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

I hereby acknowledge receipt of the Notice of Obligation which outlines obligations and responsibilities under the Illinois Campaign Discolsure Act.

Date: 00 27 2025

Signature of Candidate or Agent

Suggested Revised March 2020 SBE No. P-1

STATEMENT OF CANDIDACY

ADDRESS-2P CODE: ADDRESS-2P C		
ADDRESS - 2P CODE: 120 S, STATE STH605 Elgin, IL 60123 PARTY: Democratic If required pursuant to 10 ILCS 517-10.2, 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) (Name of Candidate) being first duly sworn (or affirmed), say Ihat I reside at 120 S, STATE STH605, in the City, Village, Unincorporated Area of Flgin (If unincorporated, list municipality that provides postal service) Zip Code (ANE State of illinois; that I am a qualified voter therein and am a qualified Primary voter of the Democratic Party that I am a candidate for Nomination/Election to the office of Kane County Barran that I 17 ⁴¹ District, to be voted upon at the primary election to be held on March 17, 2020 (date of election) and that I am legality 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 Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official Democratic (Name of Party) Primary ballot for Nomination/Election for such office. Signed and swom to (or affirmed) by District of Candidate) Before me, on Oct 23 2025	NAME: Debore 11) (11)	Kane County Board
Elgin, IL 60123 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) (List date of each name change) STATE OF ILLINOIS SS. (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 120 S, STATE S+#605, in the City, Village, Unincorporated Area of FIGIN (Funincorporated, list municipality that provides postal service) Zip Code 60/23, in the County of KANE State of Illinois, that I am a candidate for Nomination/Election to the office of Manch 17, 2026 (date of election) and that I am legally qualified voler therein and am a qualified Primary voter of the Manch 17, 2026 (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 like 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 Democratic (Name of Party) Primary ballot for Nomination/Election for such office. Signed and sworn to (or affirmed) by Deformance of Candidate) Deformance of 10-5.1, complete the following this information of Candidate) Deformance of Candidate)	ADDRESS - ZIP CODE:	1 1
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) (List dale of each name change) STATE OF ILLINOIS SS. (Name of Candidate) being first duly sworn (or affirmed), say that I reside the last point of	120 S, STATE SA #605	DISTRICT: 12 - O 1-T
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) (List all names during last 3 years) (List all names during last 3 years) (List date of each name change) STATE OF ILLINOIS SS. (Name of Candidate) being first duly sworn (or affirmed), say that I reside to 120 S, STATE 5+ 605, in the City, Village, Unincorporated Area of 17 gin If unincorporated, list municipality that provides postal service) Zip Code 60/23, in the County of KANE State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the 12 party; that I am a candidate for Nomination/Election to the office of Kane County Board he 17 the District, to be voted upon at the primary election to be held on 12 party 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 like before the close of the petition filling 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 DemoCratic (Name of Party) Primary ballot for Nomination/Election for such office. Signature of Candidate)		
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Name of Candidate) being first duly swom (or affirmed), say that I reside at 120 S, STATE S+#605, in the City, Village, Unincorporated Area ofE		
Name of Candidate) being first duly sworn (or affirmed), say that I reside to the City, Village, Unincorporated Area of FIGIN in the City, Village, Unincorporated Area of FIGIN in the County of FANE State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the Name County Ratifan the Party; that I am a candidate for Nomination/Election to the office of Kane County Ratifan the 17th District, to be voted upon at the primary election to be held on March 17, 2026 (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 filled (or I will file before the close of the petition filling 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 Democratic (Name of Party) Primary ballot for Nomination/Election for such office.	i ss 183	
(Name of Candidate) being first duly sworm (or affirmed), say that I reside at 120 S, STATE ST #605, in the City, Village, Unincorporated Area of Elgin if unincorporated, list municipality that provides postal service) Zip Code 60/23, in the County of KANE State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the Democratic Party; that I am a candidate for Nomination/Election to the office of Kane County Board the 17 ⁴⁴ District, to be voted upon at the primary election to be held on March 17, 2026 (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 Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official Democratic (Name of Party) Primary ballot for Nomination/Election for such office. Signed and sworm to (or affirmed) by Democratic before me, on Oct 25-202.5	County of Kase)	à j 💆 🥒
(Name of Candidate) being first duly sworm (or affirmed), say that I reside at 120 S, STATE ST #605, in the City, Village, Unincorporated Area of Elgin if unincorporated, list municipality that provides postal service) Zip Code 60/23, in the County of KANE State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the Democratic Party; that I am a candidate for Nomination/Election to the office of Kane County Board the 17 high District, to be voted upon at the primary election to be held on March 17, 2026 (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 Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official Democratic (Name of Party) Primary ballot for Nomination/Election for such office. Signed and sworn to (or affirmed) by Duborah Willis before me, on Oct 25-202.5	,	
if unincorporated, list municipality that provides postal service) Zip Code 60/23, in the County of	1. Deboral Willis (Name of	
State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the Name County Boardn the 17th District, to be voted upon at the primary election to be held on March 17, 2026 (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 filled (or I will file before the close of the petition filling 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 Democratic (Name of Party) Primary ballot for Nomination/Election for such office. Signed and sworn to (or affirmed) by Deborah 41:11:5 before me, on Oct 25-202.5	at 120 S, STATE 5+#605 in the Cit	by, Village, Unincorporated Area of <u>E/gin</u>
Party; that I am a candidate for Nomination/Election to the office of Kane County Band the 17th District, to be voted upon at the primary election to be held on March 17, 2026 (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 Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official Democratic (Name of Party) Primary ballot for Nomination/Election for such office. Signed and sworn to (or affirmed) by Debatah Utilis before me, on Oct 25 2025	(if unincorporated, list municipality that provides postal service) Z	ip Code 60/23 in the County of
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Kane County Bardin the	Democratic Party; that I a	m a candidate for Nomination/Election to the office of
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Ethics Act and I hereby request that my name be printed upon the official Democratic (Name of Party) Primary ballot for Nomination/Election for such office. Signed and sworn to (or affirmed) by Deborah 4:1:5 before me, on Oct 25-2025	•	
Primary ballot for Nomination/Election for such office. Debotal Wellis (Signature of Candidate) Signed and sworn to (or affirmed) by Debotal Willis before me, on Oct 25-2025		
Primary ballot for Nomination/Election for such office. Debotal Wellis (Signature of Candidate) Signed and sworn to (or affirmed) by Debotal Willis before me, on Oct 25-2025)
Signed and sworn to (or affirmed) by Deborah 4:1/5 before me, on Oct 25-2025		
Signed and sworn to (or affirmed) by $Diborah u; l'; 5$ before me, on $Oct 25-202.5$	-	
Signed and sworn to (or affirmed) by $Diborah u:1:5$ before me, on $Oct 25-202.5$		Deboeah Wellis_
· · · · · · · · · · · · · · · · · · ·		(Signature of Candidate)
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· · · · · · · · · · · · · · · · · · ·	Signed and swam to for affirmed by Dil ACall	will: 5 before me on Oct 25-2025
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OFFICIAL SEAL	OFFICIAL SEAL	Sax Kleur
(SEAL STEPHEN R BRIFESEWITZ (Notary Public's Signature) Notary Public, State of Illinois	(SEAL STEPHEN R BRUESEWITZ	(Notary Public's Signature)
Commission No. 767997 My Commission Expires December 06, 2028	Commission No. 767997	1

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10 ILCS 5/7-10.1

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

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United States of America

SS.

State of Illinois

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.

Signed and sworn to (or affirmed) by

(Name of Candidate)

(SEAL

"official seal" Celeste K Wellandt COTARY PUBLIC, STATE OF ILLINOIS 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:

RECEIVED

nnt 27 2025

KANE COUNTY CLERK

Date to be entered by County Clerk

COMPLETE BUT DO NOT DETACH

Type or Hand Print Legibly

		1		
Deboral Your Name	L Willis			
Kane C	aunti.	Road	17	
Office or position				ent is filed
120 S, S	TATE S.	* #	605	
Mailing Address				
Flgin City		ZU		60123
City		State		Zip Code
All three pages m We will return th records.				
Location:	719 S. Bata Geneva, IL	via Ave. Bld 60134	g. B	
Mailing Address:	Kane Count Attn: EIS 719 S. Bat	1		

60134

Geneva, IL

te, the undersigned, members of an		u 1.	quaimed primary	electors or m
Democratic Party, in C	County Board District	, County of <u>KANE</u>	in the State of ill	
etition that <u>Deborah</u> (2)(1)		es at <u>120 S. STATE S</u> :		he(Clf), Village
nincorporated Area of <u>F/gin</u>	(if unincorporated,	list municipality that provides postal s	ervice) Zip Code <u>66</u>	<u>123</u> Count
I KANE and State of I	linois, shall be a candidate of th	e <u>DemocRATIC</u> PE	irty for the nomination	n for the office (
OUNTY BOARD MEMBER, County Boa			in the State of Illinois	, to be voted to:
t the primary election to be held on $17'$	" of march (date	of election).		
l Fuli Term is sought, unless an unexp	ired term is stated here:	year unexpired term		
If required pursuant to 10 ILCS 5/7-	10.2, complete the following (this in	formation will appear on the ballot)		
FORMERLY KNOWN AS		TIL NAME CHANGED ON		
NAME	alf names during last 3 years) VOTER'S PRINTED	STREET ADDRESS OR	each name change) CITY, TOWN OR	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
		<u>.</u>	<i></i>	<u> </u>
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2.	Timothy Carel	26 S. Dubois	Elain "	Kane
3 Allo The	Julic Gabel	26 5 DuBois AC	Eldin_"	Kane
4. Home to farm	Jose L. Frede	36 S. Dubois Are	الله المراكز المراكز	Kane
5 12 hand Van Wanter	Richard Van Wandel	31 S.Edison Ave	Elein	1cane
Elsice Van Wambeke	ELAIGEN WANDERS	SIJ. Edwarn AVE	Elgin "	Kero_
1. Organ S. Phillips	Peggy A-Phillips	59 5. Edison Ave	Elgin	Kune
8 SUMCY MOUSE	1200 MORESE	1295 21BOSAVE	6610 IL	KAK
9. Dervio DA	Sevarol, as	1125 Warther	E-Igin."	tane
10 Just alfred Villalds	Doselfittede	103 Standshet	E/Jan "	KANE
tate of ILLINOIS				<u> </u>
	} ss.			
ounty of KANK	}		1 1 /-	7
Jose Altopolillysto	(Circulator's Name) do hereby	certify that I reside at 103 SA	and the	in th
· · · · · · · · · · · · · · · · · · ·	,	orated, list municipality that provides		
ounty of Kange State of 💯	Uneis that I am 18 years of	age or older (or 17 years of age and	qualified to vote in il	linois), that I ar
cifizen of the United States, and that the				
ing of the petitions and are genuine and t		1 4		
ualified voters of the <u>Peynocraf</u>		vision in which the candidates is sec	eking nomination/ele	ctive office, an
at their respective residences are correct	ly stated, as above set forth.	Que all ar	1/Mala	
		(Circulator's	Signature)	
to and and animals to for attention by Topo	Alless Vilalabos	before me, on Oct	36 2029	5
igned and swoon to lot affirmed), by LASE OFFICIAL SEAL	(Name of Circulator)		nonth, day, year)	
STEPHEN A BRUESEWITZ		(tol)_0 15		
Commission No. 767997	P .	(Notary Put	nic's Signature)	
My Commission Expires December 0	SHEET NO			

fe, the undersigned, members of an	nd affiliated with the Demo	[o⊆RATiC Partva	nd qualified primary	electors of th
Democratic Party, In				
etition that Debarah Will				
nIncorporated Area of El 9 in				
KANE and State of I				
OUNTY BOARD MEMBER, County Boa	rd District in the	County of <u>ドかんと</u>		
the primary election to be held on 17	m of march (date	of election).		- -
Full Term is sought, unless an unexp	pired term is stated here:	year unexpired term		
10 If required pursuant to 10 ILCS 5/7	-10.2, complete the following (this in	formation will appear on the ballot)		
FORMERLY KNOWN AS		TIL NAME CHANGED ON		
NAME	all names during last 3 years) VOTER'S PRINTED	STREET ADDRESS OR	of each name change) CITY, TOWN OR	
: (VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
Jost Villalobor	Jose Villalobos	102	Elgin , 11. IL	KANE
2.00 1/1/1/10	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	103 Standish C-T	Eligin_"	1/2
- Morea Malovor	MARIA VILLALGE	STANSISH (C.)		KRNE
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tate of <u>JLL-1NO1S</u>) } \$\$.	i		
ounty of KANE) 33.			
Jose Alfons Ullahoo	, (Circulator's Name) do hereby (certify that I reside at <u>1835</u>	tandish CT	, in th
ity/Village/Unincorporated Area of	(if unincorp	orated, list municipality that provid	des postal service)(Zip (Code <u>) <i>6473</i></u>
ounty of <u>Filt Ne</u> , State of <u></u>	Livets that I am 18 years of	age or older (or 17 years of age a	nd qualified to vote in I	ilinois), that I ar
citizen of the United States, and that the	signatures on this sheet were s	igned in my presence, not more t	than 90 days preceding	the last day fu
ing of the petitions and are genuine and t				
ualified voters of the Denacratic	Party in the political di	vision in which the candidates is	seeking nomination/ele	ctive office, an
at their respective residences are correct	ly stated, as above set forth.	fore all	esselll	Voz
ጎ	110 111	(Cipculat	or's Signature)	_
igned and sworm to for affirmed) by USS	Allons Vilolobes	before me, onC	26202 rt month, day, year)	<u>v</u>
OFFICIAL SEAL STEPHEN R BRUESEWITZ	Name of Circulator)	84-A D.	2	
(SEAL)! Notary Public, State of Illinois Commission No. 767997	•	(Notary)	ublic's Signature)	
My Commission Expires December 06, 2	· · · ·	2 /	 , -•,	
1	SHEET NO.			

Suggeste Revised March 201 SBE No. P-2

/e, the undersigned, members of ar				
Democratic Party, in				
Petition that Debocal Willi	≤ who resid	es at <u>120 S. STATE</u> S#	<u></u> in th	e(City) Village
nincorporated Area of	(if unincorporated,	list municipality that provides postal s	ervice) Zip Code <u>60</u>	123 Count
		e <u>Democratic</u> Pa		
(OUNTY BOARD MEMBER, County Boa	ard District in the	County of KANE	in the State of Illinois,	to be voted fr
t the primary election to be held on	7th of march (date	of election).		
A Full Term is sought, unless an unexp	oired term is stated here:	yoʻar unexpired term		
If required pursuant to 10 ILCS 5/7	-10.2, complete the following (this in	formation will appear on the ballot)		
FORMERLY KNOWN AS	UNI all names during last 3 years)	TIL NAME CHANGED ON	sach name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	· · · - · ·
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1 Deboral Willis	Debora Dieselles	1205. STATES#	Elgin "	Kana
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tate of Illinois)			
ounty of Kane) SS.·)			
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ity/Village/Unincorporated Area of	4- 1 .	porated, list municipality that provides	nostal sonica)/7in C	odo) (2103
ounty of Kano State of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	age or older (or 17 years of age and		-
citizen of the United States, and that the	· ·	· k	· .	
ing of the petitions and are genuine and t	_	- 1 · · ·	- :	_
ualified voters of the Dom ortion	<u>. </u>	ivision in which the candidates is se	-	
rat their respective residences are correct			_ • •	
•		Delvareh (eielle.	
	borah Willis	(2/2	s Signature)	
igned and sworn to (or affirmed) by <u>1) c</u>	(Name of Circulator)	before me, on (Insert n	nonth, day, year)	
"OFFICIAL SEAL"	}	1 h. l. to L. l.	alandh	
(SEAL) Caleste K Weilandt	.}	(Notary Pul	blic's Signature)	
NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 01/10/2	SHEET NO.	3		
•••••				

e, the undersigned, members of an	d affiliated with the 100	MOCRATIC_ Party and	qualified primary elector	rs of the
De mocentic Party, in (County Board District 17	, County of <u>KANE</u>	in the State of Illinois,	do hereb
etition that Delocal UDI/	//s who resid	es at 120 S, State.	S.A. in the Cit	y, Village
nincorporated Area of <u>Elain</u>		list municipality that provides postal s		3Count
* <u>Elgin, KANF</u> and State of H		_		
OUNTY BOARD MEMBER, County Boa	- -			
the primary election to be held on				
Full Term is sought, unless an unexp	•			
	-10.2, complete the following (this in	- 1 l		
FORMERLY KNOWN AS	UN	: FIL 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 CO	YTNU
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	
1 Marchellin	Maria Cliftun	96 Asut De	Elain" Ku	arl
2 Robin L Brisco	Probin L Brise	re 498 Echegost	Flain	ane
Bevorly In Johnson	remise State	427 Eas Chycago St	ELGIA K	ANE
4 Trustral Rogers	County Koneys	364 E. Chillips AT6	Elgin " be	ine
Penelson Williams	Parkett	250g Amber-Ln	IE 6 12 " Kg	ene:
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10.			,IL.	
tate of 14LINO13	1		<u>' </u>	
ounty of KANF	ý ss.	l. 		
~ · /	(Cimulatorie Name) do herebu :	certify that I reside at 120 S	State State	, in th
ity/Village/Unincorporated Area of El 9		porated, list municipality that provides		,
ounty of Kane , State of		age or older (or 17 years of age and		that Lai
citizen of the United States, and that the		·		
ing of the petitions and are genuine and t	•	- L '		_
ualified voters of the Democrat	_	H		-
at their respective residences are correct	,		1	mico, un
		1 () olgono	(e) elle	
_	1 1 11	(Circulator)	s Signature)	
igned and swore to (or office od) by	dancaballilis	before me, on Oct	25 2125	
OFFICIÁL SEA			nonth, day, year)	— .
(SEAL) STEPHEN R BRUES Notary Public, State of	f Illinois	State	2115	
Commission No. 76 My Commission Expires Deci	57997	(Notary Pul	olic's Signature)	•
	SHEET NO	<i>f</i> /		

X...BIND HERE. X

Suggeste Revised March 201 SBE No. P-2

		A D A T C Party and	qualified primary 6	electors of th
re, the undersigned, members of and Democratic Party, in C	i affiliated with the <u>-Deprio</u>	Country Kn A/F.	in the State of Illi	nois, do hereb
Democratic Party, in Costilion that Deborah Willi	county Board District 7 7		in th	re City. Village
nincorporated Area of <u>Figin</u>	(if unincompreted li	ist municipality that provides postal st	envice) Zip Code 60	123 Count
	(ii unincorporated, ii	Democratic Pa	rty for the nomination	for the office (
and State of III OUNTY BOARD MEMBER, County Boar	of Dietrict / 7 in the (Country of KANE I	in the State of Illinois	to be voted for
the primary election to be held on 12^{4}	March dates	of election).		·
. The primary election to be ried on <u>7.7</u> . Full Term is sought, unless an unexpi				
	10.2, complete the following (this inf			
FORMÉRLY KNOWN AS	UNT	IL NAME CHANGED ON		
	all names during last 3 years) VOTER'S PRINTED	STREET ADDRESS OR	each name change) CITY, TOWN OR	
NAME (VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
		21 11 11	Can (1)	VAN
1. Onun 2h	JAMES, JOIN	2 N. M. C.	Elg NU	<u> </u>
2. Mit Warchush	Matt Daveluc	K 1071 Demmonds	Elgin"	Kane
3. Murasar	LAURA ZORV	JIN WORTH	£7(911)	WE.
4. Dorda Harles	Kondra Harbeck	246 Wha Park	Elgin "	Kare_
5 Number Her	Cuera L. Hance	1658 Litter Ct.	tain 3	zu~
6. Con A A Constant	Stephen Hansen		±1,000 € (1,000) € (1,000 € (1,000 € (1,000 € (1,000 € (1,000 € (1,000 € (1,000) € (1,000 € (1,000 € (1,000 € (1,000) € (1,000 € (1,000) € (1,000 € (1,000) € (1,000 € (1,000) € (1,000 € (1,000) € (1,000) € (1,000) € (1,000) € (1,000) € (1,000) € (1,000) € (1,000) € (1,000	Kahl
7. XIM GROWN	Stephen House	1000 11-01	,IL	$\overline{}$
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9.			JI.	\longrightarrow
10.				
tate of Ilinaic				
1. 6	ss.			
ounty of Kank)	· ca a Acc	سايدان بوسف	
MICHAEL RENDE	(Circulator's Name) do hereby	certify that I reside at 48 CAIG	HON AVE	in th
ity/Village/Unincorporated Area of EL	(if unincon	porated, list municipality that provides	2 bosisi service)(zib (Code) <u>Ø07Ø</u> 2
	TL that I am 18 years of	age or older (or 17 years of age and	qualified to vote in I	linois), that I al
citizen of the United States, and that the	signatures on this sheet were s	signed in my presence, not more that	n 90 days preceding	ning the politic
ing of the petitions and are genuine and t	that to the best of my knowledge	e and belief the persons so signing w	ere at me ume or sig	ortive office an
ualified voters of the <u>DEMOORATI</u> &		ivision in which the candidates is se	өхий пошизиоте	COTE OINCE, OIL
at their respective residences are correct	tly stated, as above set forth.	Mah		
	•	/ (Circulator	s Signature)	
igned and swom to (or affirmed) by	(Chnel Kenda	before me, on Scatem	ber 13,2	<u>825 </u>
······	(Name of Circulator)	(Insert r	month, day, year)	1
OFFICIAL SEAL } MIGUEL MANUEL VALENTE		Megneld Mun	murel Well	ent &
NOTARY FUBLIC, STATE OF ILLINOIS COMMISSION NO. 1015959		(Notary Pu	blic's Signature)	_
MY COMMISSION EXPIRES AUGUST 25, 2029	SHEET NO	<u> </u>		
		<u>'</u>		

<i>i</i> te, the undersigned, members of an	d affiliated with the <u>-Demi</u>	Party and	qualified primary of	alectors of th
<u>Democratic</u> Party, in C	County Board District	County of KANE	in the State of III	inais, do hereb o
Petition that <u>Deborah Will</u>	<u>i ≤</u> who resido	es at <u>120 S. 57478 S</u>	/in_tl	he(City), Village
nincorporated Area of <u>F/g/m</u>		•		123 Coum
f <u> ドANE</u> and State of II	llinois, shall be a candidate of the	e Demicettic Pa	arty for the nomination) for the office (
OUNTY BOARD MEMBER, County Boa	rd District in the (County of <u>KANE</u>	in the State of Illinois	, to be voted for
t the primary election to be held on 17^4	" of march (date	of election).		
\ Full Term is sought, unless an unexp	lred term is stated here:	year unexpired term		
If required pursuant to 10 ILCS 5/7-	-10.2, complete the following (this inf	formation will appear on the ballot)		
FORMERLY KNOWN AS		I FIL NAME CHANGED ON		
	all names during last 3 years)		each name change)	
NAME (VOTER'S SIGNATURE)	VOTER'SPRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. =//:	MANIE (optional)	i AA	- JIL	
alico) Harris	Alice HARRIS	12055HHEST 78	06	KANE
2. Solado Roduc	EAL MARRODE 16-6	Z 266 EPARKAVE	SUGALGROVE	KANE
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1/42 /1 d 1 1	Pinasee 1	
Takerara WITIS	Takendra Willis	2943 uplana vo	Jame 1	Kane
Come Jour	[Jamel - lowk	586 GOSLIGHT Dr	Algoria uu	l'ane
CM-chelle useton	Michelle Weston	184 S. WAREN ST	EKQ IN "	tane
6. (awou dumsou	armin garren	المانية والمانية	Elvin "	JOOK.
7. When they	To ANN Stiveley	1405 Rayal Blad	Z, IL	Y
8.001	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.50	7 1	V A . F
Yendrea Giwel	ANDREA CHUEE		ECUIN "	VIVE -
Talana Tingen (ASA)	tationaliper botton	14N81Olacan Realiza	Junda	Kanes
Gladys Fope IL	Gladys Cope 2	465+hibbardAue	Elgin "	Kane
tate of ILLINOIS	,		\circ	
ounty of KANE	ss.			
~ ^ ^ P	,	_		+ 1,
Deborah (e)11/5		certify that I reside at 1205		<u>605</u> , in th
ity/Village/Unincorporated Area of <u></u> <u></u> <u></u> <u> </u>	, _	porated, list municipality that provide		_
ounty of Kano , State of	·	age or older (or 17 years of age and		
citizen of the United States, and that the		-		
ing of the petitions and are genuine and t		I	_	
ualified voters of the Dollow Call		ivision in which the candidates is se	eking nomination/ele	ctive office, an
at their respective residences are correct	ly stated, as above set forth.	Delmaral	1020000	
		(Circulator	s Signature)	
igned and swom to (or affirmed) by	ebarab Willis	before me, on Oz+	25 202	25
OFFICIAL SEAL	(Name of Circulator)	Ou (Inserti	month, day, year)	-
STEPHEN R BRUESEW (SEAL) Notary Public, State of Illi	inois	Style	1105	
Commission No. 7679 My Commission Engires Decemb	97	(Notary Pu	blic's Signalure)	
•••••	SHEET NO.	<u> </u>		

We, the undersigned, members of an	d affiliated with the Daysof	AARATIC Party and	qualified primary	electors of th
_	County Board District <u>17</u>	County of KANE	in the State of III	
	-	es at 120 S. STATE S		he (City), Village
unincorporated Area of $E/9/n$	····	list municipality that provides postal s	. ,	1/23 Count
"	linois, shall be a candidate of the	1	the nominato	
COUNTY BOARD MEMBER, County Boa			the State of Illinois	be voted for
t the primary election to be held on 17^4				目
\ Full Term is sought, unless an unexp		l lä:	27 OCT 2075	
If required pursuant to 10 ILCS 5/7-	10.2, complete the following (this int	formation witi appear on the ballot)	RECEIVED	
FORMERLY KNOWN AS		FIL NAME CHANGED ON		7
(List	all names during last 3 years) VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
(VOTER'S-SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
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William State of 2	ELAINE S KITTRIEDOS	E 13075THTE#903	II CON	KHNE
Howa Riles		120 G. STATE ST #508	Elgin	KANE
3.7		120 9 STATE ST	احاصم	DAME
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5. armed Known			C (4 4 - 1 L	1-1KC
Bruce Kuchar	Bruce Knohar	120 S State #ala	Elgin	KUNG
6. Sanui Wantet	Sankie Wyenkist	120 S. State 200	El9 iù "	Kane
MIMI ODISHO	2 a loha	607 130	El SIN	Line
8	и <i>V</i> 2	100 . 1 · · · · · · · · · · · · · · · · · ·	- <i>0</i> , , , , , , , , , , , , , , , , , , ,	1/2 1/5
9 MONAN YOUKKA	ال مانت الل	1004170STa	ELGIN-	1/01/0
IN COUNTY DEVICES	MAKIN COUNT	120.58faff4100	1 (11/11) 1	Kane
10 Level Dona	KET A goda	120 S, SIAL ST	ZLEW"	KAKE.
tate of 1441018)	#401		
1 1 1 1	ss.	7-1		
ounty of KAIVE	,			سمرا الخد
Deborobledillis	(Circulator's Name) do hereby	certify that I reside at <u>126 S</u>	STATE SY	- 1 60 in th
ity/ Allage/Unincorporated Area of $rac{\mathcal{E} I}{2}$		porated, list municipality that provide		
ounty of Kano, State of		age or older (or 17 years of age and		
citizen of the United States, and that the				
ing of the petitions and are genuine and t				
ualified voters of the <u>Dennocrost</u>		ivision in which the candidates is se	eking normmandmen	ouve unice, ac
rat their respective residences are correct	ly stated, as above set forth.	Deloperal (erelles	
		(Circulator	s Signature)	
igned and sworn to (or affirmed) by \underline{D}	eheaho Willis	before me, on	25 2	025
OFFICIAL SEAL	(reame of Circulator)	(Insert)	month, day, year)	
(SEAL) STEPHEN R BRUESE Notary Public, State of II		Jul K Sin	117	
Commission No. 7679 My Commission Expires Decem	997 🗗 _	—— (Notary Po	blic's Signature)	
2 wy wormmaann Expres Decer	CHEET NO	/l '		