# **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 1, 2025 - 2025 Consolidated Election.

Receipt For: Heidi J. Fairgrieve 37W340 Red Gate Rd Saint Charles, IL 60175

Filed: November 12, 2024 at 8:30:00 AM.

Office: FOR MEMBERS OF THE BOARD OF ED. TO SERVE A FULL Dist 303 4-YEAR TERM Party: Non-Partisan

The following have been received:

- Statement of Candidacy
- Loyalty Oath
- Petition Pages /-//
  - Receipt for Economic Interest Statement (EIS)

Received from: Heidi J. Fairgrieve

By:

## John A. Cunningham - Kane County Clerk

Name and Title of Local Clerk/Secretary

Printed: 11/12/2024 8:44:14AM

## 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: 11-12-202

nature of Candidate Agent

#### ATTACH TO PETITION\_

Suggested Revised March 2020 SBE No. P-1A

## STATEMENT OF CANDIDACY

#### NONPARTISAN

OFFIC NAME: expired term A Full Ter oht, unless an unexpired term is stated her SPECIAL DISTRICT: CITY MHOS 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) ASH ANG UNTIL NA FORMERLY KNOWN AS (List date of each name change) (List all names during last 3 years) STATE OF ILLINOIS 1 2 NOV 2024 SS. County of RECEIVED being first duty sworn WALIOVA (or affirmed), say that I reside at , in the City, Village, Unincorporated Area of \_ ant , in the County of (if unincorporated, list municipality that provides postal service) Zip Code 60165 ne State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/ mal in the MODI ¢ Election to the office of c Name of City, Village or Special District) HONLI 2025 (date of election) and that I am legally qualified to be voted upon at the election to be held on\_ to hold such office and that I have filed (or I will file before the close of the petition filing period) a Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official ballot for Nomination/Election to such office. (Signature of Candid MANC before me, or Signed and sworn to (or affirmed) by ame of M OFFICIAL SEAL (SEAL) (Notary Public's Signature) Juliet Gaber NOTARY PUBLIC, STATE OF ILLINOIS Commission Expires 06/29/2027

#### ATTACH TO PETITION\_

10 ILCS 5/7-10.1

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

## LOYALTY OATH (OPTIONAL)

SS.

United States of America

State of Illinois

, Heidi Fairgrieve, 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.

nature of Candidate)

before me,

Signed and sworn to (or affirmed) by

(Name of Candidate)

or (insert month, day, year)

(Notary Public's Signature)

(SEAL)

**'OFFICIAL SEAL'** Juliet Gaber NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 06/29/2027

This will be returned to you when the 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

ber Office

Office or position of employment for which this statement is filed

City

State

60175

Zip Code

All three pages must be returned to the Kane County Clerk for filing. We will return this receipt to you, and you should keep this for your records.

Location: 719 S. Batavia Ave. Bldg. B Geneva, IL 60134 Mailing Address: Kane County Clerk Attn: EIS 719 S. Batavia Ave. Geneva, IL 60134

#### 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 2HOS SCHOOL DISTRICT NUMBER 303 IN HARA COUNTY, ILLINOIS 50 the undersigned, being ( or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that who resides at 3711)34 10.00 Defalatern in the City, Village, Unincorporated Area (If unincorporated, list municipality that provides postal service) in Township VII of I WILLS in said of Mat of the Board of Education (or Board of Directors) (full term) or Chool BALL district shall be a candidate for the office of (vacancy) to be voted for at the Consolidated Election to be held on ands (date of election). 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 all names during last 3 years) (List date of each name change) NAME VOTER'S PRINTED CITY, TOWN OR STREET ADDRESS OR COUNTY (VOTER'S SIGNATURE) VILLAGE RR NUMBER NAME (optional) sutu JL. Susan L Katoland W Elan 11 rahb 3. 4 56 Dall ELETIS 8 9. 10 linoi State of SS. County of (Circulator's Name) do hereby certify that I reside at 805 W Thornwood INAD in the City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip Code) QO 7 County of ane State of Things 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 -12 202 Signed and sworn to (or affirmed) by nnon van before me, on (Insert month, day, year) (Name of Circulator) "OFFICIAL SEAL" (SEAL)Juliet Gaber NOTARY PUBLIC, STATE OF ILLINOIS (Notary Public's Signature) My Commission Expires 06/29/2027 SHEET NO.

10 ILCS 5/10-3.1,	10-5.1
105 ILCS 5/9-10	

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Saint Charles SCHOOL	DISTRICT NUMBER	3 IN Kane	COUNT	Y, ILLINOIS
Heidi Lairgrieve	who resides at 37W3	% or page) of the voters residing with United Costs House in the provides postal service) in Township	he City, Village, Uninc	
district shall be a candidate for the office of		be of the Board of Education (o		
(vacancy) to be voted for at the Consolidate		0471, 2025 (date of el		
A Full Term is sought, unless an unexpi		year unexpired term		
If required pursuant to 10 ILCS 5/10 FORMERLY KNOWN AS		formation will appear on the ballot)		
(List a	I names during last 3 years) VOTER'SPRINTED	(List date o STREET ADDRESS OR	feach name change)	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1 Malala Halle	Nataly Shatten	558 Terms Lone	Rich Ebin"	Kane.
2. Josephine Multh	Josephine Muriella	521 Terrace Lave	South Elain	Kane
Blue Mulun	Barban Warner	491 Stortis Luna	South Elgin T	kane
* Julia	10N WARNER	491 STORING LAWE	SOUTH ELGIN	KANE
Then the	MirzA Bivic	647 Chostgifield LN	Soth ELgon"	KAWE
6. M/	Joseph Kare	639 Cherk field LA	S.Elgin "	Kane
". Rachel Kave	Rachel Kave	639 charle-field Ln	S. Elsin "	Kane
" husladers	Knstin/acev	1018 Mester Field Ln	S.Flan"	Kgno
" giper !!	PATRICY LALEY	lar enesternield Cn.	S. Flan"	Kine
1º aug Lege	AmyLepe	587 Chaster Field	S. Elgin"	Kane
State of Illinois			0	
County of Kane	) SS. )			
. Shannon Sullivan	(Circulator's Name) do hereby c	ertify that I reside at <u><math>805</math></u> W	Thornwood	Pr_, in the
City/Village/Unincorporated Area of	with Elgin	_ (if unincorporated, list municipality	y that provides postal	service) (Zip
Code <u>00177</u> , County of <u>Kane</u> 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 respective residences are correctly stated,	of filing of the petitions and are ition registered voters of the po	genuine and that to the best of my	knowledge and belief	the persons so
			A A	
		(Circellator	's)Signature)	
Signed and sworn to (or affirmed) by Sh	(Name of Circulator)		-12-2024	
	uter op de verseer en posisie à robei de San San de Fa	nh ns	1	
(FAL) "OFFICIAL SEAL"	3	gningh	M	
Juliet Gaber NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 06/29/2027	SHEET NO.	A (Notary Pu	blic's Signature)	

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	PETITION FO	OR NOMINATION		SBE No. P-7
TO THE COUNTY CLERK OR CO	OUNTY BOARD OF ELEC	TION COMMISSIONERS HA	VING JURISDIC	TION OVER
Jaint Charles SCHOOL	DISTRICT NUMBER 30	3 IN hane	COUNT	Y, ILLINOIS
district shall be a candidate for the office of (vacancy) to be voted for at the Consolidat A Full Term is sought, unless an unexp If required pursuant to 10 ILCS 5/10	who resides at 37W3 corporated, list municipality thet p f School Board of ted Election to be held on ired term is stated here: 0-5.1, complete the following (this int	provides postal service) in Township public of the Board of Education (or public of the Board of Education (or public of the Board of Education) (date of elucity) (date of elucity) formation will appear on the ballot)	Board of Directors)	corporated Area
FORMERLY KNOWN AS	all names during last 3 years)	TL NAME CHANGED ON(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 Karen En Mon	Karen Eridoon	1231 Broduite Dr	SOUTH Egine	Kane
affundaget 2	LANCE ERICKSO	1231 BROKEDE DR	SouthEller	KWE
Janny -	Tunny sais	UNHTOBookhavenin.	Candon Hill	Kare.
"pole-tonel	BOB JONES	724E. THOEN Wood	S.ELGT	KANE
* Catie Jorgs	katie Jones	724E. Thornwood	southeigin	Kane
- allean	John Sulliagh	805 WThornwood	SouthElgin	Kane
& Amon Mp	Mindy Kaplan	2173 W. Thornwood	Dr. Sproth ."	Kane
9.			,IL	
10.			,IL	
State of Illinois county of Kane 1. Shannon Sullivan	) ) SS. ) (Circulator's Name) do hereby c	vertify that I reside at $805  \omega$	Thornwood	LDC, in the
City/Village/Unincorporated Area of	buth Elgin	(if unincorporated, list municipality	that provides postal	service) (Zip
Code 20177, County of Kan 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 per respective residences are correctly stated,	of filing of the petitions and are tition registered voters of the po	s, and that the signatures on this sh genuine and that to the best of my	eet were signed in m knowledge and beliet	the persons so
Signed and sworn to (or affirmed) by $\underline{S}$	Name of Circulator)	before me, on [] -	s Sigulature) -12 - 2024 ert month, day, year)	
(SEAE) Juliet Gaber NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 06/29/2027	SHEET NO	3 (Notary Pu	blic's Signature)	

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PETITION FOR NOMINATIO
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F TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER 12465 SCHOOL DISTRICT NUMBER 303 IN Ane COUNTY, ILLINOIS the undersigned, being ( or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that who resides at 2W34D F pa. att in the City, Village, Unincorporated Area M (If unincorporated, list municipality that provides postal service) in Township \ MALATI MHOS in said of d N and of the Board of Education (or Board of Directors) (full term) or district shall be a candidate for the office of (vacancy) to be voted for at the Consolidated Election to be held on 2025 (date of election). A Full Term is sought, unless an unexpired term is stated here: year unexpired term 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) NAME CITY, TOWN OR VOTER'S PRINTED STREET ADDRESS OR COUNTY VILLAGE (VOTER'S SIGNATURE) **RR NUMBER** NAME (optional) 1908 LATSON AVE ST. CHANUES HANE BRENDAN BENERNES 4 80 1806 State of SS. County of (Circulator's Name) do hereby certify that I reside at 37,03404 HIEVE in the City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip ane Code) (d) (5, County of , State of linois 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. (Circulato HOUP Signed and sworn to (or affirmed) by before me, on (Name of Circulator) (Insert month day, year) OFFICIAL SEAL SHANNON S SULLIVAN Notary Public, State of Illinois (SEAL) Commission No 979286 My Com Dublin's Si ion Exe SHEET NO.

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PETITION	FOR	NOMINATION
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TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER atles school district number 303 in 200 COUNTY, ILLINOIS or more) (or 10% or more) (or 5% or more) of the voters regiding within said district, hereby petition that being who resides at 3/WH in the City, Village, Unincorporated Area 1010 (If unincorporated, list municipality that provides postal service) in Township( aut MHAG in said of PM/02.6f the Board of Education (or Board of Directors) (full term) or district shall be a candidate for the office of hon (vacancy) to be voted for at the Consolidated Election to be held on 2 (date of election). 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) NAME VOTER'S PRINTED STREET ADDRESS OR CITY, TOWN OR COUNTY VILLAGE (VOTER'S SIGNATURE) RR NUMBER NAME (optional) 1. 37 W 3 190 08 AVB SENDEN ICHAE State of SS. County of FAHAVE (Circulator's Name) do hereby certify that I reside at 37U City/Village/Unincorporated Area of ( (if unincorporated, list municipality that provides postal service) (Zip ane Code) Lon 15, County of State of nois 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. (Circulato LAMENP Signed and sworn to (or affirmed) by before me, on (Name of Circulator) (Insert mor h, day, year) OFFICIAL SEAL SHANNON S SULLIVAN Notary Public, State of Illinois (SEAL) n No. 97928 into, 2007lic's atur a Oth c SHEET NO.

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Suggested Revised March 2019 SBE No. P-7

TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER LS SCHOOL DISTRICT NUMBER 303 IN and COUNTY, ILLINOIS or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that undersigned, being ( who resides at 37W340 Hed in the City, Village, Unincorporated Area ANC (If unincorporated, list municipality that provides postal service) in Township ALAL MASin said district shall be a candidate for the office of for the Board of Education (or Board of Directors) (full term) or (vacancy) to be voted for at the Consolidated Election to be held on 2005 (date of election). A Full Term is sought, unless an unexpired term is stated here: year unexpired term 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) CITY, TOWN OR NAME VOTER'S PRINTED STREET ADDRESS OR COUNTY VILLAGE (VOTER'S SIGNATURE) **RR NUMBER** NAME (optional) RJ St Charles argrine have 3. HARL 6. an 613 ና Gaerth 20 IL. 11 11 sacre 1.1 enny JL 1408 Rto Fox HE IDECH STC CP p. State of SS County of (Circulator's Name) do hereby certify that I reside at TAMEUR (if unincorporated, list municipality that provides postal service) (Zip City/Village/Unincorporated Area 9f\_ Code) Code County of Kane State of Lunars 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 that I am 18 years of age or older (or 17 years of 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 ALMANQUE 1-11 Signed and sworn to (or affirmed) by before me, on (Name of Circulator) inset m hth, day, year) OFFICIAL SEAL SHANNON S SULLIVAN Notary Public, State of Illinois (SEAL) Commission No. 979288 ignature) ion Expires Octob tto 2027blic SHEET NO.

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PETITION FOR NOMINATION
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THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER LOS SCHOOL DISTRICT NUMBER 303 IN ANA COUNTY, ILLINOIS or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that the undersigned, being ( who resides at 501 ate in the City, Village, Unincorporated Area alat north in said (If unincorporated, list municipality that provides postal service) in Township, of Mole of the Board of Education (or Board of Directors) (full term) or district shall be a candidate for the office of has (vacancy) to be voted for at the Consolidated Election to be held on (date of election). 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 all names during last 3 years) (List date of each name change) NAME VOTER'S PRINTED STREET ADDRESS OR CITY, TOWN OR COUNTY (VOTER'S SIGNATURE) VILLAGE RR NUMBER NAME (optional) 1703 Cambridge Dr. St Charles ENNIT 1703 cambridge Dr. St. Charles Naz Liar attian 1703 cumbridge Dr. St. Churca ack NaZ Citor NGILIUM 4 47W lavarescir St. Charles 5. toy Leda EN CLAM 0 6 LAKE RIDGE DI JUSKO South 2 9 19 10 liza . Holes ι 850 Baler Hil 5 State of SS. County of (Circulator's Name) do hereby certify that I reside at 37W34D Kedbate THONE ١. City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip Code 0175 , County of ana State of INOIS 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 Signal IQUA Signed and sworn to (or affirmed) by before me, on (Name of Circulator) (Insert month, year) day. OFFICIAL SEAL SHANNON S SULLIVAN Notary Public, State of Illinois (SEAL) Commission No. 979288 mission Explanat October My Comm which and igna SHEET NO.

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THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER LLS SCHOOL DISTRICT NUMBER 303 IN Bane COUNTY, ILLINOIS he undersigned, or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that HAVE who resides at 3700340 fallate tal in the City, Village, Unincorporated Area (If unincorporated, list municipality that provides postal service) in Township Varati MHW in said district shall be a candidate for the office of of the Board of Education (or Board of Directors) (full term) or DATAL 2025 (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) FORMERLY KNOWN AS UNTIL NAME CHANGED ON (List date of each name change) (List all names during last 3 years) NAME VOTER'S PRINTED STREET ADDRESS OR CITY, TOWN OR COUNTY VILLAGE (VOTER'S SIGNATURE) **RR NUMBER** NAME (optional) .11 Deer Pt. D Homeward 21 1 WC Glan 25 K 10 7N450 Homeward Ble st. charles Tessica Blachtru Kane State of SS. Court (Circulator's Name) do hereby certify that I reside at 7N 461 Home Ward blen City/Village/Unincorporated Area of\_ (if unincorporated, list municipality that provides postal service) (Zip LINOIS Code 0 , County of 7 10 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. (Circu (gnature) indee Signed and sworn to (or affirmed) by before me, on (Name of Circulator) est month day\_year) OFFICIAL SEAL SHANNON S SUILIVAN Notary Public, State of Illinois Commission No 9288 (SEAL) sion Expires, Chlotelid 6, 2027 atur γ SHEET NO.

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TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER VILLASSCHOOL DISTRICT NUMBER 303 IN ane COUNTY, ILLINOIS or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that the undersigned, being We who resides at 37W340 Yrd inte City, Village, Unincorporated Area AMANE (If unincorporated, list municipality that provides postal service) in Township MINE UNITED in said of MOD DAM the Board of Education (or Board of Directors) (full term) or district shall be a candidate for the office of dass (date of election). (vacancy) to be voted for at the Consolidated Election to be held on A Full Term is sought, unless an unexpired term is stated here: year unexpired term 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 (VOTER'S SIGNATURE) RR NUMBER NAME (optional) 1. 3035 Meadow ale ver ecca 2 Karla 3 7. 8 7N939 Brittany (I m SS. County of andels Circulator's Name) do hereby certify that I reside at \_713 Redden 1 in the City/ /illage/Unincorporated Area of\_ (if unincorporated, list municipality that provides postal service) (Zip KANE Code) 60/14. County of LILINOIS . 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. Signed and sworn to (or affirmed) by 2(19 GA efore me. (Insert month, day, year) (Name of Circulator) OFFICIAL SEAL (SEAL) STEPHEN & BRUESEWITZ (Notary Public's Signature) NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 12/6/24 SH FT NO

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ETIT	ION	FOR	NOM	NAT	ON
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TO THE COUNTY CLERK OR COUNTY BOARD OF ELECTION COMMISSIONERS HAVING JURISDICTION OVER WELLS SCHOOL DISTRICT NUMBER 303 IN\_ Jane COUNTY, ILLINOIS \_ or more) (or 10% or more) (or 5% or more) of the voters residing within said district, hereby petition that undersigned, being ( who resides at 37W34D-Kedlate Halin the City, Village, Unincorporated Area AHOVE (If unincorporated, list punicipality that provides postal service) in Township And Martes in said Most Doural of the Board of Education (or Board of Directors) (full term) or district shall be a candidate for the office of (vacancy) to be voted for at the Consolidated Election to be held on 2025 (date of election). A Full Term is sought, unless an unexpired term is stated here: year unexpired term 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) NAME CITY, TOWN OR VOTER'S PRINTED STREET ADDRESS OR COUNTY VILLAGE (VOTER'S SIGNATURE) **RR NUMBER** NAME (optional) She tor NP navlo St Ch Kane 281 5 1 Duerr 715 Ca JSTANJUNE KNSI ANS P 1506 Patricia StCherli State of 4000 SS. County of Ficulator's Name) do hereby certify that I reside at \_\_\_\_\_\_ Red dun [ Kramal City village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip Code 01/9, County of\_ Rane State of. that I am 18 years of age or older (or 17 years of MOL 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. Signed and sworn to (or affirmed) by (Insert month, day, year) Name of Circulator) OFFICIAL SEAL STEPH EN R BRUESEWITZ ublic's Signature) OTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 12/6/24 SHEET NO.

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	PETITION FO	OR NOMINATION		SBE No. P-7
TO THE COUNTY CLERK OR C	OUNTY BOARD OF ELEC	TION COMMISSIONERS HA	VING JURISDIC	TION OVER
Saint Charles SCHOOL	DISTRICT NUMBER 30	3 IN Kane	COUNT	Y, ILLINOIS
of	who resides at <u>37103</u> corporated, list municipality thet school Bourd of ted Election to be held on <u>A</u> ired term is stated here: 0-5.1, complete the following (this in	UCHELLOOLLOON in tr provides postal service) in Township MOL of the Board of Education (or DELLOOLLOOL (date of ele year unexpired term formation will appear on the ballot) TIL NAME CHANGED ON	Board of Directors)	corporated Area
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
"hales	Michael Dakes	715 Heartland La	S. Elgin "	KARE
2 apr	Alison Oakos	715 Heurtland in	S. Elan"	Kave
3. Ed Shahito	ED STRANOTA	5N888 CHANERD	ST. ONAJ IL	KANE
"Lynthia & Strahola	CUNTHIASTRAHOI		and and a state of the state of	KANE
5. Ste Ahhl	Stacen Milalles	37 W325 Red Gatell	Sto Charles "	Kame
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State of <u>Illinais</u> County of <u>Kane</u> I. <u>David</u> <u>Faignee</u> City/Village/Unincorporated Area of <u>Se</u> Code) <u>6075</u> , County of <u>Kane</u> 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 per respective residences are correctly stated,	and Charles State of am a citizen of the United States of filing of the petitions and are tition registered voters of the po	s, and that the signatures on this she genuine and that to the best of my l	that provides postal years of age or olde eet were signed in m mowledge and belief	r (or 17 years of by presence, not the persons so
$\sim$	avid Fairgrieve (Name of Circulator)	Circulator's (Circulator's before me, on <u>11/11/27</u> (Inse OFFICIAL SEAL SHANNON S SULLIVAN Notary Public, State of Illinois Commission No. 375235 My Commission Expires October 10.	rt month, day, year)	-S. Sull
	SHEET NO.	N	87 84 988 - 13	