

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 17, 2026 - 2026 General Primary.

Receipt For: **Victoria Davidson-Bell**
825 Western Ave
Geneva, IL 60134

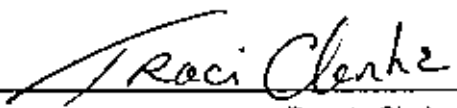
Filed: October 27, 2025 at 12:57:20 PM.

Office: FOR PRECINCT COMMITTEEPERSON, Geneva 10 Party: Democratic

The following have been received:

- ☒ Statement of Candidacy
- ☐ Loyalty Oath
- ☒ Petition Pages 1
- ☐ Receipt for Economic Interest Statement (EIS)

Received from: _____

By: 
Deputy Clerk

John A. Cunningham - Kane County Clerk

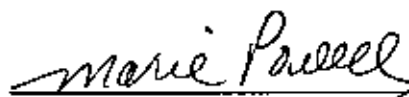
Name and Title of Local Clerk/Secretary

Printed: 10/27/2025 12:59:18PM

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 Disclosure Act.

Date: 10/27/25


Signature of Candidate or Agent

STATEMENT OF CANDIDACY

NAME: <u>Victoria Davidson-Bell</u>	OFFICE: <u>precinct-committee person</u>
ADDRESS - ZIP CODE: <u>825 Western Avenue</u> <u>Geneva, Illinois 60134</u>	A Full Term is sought, unless an unexpired term is stated here: _____ year unexpired term
	DISTRICT: <u>10th precinct Geneva</u>
	PARTY: <u>Democratic</u>

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 _____ UNTIL NAME CHANGED ON _____
 (List all names during last 3 years) (List date of each name change)

STATE OF ILLINOIS

County of Kane County } SS. 330-54-9082

I, Victoria Davidson-Bell (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 825 Western Avenue, in the City, Village, Unincorporated Area of Geneva (if unincorporated, list municipality that provides postal service) Zip Code 60134, 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 precinct-committee person in the 10th precinct 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.

Victoria Davidson-Bell
 (Signature of Candidate)

Signed and sworn to (or affirmed) by Victoria Davidson-Bell before me, on 10/13/2025
 (Name of Candidate) (Insert month, day, year)

(SEAL)



Kristin W. Schultz
 (Notary Public's Signature)

PRECINCT COMMITTEEPERSON PRIMARY PETITION

We, the undersigned, members of and affiliated with the Democratic Party and qualified primary electors of the Democratic Party, in Geneva, precinct 10 (township name and precinct number) in the County of Kane, State of Illinois, do hereby petition that Victoria Davidson-Bell who resides at 825 Western Avenue in the City Village, Unincorporated Area of Geneva (if unincorporated, list municipality that provides postal service) Zip Code 60134, County of Kane and State of Illinois, shall be a candidate of the Democratic Party for election to the office of PRECINCT COMMITTEEPERSON, for Geneva precinct 10 (township name and precinct number), to be voted for at the primary election to be held on March 17, 2026 (date of election).

If required pursuant to 10 ILCS 5/7-10.2, 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 SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>Victoria Davidson-Bell</u>	<u>Victoria Davidson-Bell</u>	<u>825 Western Avenue</u>	<u>Geneva</u>	<u>Kane</u>
<u>Rachel Davidson-Bell</u>	<u>Rachel Davidson-Bell</u>	<u>825 Western Ave</u>	<u>Geneva</u>	<u>Kane</u>
<u>Thomas Gould</u>	<u>Thomas Gould</u>	<u>921 Western</u>	<u>Geneva</u>	<u>Kane</u>
<u>Sharon Beck</u>	<u>Sharon Beck</u>	<u>921 Western</u>	<u>Geneva</u>	<u>Kane</u>
<u>Kristine Collins</u>	<u>Kristine Collins</u>	<u>809 Western</u>	<u>Geneva</u>	<u>Kane</u>
<u>Linda Palmer</u>	<u>Linda Palmer</u>	<u>1167 Lilyrose Ln</u>	<u>"</u>	<u>"</u>
<u>Tim Collins</u>	<u>Tim Collins</u>	<u>809 Western Ave</u>	<u>Geneva</u>	<u>Kane</u>
<u>Kelly Miller</u>	<u>Kelly Miller</u>	<u>701 Forrest Ave</u>	<u>Geneva</u>	<u>Kane</u>
<u>Jeff Long</u>	<u>Jeff Long</u>	<u>931 Western Ave</u>	<u>Geneva</u>	<u>Kane</u>
<u>Dan Palmer</u>	<u>Daniel Palmer</u>	<u>1167 Lilyrose Lane</u>	<u>Geneva</u>	<u>Kane</u>

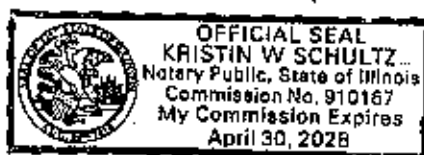
State of Illinois } SS. 330-59-9082
County of Kane }

I, Victoria Davidson-Bell (Circulator's Name) do hereby certify that I reside at 825 Western Avenue, in the City/Village/Unincorporated Area of Geneva (if unincorporated, list municipality that provides postal service) (Zip Code) 60134, County of Kane, State of Illinois 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 for 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 qualified voters of the Democratic Party in the political division in which the candidates is seeking nomination/elective office, and that their respective residences are correctly stated, as above set forth.

Victoria Davidson-Bell
(Circulator's Signature)

Signed and sworn to (or affirmed) by Victoria Davidson-Bell before me, on October 13, 2025
(Name of Circulator) (Insert month, day, year)

(SEAL)



Kristin W. Schultz
(Notary Public's Signature)