens	415544054	St. Charles	Kane
Thor Min	Thomas N. Zimmera	814 S. 4th St.	St Charles	Kame
3. 60	Cynthia Spread	315 Bowman St.	St. Chalo "L	Kano
4.		10205. 4th 54.	st. Chales	face
5	JAMES MEROUN	1028 5 4M	272 ,IL	KANE
6. Drye Wast	Ging Seng Hock	1037 Ash	St Charles	Kane
Jack Vantal	Roger Vogt no	1023 Ach	SY/har	Kanu
8. LerhBerk	Leah Beck	1019 Ash	St Charles "	Kane
9. an Sugar	Amy Sugar	1009 ASL	St. Clarie	Kere
10. Carol Derse	Carol Deross	1003 Och St.	// ,IL	74
State of 1	1			
		9		
County of KANE	_)			
1, JOY Y DUERR	_ (Circulator's Name) do hereby	certify that I reside at 415 06	TK ST	, in the
City/Village/Unincorporated Area of 57	CHARLES (if unincorp	porated, list municipality that provide	s postal service)(Zip	Code) 60174
County of KANE, State of	1 that I am 18 years of	age or older (or 17 years of age and	qualified to vote in I	llinois), that I am
a citizen of the United States, and that t	he signatures on this sheet were s	signed in my presence, not more that	an 90 days preceding	the last day for
filing of the petitions and are genuine an	d that to the best of my knowledge	and belief the persons so signing w	ere at the time of sig	ning the petition
qualified voters of the DEMOCRA	TIC Party in the political di	ivision in which the candidates is se	eking nomination/ele	ective office, and
that their respective residences are corre	ectly stated, as above set forth.	C 200		
		Joy G Deep	s Signatura)	
		// / (Circulator	s olghalure)	
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on/O// c	2 / 20 2-3 month, day, year)	
OFFICIAL SEAL		C D	(1
(SEAL) SUSAN KRAMER SANDER Notary Public - State of Illin My Commission Expires Apr. 20.	OIS)	(Notary Pu	man Sevol blic's Signature)	us .
I My Constitution Capitor Port Ear	SHEET NO	, —		

PRECINCT COMMITTEEPERSON PRIMARY PETITION

Vana	s, do hereby petition that	(township name and p		the County of ho resides at
	CONTRACTOR	porated Area of St Cha	d W	ncorporated, list
nunicipality that provides postal service) 2	Zip Code 60174, County of			candidate of the
name and precinct number), to be voted f			date of election).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
required ourseast to 10 II CO E/7 10 2	ata tha falla da a Mhiairta an an an 19	4 1 4 0	5 C. 3 3 C. 60 C. 7 C.	
required pursuant to 10 ILCS 5/7-10.2, compl				
FORMERLY KNOWN AS(List	t all names during last 3 years)	TIL NAME CHANGED ON(List date of	of each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1. Aug Vigu	ANNE DUAN	1003 Am	St. Chasil	KANE
2. Dane Deine	Deanna Banner	1015 ELM	STC ,IL	KARE
3. Joy Davids	Joy Davidson	1934 S. 2ndst.	57c ,1L	Kane
4.	Eugene Piraino	14 14	/ , ,IL	//
5. Fran manos	FRAN MANOS	920 5. 2nd St	STC ,IL	KANE
Tames Marion	JAINES MANOS	tt ti	ll, lL	V
7. /) /) /	1 / 2	1
8.			23	
9.			3 % 2"	7
10.	/ / .		7,IL	E/
tate ofiL_)		2 7	Ē
county of KANE) SS.		± 1 36	
JOY Y DUERR	(Circulator's Name) do hereby	certify that I reside at 4/5 0	AK ST	, in the
ity/Village/Unincorporated Area of 57				
ounty of KANE, State of				
citizen of the United States, and that the	signatures on this sheet were s	signed in my presence, not more th	nan 90 days preceding	the last day for
ing of the petitions and are genuine and	이 글로마다 아이 되어서 아이지 않는데 이번 그리고 있는 그리고 하지만 한다면 하다면 하다는			
ualified voters of the DEMOCKATI		vision in which the candidates is s	eeking nomination/ele	ective office, and
nat their respective residences are correc	tly stated, as above set forth.	0	9 90 00	
		(Circulato	r's Signature)	
igned and sworn to (or affirmed) by	My Duesc	before me, on ///2	1/2023	
	(Name of Circulator)		month, day, year)	
(SEAL) OFFICIAL SEAL SUSAN KRAMER SANDE	RS	Susan Kra	mer Samo	less
Notary Public - State of Ill My Commission Expires Apr. 20	inois		ublic's Signature)	
My Commission Expires Apr. 20	SHEET NO			