

# PUBLIC LIBRARY DISTRICT BOARD – TRUSTEE

## Public Library District

### NOMINATION PAPERS

**Petitions:** Nonpartisan (SBE Form P-4)

**Statement of Candidacy:** Nonpartisan (SBE Form P-1A)

**Loyalty Oath (optional):** All candidates (SBE Form P-1C)

**Statement of Economic Interests:** Filed with the county clerk of the county in which the principal office of the unit of local government with which the person is associated is located. (5 ILCS 420/4A-106) See page 19 regarding filing the receipt.

**Fair Campaign Practices Act (voluntary):** Filed with the State Board of Elections or the county clerk.

### QUALIFICATIONS

Qualified elector of the library district with one-year residency in the library district at the time nomination papers are filed. (75 ILCS 16/30-20(d))

A person is not eligible to serve as a library trustee who, at the time of filing nomination papers, is in arrears in the payment of a tax or other indebtedness due to the library district or has been convicted in any court located in the United States of any infamous crime, bribery, perjury, or other felony. (75 ILCS 16/30-20(e))

### SIGNATURE 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 trustees, or 50, whichever is less. (75 ILCS 16/30-20(a))

26 minimum

### FILING DATES

December 12-19, 2022 (not more than 113 nor less than 106 days prior to the consolidated election).

### WHERE TO FILE

With the Library District Secretary.

### TERM

7 Trustees: 6-year terms. The library board may, by resolution, change to 4-year terms. (75 ILCS 16/30-10)

### TERM BEGINS

The third Monday of the month (May 15, 2023) following the regular election of trustees. (75 ILCS 16/30-10, 30-40)

Within 74 days after their election or appointment, the incumbents and new trustees shall take their oath of office and meet to organize the board. (75 ILCS 16/30-40(a))

## CAMPAIGN DISCLOSURE

Reports must be filed either on paper or electronically with the State Board of Elections, 2329 S. MacArthur Blvd., Springfield, IL 62704 or 69 W. Washington St., Pedway LL-08, Chicago, IL 60602.

**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).

<b>NAME:</b>	<b>OFFICE:</b>
<b>ADDRESS:</b>	
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.

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

Witnessed 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)**

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<b>ADDRESS:</b>	
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2.			,IL	
3.			,IL	
4.			,IL	
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7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ )      SS.

\_\_\_\_\_  
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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 or older 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)

Subscribed and sworn to (or affirmed) by \_\_\_\_\_ before me, on \_\_\_\_\_  
(Name of Circulator) (Insert month, day, year)

(SEAL)

\_\_\_\_\_  
(Notary Public's Signature)

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(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)**

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4.			,IL	
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6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) SS.

\_\_\_\_\_, (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 or older 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)

Witnessed 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)**

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ate of \_\_\_\_\_ )  
County of \_\_\_\_\_ )

SS.

\_\_\_\_\_(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 or older 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)

Witnessed 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).

<b>NAME:</b>	<b>OFFICE:</b>
<b>ADDRESS:</b>	
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If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot)

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(List all names during last 3 years)

(List date of each name change)

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7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ )

SS.

\_\_\_\_\_ (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 or older 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)

Witnessed and sworn to (or affirmed) by \_\_\_\_\_ before me, on \_\_\_\_\_  
(Name of Circulator) (Insert month, day, year)

(SEAL)

\_\_\_\_\_  
(Notary Public's Signature)



**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

**LOYALTY OATH**  
(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)