

## FEBRUARY AND APRIL 2021 ELECTIONS

### ESTABLISHED POLITICAL PARTIES, INDEPENDENT, NEW POLITICAL PARTY AND NONPARTISAN OFFICES TO BE ELECTED

- MUNICIPAL  
Mayor or President  
Clerk  
Treasurer  
Alderman or Trustee
- TOWNSHIP  
Supervisor  
Clerk  
Assessor  
Highway Commissioner  
Trustees
- PARK DISTRICT – Commissioners, Trustees
- PUBLIC LIBRARY DISTRICT – Trustees
- TOWNSHIP AND MUNICIPAL LIBRARY – Trustees
- REGIONAL BOARD OF SCHOOL TRUSTEES – Trustees
- SCHOOL DISTRICT – Board Members
- COMMUNITY COLLEGE DISTRICT – Trustees
- FIRE PROTECTION DISTRICT – Trustees

#### **FILING DATES AND DEADLINES:**

**November 16-23 2020** Filing period for candidates seeking nomination at the **FEBRUARY 23, 2021 Consolidated Primary Election**. Petitions may NOT be circulated prior to August 25, 2020. File with local election official in main district office.

**December 14-21, 2020** Filing period for candidates seeking election at the **APRIL 6, 2021 Consolidated Election**. Petitions may NOT be circulated prior to September 22, 2020. All candidates, except school board members, MUST file with local election official in main district office.

#### **SIGNATURE REQUIREMENTS:**

**Established Party Candidates:** Ballots Cast (highest # within party) x .5% (.5% (.005) of the qualified **primary** electors of their **party**. For political subdivisions, the number of primary electors shall be determined by taking the total vote cast for the candidate for that political party who received the highest number of votes in the political subdivision at the last regular election at which an officer was regularly scheduled to be elected from that subdivision.

**Independent Candidates:** Ballots Cast x 5% =minimum  
Ballots Cast x 8% = maximum (or 50 more than the minimum)

**New Party Candidates:** Ballots Cast x 5%

**Park District Candidates:** Ballots Cast x 2% or not less than 25

**Public Library Candidates:** Ballots Cast x 2% or 50 signatures, whichever is less.

**Municipal/Township Library Candidates:** 25 minimum

**Fire Protection District Candidates:** 5% of registered voters or 25, whichever is less.

**Board of Education Candidates:** 10% of registered voters or 50 signatures, whichever is less.

#### **NOMINATION PAPERS MUST BE SECURELY FASTENED TOGETHER AND INCLUDE:**

**STATEMENT OF CANDIDACY** – Must include the candidate's name, the candidate's legal address and the office sought. Changes cannot be made after the filing of the nomination papers.

**NOMINATING PETITIONS WITH NUMBER OF SIGNATURES REQUIRED** (*pages sequentially numbered*) – *The form of the candidate's name for the ballot will be taken from the first numbered page of the nomination petition. The top of each petition page must include the candidate's name, legal address, title of office, term and district.*

**LOYALTY OATH** (*optional*)

**RECEIPT OF FILING STATEMENT OF ECONOMIC INTEREST** - *Required by the Illinois Governmental Ethics Act, this form must be filed with the County Clerk and a receipt issued. The receipt must be filed with the petition papers. The receipt is the only form that may be added to nomination papers once they have been filed.*

**CERTIFICATION OF DELETIONS** – *This form is completed by the candidate or circulator deleting a name from the petition for nomination. A separate form must be used by each person striking signatures.*

**CERTIFICATION OF ATTACHED LIST OF DELETIONS** – *This form is completed by the candidate in addition to the Certificate of Deletions if names are deleted from the petitions.*

**Disclaimer:** *This is not legal advice. The McHenry County Clerk's office is providing this for general information purposes only. All candidates should consult with legal counsel regarding election matters. The McHenry County Clerk's office cannot recommend an attorney or give legal advice on these matters. For the complete Election Calendar and Candidates Guide please visit the Illinois State Board of Elections Website: [www.elections.state.il.us](http://www.elections.state.il.us)*

**STATEMENT OF CANDIDACY**

**NONPARTISAN**

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

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)

**Statement of Economic Interests to be Filed with the County Clerk**  
(Type or Print)

Name: \_\_\_\_\_

Each Office or Position of Employment for which this Statement is Filed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Full Post Office Address: \_\_\_\_\_

**GENERAL DIRECTIONS**

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If more space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of \$5,000 fair market value, or from which dividends in excess of \$1,200 were received during the preceding calendar year: (In the case of real estate, location thereof shall be listed by street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor, or served in any advisory capacity, from which income in excess of \$1,200 was derived during the preceding calendar year:

Name	Address	Type of Practice
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding \$5,000 was received for professional services rendered during the preceding calendar year by the person making the statement:

\_\_\_\_\_  
\_\_\_\_\_

- 4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 or more was realized during the preceding calendar year:

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- 5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning or real estate during the preceding calendar year, if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing, or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year:

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- 6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file, from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity: (No time or demand deposit in a financial institution nor any debt instrument need be listed.)

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- 7. List the name of any unit of government that employed the person making the statement during the preceding calendar year, other than the unit or units of government in relation to which the person is required to file:

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- 8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year:

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**VERIFICATION**

I declare that this Statement of Economic Interests (including any accompanying schedules and statements) 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 shall be a fine not to exceed \$1,000, or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment.

\_\_\_\_\_  
(Signature of Person Making Statement)

\_\_\_\_\_  
(Date)