



INSTRUCTIONS FOR CANDIDATES FOR THE OFFICE OF TRUSTEE

This packet includes forms and basic information to assist you with filing nominating papers for Library District Trustee for the Lemont Public Library District. For further information we advise that you contact the State Board of Elections (<http://www.elections.il.gov>) or legal counsel. Library staff may not advise candidates on this matter, nor may they notarize candidate paperwork.

QUALIFICATIONS: Candidates must:

1. Be a qualified elector (registered voter) residing in the Lemont Public Library District for not less than one year prior to the filing of his/her nomination papers; and
2. Not have been convicted in any court in the United States of any infamous crime, bribery, perjury, or other felony; and
3. Not be in arrears in the payment of a tax or other indebtedness due to the Lemont Public Library District.

FILING PERIOD: November 16 – November 23, 2026

FILING TIME: Monday, November 16 – Thursday, November 19 from 9:00 a.m. to 9:00 p.m.; Friday, November 20 - Saturday, November 21 from 9:00 a.m. to 5:00 p.m.; Sunday, November 22 from 1:00 p.m. – 5:00 p.m.; and Monday, November 23 from 9:00 a.m. to 5:00 p.m. The date and time of submission must be noted by staff at the time of receipt.

BALLOT ORDER: The order of the ballot is determined by the order in which the petitions are filed. If two or more candidates are waiting to file petitions when the Library opens a lottery will take place to determine who will be first on the ballot. Anyone who mails in a petition, which is received that morning is considered part of the tie and will also be included in the lottery. After this, order is determined by the order in which petitions are filed. A similar lottery will be held at filing closing time, if more than one person files during the last hour.

SIGNATURE AND REQUIREMENTS: A number of qualified voters residing in the District equivalent to at least 2% of the votes cast at the last election for library trustee, or 50, whichever is less. To be eligible to sign a petition, a person must be a registered voter and a resident of the Library District.

CIRCULATORS: The person circulating the petition must be at least 18 years old and a U.S. citizen at the time the petition is circulated. The person does not have to be a registered voter.

All signatures must be taken in the presence of the person circulating the petitions.

CANDIDATES MUST FILE THE FOLLOWING: [All of which is included in the Petition Packet, with the Local Election Official (Library Board Secretary) or her deputy at the time and place given above]:

1. Receipt for filing Statement of Economic Interest (Statement must be filed with the County Clerk of the county in which the principal office of the Library is located (Cook) by Monday, November 23, 2026, the last day to file. The Statement must be filed during the calendar year in which the nominating petitions are filed.
2. Statement of candidacy (must be notarized)
3. Petitions (must be notarized)
4. Loyalty Oath, which is optional (must be notarized)

These documents are to be attached (preferably on top) to the nominating petitions.

CANDIDATES SHOULD RECEIVE FROM THE LIBRARY AT THE TIME OF FILING:

1. Notice of obligation to comply with the Illinois Campaign Financing Act (the library will obtain receipt signed by candidate for this). If candidates file by mail, the Notice will be sent to him or her by first class mail.
2. Receipt for filing petition and Statement of Candidacy.

OBJECTIONS: May be filed with local election official within five (5) business days following the last day of the petition filing period.

CAMPAIGN FINANCIAL DISCLOSURE: File with the State Board of Elections and County Clerk.

Please refer to the Candidate's Guide for complete information. (2027 Candidate's Guide) <https://www.elections.il.gov/RunningForOffice.aspx?MID=rOlNCTNZd9A%3d>

Illinois State Board of Elections, Running for office webinar, YouTube:
<https://www.youtube.com/watch?v=m27BJ9B3oUY>

Dates relevant to election of Library Trustees at the Consolidated Election schedule for April 6, 2027

TRUSTEES - LIBRARY DISTRICTS

Tuesday, August 25, 2025: First day to circulate nominating petitions.

Monday, November 16, 2026, to
Monday, November 23, 2026: Seven (7) day period within which to file nominating petitions with Library Board Secretary

Tuesday, April 6, 2027: Consolidated Election

Attached are excerpts from the Candidate's Guide, 2027, issued by the State Board of Elections.

CANDIDATE CHECKLIST

- Meet **residency, age, and other qualifications** for the specific office
- File paperwork with the SBE [Campaign Disclosure division](#)
- File a notarized **Statement of Candidacy** including (but not limited to):
 - Your name
 - Your address
 - Office sought
 - Party
 - Office location (for example, the district or county)
 - Date of the election
- File a **Statement of Economic Interests receipt**
- File a **Loyalty Oath** (optional)
- File a **Code of Fair Campaign Practices** (optional)
- File notarized **petition sheets** with the required number of signatures, numbered consecutively starting with the number “1”
- Include a **Certificate of Deletions** with petitions, numbered consecutively starting with the number “1” (if applicable)
- Fill out **data entry card** (for people who file with the State Board of Elections) and place on top of nominating petition packet (does not need to be attached to packet)
- **File with the appropriate** election authority (see specific office in this guide for details)

NOTE: This checklist is not binding and should not be construed as sufficient argument in response to any objection or legal argument. If you have further questions, you may contact the division of Election Operations at the State Board of Elections or your legal counsel.

D-5 NOTICE OF OBLIGATION

TO: All Candidates for Nomination, Election or Retention to Public Office and for Questions of Public Policy

This letter is to officially notify you of your filing obligation under Article 9 of the Election Code (An Act to Regulate Campaign Financing).

ALL CAMPAIGN DISCLOSURE DOCUMENTS, INCLUDING THE D-1 STATEMENT OF ORGANIZATION, MUST BE FILED WITH THE STATE BOARD OF ELECTIONS ONLY.

The Act requires a political committee to file a form D-1, Statement of Organization, within 10 business days of the creation of such committee, except any political committee created within the 30 days before an election must file a Statement of Organization within 2 business days. Required forms and A Guide to Campaign Disclosure are available from the Board offices and online. Failure to file or late filing of a Statement of Organization will result in a civil penalty being imposed by the Board.

Committees who must file fall within five categories: Candidate Political Committee, Political Party Committee, Political Action Committee, Ballot Initiative Committee, or Independent Expenditure Committee.

10 ILCS 5/9-1.8 Political Committees

Candidate Political Committee: means the candidate himself or herself or any natural person, trust, partnership, corporation, or other organization or group of persons designated by the candidate that accepts contributions or makes expenditures during any 12 month period in an aggregate amount exceeding \$5000 on behalf of the candidate.

Political Party Committee: means the State central committee of a political party, a county central committee of a political party, a legislative caucus committee, or a committee formed by a ward or township committeeman of a political party. A legislative caucus committee means a committee established for the purpose of electing candidates to the General Assembly by the person elected President of the Senate, Minority Leader of the Senate, Speaker of the House of Representatives, Minority Leader of the House of Representatives, or a committee established by 5 or more members of the same caucus of the Senate or 10 or more members of the same caucus of the House of Representatives.

Political Action Committee: means any natural person, trust, partnership, committee, association, corporation, or other organization or group of persons, other than a candidate, political party, candidate political committee, or political party committee, that accepts contributions or makes expenditures during any 12 month period in an aggregate amount exceeding \$5000 on behalf of or in opposition to a candidate or candidates for political office. Political Action Committee includes any natural person, trust, partnership, committee, association, corporation, or other organization or group of persons, other than a candidate, political party, candidate political committee, or political party committee, that makes electioneering communications during any 12 month period in an aggregate amount exceeding \$5000 related to any candidate or candidates for public office.

Ballot Initiative Committee: means any natural person, trust, partnership, committee, association, corporation, or other organization or group of persons that accepts contributions or makes expenditures during any 12 month period in an aggregate amount exceeding \$5000 in support of or in opposition to any question of public policy to be submitted to the electors. Ballot initiative committee includes any natural person, trust, partnership, committee, association, corporation, or other organization or group of persons that makes electioneering communications during any 12 month period in an aggregate amount exceeding \$5000 related to any question of public policy to be submitted to the voters. The \$5000 threshold applies to any contributions or expenditures received or made with the purpose of securing a place on the ballot for, advocating the defeat or passage of, or engaging in electioneering communication regarding the question of public policy, regardless of the method of initiation of the question of public policy and regardless of whether petitions have been circulated or filed with the appropriate office or whether the question has been adopted and certified by the governing body.

Independent Expenditure Committee: means any trust, partnership, committee, association, corporation, or other organization or group of persons formed for the exclusive purpose of making independent expenditures during any 12-month period in an aggregate amount exceeding \$5000 in support of or in opposition to (i) the nomination for election, election, retention, or defeat of any public official or candidate or (ii) any question of public policy to be submitted to the electors. "Independent expenditure committee" also includes any trust, partnership, committee, association, corporation, or other organization or group of persons that makes electioneering communications that are not made in connection, consultation, or concert with or at the request or suggestion of a public official or candidate, a public official's or candidate's designated political committee or campaign, or an agent or agents of the public official, candidate, or political committee or campaign during any 12-month period in an aggregate amount exceeding \$5000 related to (i) the nomination for election, election, retention, or defeat of any public official or candidate or (ii) any question of public policy to be submitted to the voters.

RECEIPT FOR FILING

Receipt is hereby acknowledged of the petition or caucus certificate of:

NAME

ADDRESS

OFFICE

DISTRICT PARTY

This petition/caucus certificate is deemed filed at: _____ o' clock (AM) (PM) on _____.
(insert month, day, year)

DATED: _____
(insert month, day, year)

SIGNATURE OF ELECTION AUTHORITY

STATEMENT OF CANDIDACY**NONPARTISAN**

NAME:	OFFICE:
	A Full Term is sought, unless an unexpired term is stated here: ____ year unexpired term
ADDRESS – ZIP CODE:	CITY, VILLAGE OR SPECIAL DISTRICT:

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)
) SS.
 County of _____)

I, _____ being first duly sworn (or affirmed), say that I reside at _____, in the City, Village, Unincorporated Area of _____
 (if unincorporated, list municipality that provides postal service) Zip Code _____, in the County of _____, State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/

Election to the office of _____ in the _____
 (Name of City, Village or Special District)

to be voted upon at the election to be held on _____ (date of election) and that I am legally qualified 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 Candidate)

Signed and sworn to (or affirmed) by _____ before me, on _____
 (Name of Candidate) (insert month, day, year)

(SEAL)

 (Notary Public's Signature)

ATTACH TO PETITION

10 ILCS 5/7-10.1

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

L O Y A L T Y O A T H
(OPTIONAL)

United States of America)
)
State of Illinois) SS.

I, _____, 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.

(Signature of Candidate)

Signed and sworn to (or affirmed) by _____ before me,
(Name of Candidate)

on _____.
(insert month, day, year)

(Notary Public's Signature)

(SEAL)

NONPARTISAN PETITION
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)

We, the undersigned, qualified voters in the _____ in the
(unit of government)
County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan
Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held
on _____ (date of election).

NAME:	OFFICE:
ADDRESS:	
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 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.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the
City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip

Code) _____, County of _____, 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.

(Circulator's Signature)
Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (Insert month, day, year)

(SEAL)

(Notary Public's Signature)

NONPARTISAN PETITION
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)

We, the undersigned, qualified voters in the _____ in the
(unit of government)
County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan
Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held
on _____ (date of election).

NAME:	OFFICE:
ADDRESS:	
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 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.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the
City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip

Code) _____, County of _____, 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.

(Circulator's Signature)
Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (Insert month, day, year)

(SEAL)

(Notary Public's Signature)

NONPARTISAN PETITION
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)

We, the undersigned, qualified voters in the _____ in the
(unit of government)
County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan
Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held
on _____ (date of election).

NAME:	OFFICE:
ADDRESS:	
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 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.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the
City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip

Code) _____, County of _____, 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.

(Circulator's Signature)
Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (Insert month, day, year)

(SEAL)

(Notary Public's Signature)

NONPARTISAN PETITION
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)

We, the undersigned, qualified voters in the _____ in the
(unit of government)
County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan
Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held
on _____ (date of election).

NAME:	OFFICE:
ADDRESS:	
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 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
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2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the
City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip

Code) _____, County of _____, 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.

(Circulator's Signature)
Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (Insert month, day, year)

(SEAL)

(Notary Public's Signature)

NONPARTISAN PETITION
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)

We, the undersigned, qualified voters in the _____ in the
(unit of government)
County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan
Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held
on _____ (date of election).

NAME:	OFFICE:
ADDRESS:	
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 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
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3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the
City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip
Code) _____, County of _____, 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.

(Circulator's Signature)
Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (Insert month, day, year)

(SEAL)

(Notary Public's Signature)

NONPARTISAN PETITION
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)

We, the undersigned, qualified voters in the _____ in the
(unit of government)
County of _____ and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan
Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held
on _____ (date of election).

NAME:	OFFICE:
ADDRESS:	
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 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.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the
City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip

Code) _____, County of _____, 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.

(Circulator's Signature)
Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (Insert month, day, year)

(SEAL)

(Notary Public's Signature)

I, _____, Candidate or Circulator (circle one) do hereby certify that I have properly initialed the deletions of signatures, listed hereinafter by page and line numbers, from the petition of _____ (Name of Candidate) who is a candidate for election or nomination (circle one) to the office of _____ at the _____ Election to be held on _____ (date of election).

[illegible]

(Signature of Person Deleting Signatures)

Only the person circulating the petition, or the candidate on whose behalf the petition is circulated, may strike any signature from the petition. If deletions are made, this **CERTIFICATION OF DELETIONS** shall be filed as part of the petition.

CERTIFICATE OF ATTACHED LIST OF DELETIONS

We, the undersigned persons who have stricken signatures from the attached hereby certify that there is/are _____ page(s) of **CERTIFICATION OF DELETIONS** listing signatures which have been stricken, and are attached hereafter to the petitions of _____ (Name of Candidate) who is a candidate for election to the office of _____ at the _____ Election to be held on _____ (date of election).

The following are the page numbers indicated on the attached **CERTIFICATION OF DELETIONS**:

(CANDIDATE)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

(Circulator)

Every person striking signatures from the petition shall each sign this certificate. This certificate shall be filed as part of the petition, shall be numbered, and shall be attached immediately following the last page of voters' signatures and preceding any **CERTIFICATE OF DELETION** sheet.

SHEET NO. _____



Statement of Economic Interests Form

Instructions, Receipt and FAQ

CANDIDATES ONLY

Instructions

- You may find the following documents helpful in completing this form:
 - ➔ Federal income tax returns.
 - ➔ Including any related schedules, attachments, and forms.
 - ➔ Investment and brokerage statements.
- To complete this form, you do not need to...
 - ➔ Disclose specific amounts or values.
 - ➔ Report interests relating to political committees registered with the Illinois State Board of Elections, or political committees, principal campaign committees, or authorized committees registered with the Federal Election Commission.
 - ➔ The information you disclose will be available to the public.
- You must answer all 7 questions.
 - ➔ Certain questions will ask you to report any applicable assets or debts held in, or payable to, your name; held jointly by, or payable to, you with your spouse; or held jointly by, or payable to, you with your minor child.
- If you have any concerns about whether an interest should be reported, please consult your Department's Ethics Officer, if applicable (*See the State Officials and Employees Ethics Act, 5 ILCS 430*).
 - ➔ Please ensure that the information you provide is complete and accurate.
 - ➔ All filers, **including candidates**, without ethics counsel should consult an attorney.
 - ➔ The Cook County Clerk cannot provide legal advice.
- If you need more space than the form allows, please attach additional pages for your response.
- If you are subject to the State Officials and Employees Ethics Act, your Ethics Officer must review your Statement of Economic Interests before you file it.
- ✱ Failure to complete the statement in good faith and within the prescribed deadline may subject you to fines, imprisonment, or both.

Receipt of Statement of Economic Interests Form (CANDIDATES ONLY)

1. **Complete** the receipt information below.
2. **Bring this page**, with your completed Statement of Economic Interests Form, to the Cook County Clerk's office to be stamped and filed.

- List each office or position of employment for which this statement is filed below:

.....
.....

- Receipt is hereby acknowledged of your Statement of Economic Interests.
- ➔ Filed pursuant to the Illinois Governmental Ethics Act.
 - ➔ Filed as of this date.

Name: _____

Address: _____

City: _____ State: IL Zip: _____

*Cook County Stamp
Here*

FAQ

The Statement of Economic Interest, required by law to be filed by candidates for office, elected officials and certain government employees, has been changed by state law. There are new questions and requirements for disclosure.

➤ See ILCS 5 ILCS 420/Article 4a for a full list of specific legal filing requirements

To assist in completing a Statement of Economic Interest, the following information may be helpful:

- The law requires filers to disclose certain types of assets and debts.
 - **Assets that are subject to the requirements of disclosure** include stocks, bonds, sector mutual funds, sector exchange traded funds, real estate investments, beneficial interest in trusts, business interests and partnership interests.
 - **Assets that are NOT subject to the requirements of disclosure** include personal residences, personal vehicles, savings or checking accounts, bonds notes or securities issued by any branch of the government, Medicare benefits, inheritances, or bequests (other than beneficial interest in trusts), diversified funds, annuities, pensions, retirement accounts, qualified college savings plans, tax exempt disability plans, and tangible personal property.
 - **Debts that are subject to the requirements of disclosure** include any money or monetary obligation owed at any time during the preceding calendar year to an individual, company or other organization, personal loans from friends or business associates, business loans made outside a lender's regular course of business, and loans made below market interest rates.
 - **Debts that are NOT subject to the requirements of disclosure** include loans from a financial institution, government agency, or business entity that are granted on terms made available to the general public, mortgages, student loans, credit card debts or car loans.
- The definition of "[f]amily" includes a filer's spouse, children, stepchildren, parents, stepparents, siblings, step-siblings, sons and daughters in law, grandparents, grandchildren, as well as parents and grandparents of the filer's spouse, and any person living with the filer.
- This information is for informational purposes only.
 - All legal duties arise from the statutory language in ILCS 5 ILCS 420/Article 4a.



**Statement of
Economic Interests Form
CANDIDATES ONLY**

Cook County Stamp
Here

Basic Information

Name: _____

Full Mailing Address: _____

List each office or position of employment
for which this statement is filled: _____

Preferred email
Address (optional): _____

Questions

1. If you have any single asset that was worth more than \$10,000 as of the end of the preceding calendar year and is held in, or payable to, your name, held jointly by, or payable to, you with your spouse, or held jointly by, or payable to, you with your minor child, list such assets below. In the case of investment real estate, list the city and state where the investment real estate is located. If you do not have any such assets, list "none" below.

.....
.....

2. Excluding the position for which you are required to file this form, list the source of any income in excess of \$7,500 required to be reported during the preceding calendar year. If you sold an asset that produced more than \$7,500 in capital gains in the preceding calendar year, list the name of the asset and the transaction date on which the sale or transfer took place. If you had no such sources of income or assets, list "none" below.

<u>Source of Income / Name of Asset</u>	<u>Date Sold (if applicable)</u>
.....	
.....	
.....	

3. Excluding debts incurred on terms available to the general public, such as mortgages, student loans, and credit card debts, if you owed any single debt in the preceding calendar year exceeding \$10,000, list the creditor of the debt below. If you had no such debts, list "none" below. List the creditor for all applicable debts owed by you, owed jointly by you with your spouse, or owed jointly by you with your minor child. In addition to the types of debts listed above, you do not need to report any debts to or from financial institutions or government agencies, such as debts secured by automobiles, household furniture or appliances, as long as the debt was made on terms available to the general public, debts to members of your family, or debts to or from a political committee registered with the Illinois State Board of Elections or any political committee, principal campaign committee, or authorized committee registered with the Federal Election Commission.

.....
.....

4. List the name of each unit of government of which you or your spouse were an employee, contractor, or office holder during the preceding calendar year other than the unit or units of government in relation to which the person is required to file and the title of the position or nature of the contractual services.

<u>Name of Unit of Government</u>	<u>Title or Nature of Services</u>
.....	
.....	
.....	

5. If you maintain an economic relationship with a lobbyist or if a member of your family is known to you to be a lobbyist registered with any unit of government in the State of Illinois, list the name of the lobbyist below and identify the nature of your relationship with the lobbyist. If you do not have an economic relationship with a lobbyist or a family member known to you to be a lobbyist registered with any unit of government in the State of Illinois, list "none" below.

<u>Name of Lobbyist</u>	<u>Relationship to Filer</u>
.....	
.....	
.....	

6. List the name of each person, organization, or entity that was the source of a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500 received during the preceding calendar year and the type of gift or gifts, or honorarium or honoraria, excluding any gift or gifts from a member of your family that was not known to be a lobbyist registered with any unit of government in the State of Illinois. If you had no such gifts, list "none" below.

.....	
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.....	

7. List the name of any spouse or immediate family member living with the person making this statement employed by a public utility in this State and the name of the public utility that employs the relative.

<u>Name and Relation</u>	<u>Public Utility</u>
.....	
.....	
.....	

Verification

"I declare that this Statement of Economic Interests (including any attachments) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement is a fine not to exceed \$2,500 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Name of Filer (print): _____

Date: _____

Signature: _____

Certification of Ethics Officer Review (State of Illinois Only)

If this Statement of Economic Interests requires ethics officer review prior to filing, the applicable ethics officer must complete the following:
"In accordance with law, as Ethics Officer, I reviewed this Statement of Economic Interests prior to its filing."

Printed Name of
Ethics Officer: _____

Date: _____

Preferred email
address (optional): _____

Signature: _____