## **COUNTY OFFICERS**

Circuit Clerk, Recorder, State's Attorney, Auditor, Coroner, -Board of Review Members (excluding Cook County)



**Petitions.** Established Party (<u>SBE Form P-10</u>), Independent (<u>SBE Form P-3</u>), New Party (<u>SBE Form P-8</u>)

Statement of Candidacy Established Party (SBE Form P-1), Independent (SBE Form P-1B), New Party (SBE Form P-1D)

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

Statement of Economic Interests, Filed with the County Clerk, T

**Statement of Economic Interests** Filed with the County Clerk The receipt must be filed with petitions or by the end of the filing period

# SIGNATURE REQUIREMENTS

Established Party At least 5% (005) of the vote cast for any candidate of the party who received the highest number of votes in the county at the last General Election. The highest vote getter could be any federal, state or county candidate [10 ILCS 5/7-10(c)] Independent. Not less than 5% nor more than 8% (or 50 more than the minimum, whichever is greater), signed by qualified voters of the county, of the total number of persons who voted at the last General Election in the county. (10 ILCS 5/10-3)

New Party Not less than 5% of the number of persons who voted at the last General Election in the county Where 5% is greater than 25,000, 25,000 is the minimum number of signatures required (10 ILCS 5/10-2)

For specific signature calculations, contact your county clerk

## GIUNGUNEORIMATION

Established Party Not more than 113 nor less than 106 days prior to the General Primary (10 ILCS 5/7-12)

**Independent & New Party:** Not more than 141 nor less than 134 days prior to the General Election (10 ILCS 5/10-6)

Candidates will file in the office of the County Clerk Candidates in Peoria County file with the Peoria County Board of Election Commissioners

Campaign Contributions Reports must be filed either electronically or on paper with the State Board of Elections, 2329 S MacArthur Blvd , Springfield, IL 62704, or 100 West Randolph St , Suite 14-100, Chicago, IL 60601

### QUALIFICATIONS.

[Illinois Supreme Court Rule 701, 10 ILCS 5/7-10, 10-5)

- 18 years of age licensed attorneys must be 21 years old
- United States citizen
- Resident of the county for 30 days\*
- Registered voter in county or county board district
- \*Candidates for State's Attorney do not have residency requirements, but must be citizens of the United States and licensed attorneys in Illinois

#### FILING PERIODS.

**Established Party** 

November 25 – December 2, 2019

Independent and New Party
June 15 – June 22, 2020

#### TERM

**Term of office:** Four years\* and until a successor is elected and qualified

\*Elected Board of Review members Six years and until a successor is elected and qualified (35 ILCS 200/6-35)

Term begins: December 1, 2020\*

County Auditor (55 ILCS 5/3-1001)

Circuit Clerk (705 ILCS 105/1 1)

Coroner (55 ILCS 5/3-3002)

Recorder of Deeds (55 ILCS 5/3-5004)

State's Attorney (55 ILCS 5/3-9002)

\*Elected Board of Review members 10 Days after the canvass of the vote is completed (35 ILCS 200/6-35)

# GENERAL PRIMARY PETITION

	PRIMA	RYPETITION				
We, the undersigned, members of and a						
	Party, in the	of		n the C	County of	
, and State o	of Illinois, do hereby petition	that the following named p	person or pe	ersons shall be a candi	date(s) of the	
Party for the	nomination/election for the o	office or offices hereinafter s	specified to b	be voted for at the Prima	ary Election t	
be held on	(date of election)					
NAME		OFFICE		ADDRESS		
		011102		7.051.100		
	A Full Term is sought stated here y	t, unless an unexpired term is ear unexpired term				
If required pursuant to 10 ILCS 5/7-10 2, 8-8 1 or 1 FORMERLY KNOWN AS	UNTIL NAM	ME CHANGED ON				
	uring last 3 years)		f each name cha			
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED  NAME (optional)	STREET ADDR RR NUMB		CITY, TOWN OR VILLAGE	COUNTY	
1			· · · · · · · · · ·	,IL		
2				,IL		
3				,IL		
4				,IL	331	
5				,IL		
6				,IL		
7				,iL		
8				,IL		
9				,IL		
10	<u> </u>			,iL		
ounty of	) ) SS					
Junty 01	(Circulator's Name) do her	aby cartify that I reside at			ın f	
ity/Village/Unincorporated Area of						
ode), County of						
inois), that I am a citizen of the United Si						
e last day for filing of the petitions and	_					
gning the petition qualified voters of						
omination/elective office, and that their re						
			(Circulato	r's Signature)		
. La . La		hafaa aa aa		-		
igned and sworn to (or affirmed) by	(Name of Circulator)	before me, on	(Insert	month, day, year)		
(SEAL)			(Noten: Di	ublic's Signature)		
			(INDIALLY P	ubilo a oighalufe)		

SHEET NO \_\_\_\_\_

(SEAL)

Suggested Revised March, 2019 SBE No P-1

### STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY	
:					
		A Full Term is sought, unless an unexpired term is stated here year unexpired term			
If required pursuant to 10 ILCS 5/7-	•				
FORMERLY KNOWN AS(List al	l names during last 3 years)	JNTIL NAME CHANGED ON	(List date of each	name change)	
STATE OF ILLINOIS	)				
County of	) SS )				
I,	(Name	of Candidate) being first d	uly sworn (or affirme	ed), say that l	
reside at		ın the City, Villaç	ge, Unincorporate	d Area of	
(ı	f unincorporated, list munic	ipality that provides postal	service) Zip Code _	, in	
the County of	, State of Illinois,	that I am a qualified voter	therein and am a qu	alified Primary	
voter of the	Party, the	at I am a candidate for N	iomination/Election t	o the office of	
in the District, to be voted upon at the primary election to be held					
on (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 I	nterests as required	by the Illinois	
Governmental Ethics Act and I hereby request that my name be printed upon the official					
(Name of Party) Primary ballot for Nomination/Election for such office					
		(Sign;	ature of Candidate)	<del></del>	
		(0.9			
Signed and sworn to (or affirmed)	by	befo	re me, on		
Signed and sworn to (or affirmed)	(Name of Candida	ate)	re me, on (insert mo	onth, day, year)	

(Notary Public's Signature)

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10 ILCS 5/7-10 1

Suggested Revised July, 2004 SBE No P-1C

### LOYALTY OATH (OPTIONAL)

United States of America	)	SS		
State of Illinois	)	33		
1,		-	_, do swear (or affirm) that I	am a citizen of the
United States and the State of Illi	inois, that I	am not affili	ated directly or indirectly w	rith any communist
organization or any communist fro	ont organizat	tion, or any	foreign political agency, pa	rty, organization or
government which advocates the	overthrow o	of constitutio	nal government by force c	or other means not
permitted under the Constitution of	the United S	States or the	Constitution of this State, tha	at I do not directly or
indirectly teach or advocate the ov	erthrow of t	he governme	ent of the United States or	of this State or any
unlawful change in the form of the	government	s thereof by	force or any unlawful means	5
			(Signature of	Candidate)
0 l l l l l l l l l l l l l l l l l l l	**************************************			before me,
Signed and sworn to (or af	Tirmea) by	(N	ame of Candidate)	before the,
on				
(insert month, day, year)				
			(Notany Pul	blic's Signature)
(0541)			(Notally Ful	olic a olynature)
(SEAL)				