

**CONSOLIDATED ELECTION – APRIL 1, 2025**

**MUNICIPAL OFFICES:**

<b>SUPERVISOR</b>	<b>4 Year Term</b>
<b>CLERK</b>	<b>4 Year Term</b>
<b>ASSESSOR</b>	<b>4 Year Term</b>
<b>TRUSTEE</b>	<b>4 Year Term</b>
<b>HIGHWAY COMMISSIONER</b>	<b>4 Year Term</b>

**ELIGIBILITY/RESIDENCY:** See Illinois Compiled Statute. (60 ILCS 1/55-5) **Note: All candidates for township assessor must file a certificate of qualifications with their nomination papers pursuant to the provisions of Section 2-45 of the Property Tax Code. (35 ILCS 200/2-45)**

**CIRCULATION PERIOD:** August 20, 2024 through November 18, 2024. (10 ILCS 5/10-4)

**SIGNATURE REQUIREMENTS:** see attached "Signature Requirements." (10 ILCS 5/10-3)

**NOMINATION PAPERS** must contain:

1. **Statement of Candidacy:** CC #P-1B (10 ILCS 5/10-4, 10-5, 10-5.1)

The Statement of Candidacy form must include, among other requirements, the candidate's name, the candidate's legal address and the office sought. The form of the candidate's name may include his or her given name, initials, or nickname. **Changes cannot be made after the filing of the nomination papers.**

2. **Petition for Nomination:** CC #P-3 (10 ILCS 5/10-3, 10-4, 10-5.1)

The form of the candidate's name for inclusion on 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 (if applicable). The form of the candidate's name should be the same on every petition for nomination page. The form of the candidate's name may include their given name, initials, or nickname. No degree or title may be used.

**Candidates must have the required number of signatures as indicated above.**

The person circulating the petition for nomination must complete and sign the bottom portion in the presence of a notary. Each petition page must be notarized. The person circulating the petition for nomination may not notarize their own circulator's affidavit and signature. Blank petition pages may be photocopied or additional forms are available from the Township Clerk. **All petition pages must be the same size (either legal or letter), securely fastened together and consecutively numbered.**

3. **Statement of Economic Interests:** (5 ILCS 420/4A-105, 420/4A-106; 10 ILCS 5/10-5)

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 and is the only form that may be added to your petition papers once they have been filed. Filing the receipt later will not change the date or time of the original filing, but it must be filed with the Township Clerk by close of business on **November 18, 2024.*** A candidate who filed a Statement of Economic Interests for the same unit of government within the calendar year does not need to re-file. **NOTE:** *A receipt is not required to accompany nomination papers when the Statement of Economic Interests is already on file with the same officer who accepts the nomination papers.*

4. **Loyalty Oath:** CC #P-1C (optional) (10 ILCS 5/7-10.1)

If completed, file with nomination papers.

5. **Certificate of Deletions:** CC #P-2A (10 ILCS 5/7-10, 8-8, 10-3)

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 (candidate or circulator) striking signatures.

6. **Certificate of Attached List of Deletions:** CC #P-2B (10 ILCS 5/10-3)

This form summarizes the Certificate of Deletions pages and must be signed by the candidate and all circulators striking signatures.

**FILING DATES AND PROCEDURES:** (10 ILCS 5/10-3, 10-6, 10-6.2)

1. Nomination papers are filed **Tuesday, November 12, 2024 through Monday, November 18, 2024, with the Township Clerk** during normal office hours. Petitions may be filed in person by the candidate or a representative, or by mail. **Nomination papers received in the mail before the first day of the filing period will be returned to the sender as not filed.**

2. Nomination papers will be stamped noting the day and hour filed. A receipt is issued to the filer. All petitions filed by persons waiting in line at the opening of normal office hours on the first day of filing, **November 12, 2024**, and those petitions received in the day's first mail delivery are deemed "simultaneously" filed. Two or more petitions filed within the last hour of the filing deadline, **November 18, 2024**, shall be deemed filed simultaneously for last position on the ballot.

3. Candidates for established political parties appear first on the ballot followed by new political party candidates and finally, by independent candidates. Ballot position within each of these categories is determined by the time of filing. A public lottery determines ballot position when two or more petitions from the same political party are simultaneously filed for the same office. The Township Clerk will notify candidates involved in the lottery of the time and place the lottery is to be held.

This packet of information is being provided by the Lake County Clerk's office as a courtesy to prospective candidates. Information and suggested forms are also available on the Illinois State Board of Elections website at [www.elections.il.gov](http://www.elections.il.gov). It is important to note that Nominating Petition papers are subject to legal challenge by objectors if improperly completed. The Electoral Board, chaired by the Clerk, holds hearings to consider and resolve these objections. However, please be advised that the Clerk and staff are not able to provide legal opinions to individuals regarding their petition papers. Prospective candidates are encouraged to consult their own legal advisors on questions related to qualifications for office, preparation of petition papers, circulator requirements, signature requirements, etc., because once the petition papers are officially filed they cannot be changed or amended.

**CONSOLIDATED ELECTION – APRIL 1, 2025**  
**SIGNATURE REQUIREMENTS: INDEPENDENT CANDIDATES**  
**TOWNSHIPS**  
(10 ILCS 5/10-3)

Nominations of independent candidates for public office within any district or political subdivision less than the State, may be made by nomination papers signed in the aggregate for each candidate by qualified voters of such district, or political subdivision, equaling not less than 5%, nor more than 8% (or 50 more than the minimum, whichever is greater) of the number of persons, who voted at the next preceding regular election in such district or political subdivision in which such district or political subdivision voted as a unit for the election of officers to serve its respective territorial area. county or municipality for which the greatest total number of votes were cast for all candidates, divided by the number of districts or wards, but in any event not less than 25 qualified voters of the district or ward.

**NOTICE TO CANDIDATES WHO HAVE CHANGED NAMES  
WITHIN THE LAST THREE YEARS**

**P.A. 102-15**

If a candidate has changed his or her name, whether by a statutory or common law procedure in Illinois or any other jurisdiction, within 3 years before the last day for filing the petition or certificate for that office, whichever is applicable, then (i) the candidate's name on the petition or certificate must be followed by "formerly known as (list all prior names during the 3-year period) until name changed on (list date of each such name change)" and (ii) the petition or certificate must be accompanied by the candidate's affidavit stating the candidate's previous names during the period specified in "(i)" and the date or dates each of those names was changed; failure to meet these requirements shall be grounds for denying certification of the candidate's name for the ballot or removing the candidate's name from the ballot, as appropriate but **these requirements do not apply to name changes resulting from adoption to assume an adoptive parent or parents' surname, marriage or civil union to assume a spouse's surname, or dissolution of marriage or civil union or declaration of invalidity of marriage or civil union to assume a former surname or a name change that conforms the candidate's name to his or her gender identity.**

Pursuant to P.A. 102-15 and 10 ILCS 5/16-3, said information shall appear on the ballot along with the candidate's current name.

**STATEMENT OF CANDIDACY  
INDEPENDENT**

Name _____	Phone _____
Address _____	City _____ Zip _____
Office _____	District _____ Term _____ <small>(if applicable)</small>

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 the last 3 years) (List date of each name change)

STATE OF ILLINOIS }  
COUNTY OF LAKE } SS.

I, \_\_\_\_\_, being first duly sworn (or affirmed) say that I  
(Candidate's Name)

reside at \_\_\_\_\_ in the City / Village / Unincorporated Area (circle one)  
(Street Address)

of \_\_\_\_\_, \_\_\_\_\_ in the County of \_\_\_\_\_, State of Illinois;  
(If unincorporated, list municipality that provides postal service) (Zip Code)

that I am a qualified voter therein; that I am a candidate for **Election** to the office of \_\_\_\_\_

in \_\_\_\_\_ to be voted upon at the **Consolidated Election to be held on the 1<sup>st</sup>**  
(City, School, College, or Special District)

**day of April 2025**; and that I am legally qualified to hold such office and that I have filed (or 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 election to such office.

\_\_\_\_\_  
(Signature of Candidate)

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

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
(Day) (Month) (Year)

\_\_\_\_\_  
(Signature of Notary Public)

(SEAL)

**PETITION FOR NOMINATION  
INDEPENDENT CANDIDATE**

We, the undersigned, qualified voters in the Township of \_\_\_\_\_, in the County of Lake and State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for Election to the office hereinafter specified to be voted upon at the Consolidated Election to be held on the 1<sup>st</sup> day of April 2025.

Name _____	Phone _____
Address _____	City _____ Zip _____
Office _____	District _____ <i>(if applicable)</i>

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 the last 3 years)* *(List date of each name change)*

VOTER SIGNATURE	VOTER PRINTED NAME	STREET ADDRESS OR RR NUMBER	CITY/VILLAGE	COUNTY
1.				Lake, Illinois
2.				Lake, Illinois
3.				Lake, Illinois
4.				Lake, Illinois
5.				Lake, Illinois
6.				Lake, Illinois
7.				Lake, Illinois
8.				Lake, Illinois
9.				Lake, Illinois
10.				Lake, Illinois

STATE OF ILLINOIS }  
COUNTY OF LAKE } SS. I, \_\_\_\_\_, do hereby certify that I reside at  
*(Circulator's Name)*

\_\_\_\_\_, in the \_\_\_\_\_ of  
*(Street Address)* *(City or Village or Unincorporated Area)*

\_\_\_\_\_, \_\_\_\_\_, in the County of \_\_\_\_\_, State of Illinois;  
*(If unincorporated, list municipality that provides postal service)* *(Zip Code)*

that I am 18 years of age or older (or I am 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 registered voters of the political division in which the candidate is seeking elective office, and that their respective residences are correctly stated as above set forth.

\_\_\_\_\_  
*(Circulator's Signature)*

Signed and sworn to (or affirmed) by \_\_\_\_\_ before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
*(Name of Circulator)* *(Day)* *(Month)* *(Year)*

(SEAL) \_\_\_\_\_  
*(Signature of Notary Public)*

# Statement of Economic Interests

## TO BE FILED WITH THE COUNTY CLERK

### **INSTRUCTIONS:**

You may find the following documents helpful to you in completing this form:

- (1) Federal income tax returns, including any related schedules, attachments, and forms; and
- (2) Investment and brokerage statements.

To complete this form, you do not need to disclose specific amounts or values or report interests relating either to political committees registered with the Illinois State Board of Elections or to 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. Please ensure that the information you provide is complete and accurate. 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

### **BASIC INFORMATION:**

Name: ..... Job Title: .....

Office, Department, or Agency that requires you to file this form: .....

Other Offices, Departments, or Agencies that require you to file a Statement of Economic Interests form:  
.....

Full Mailing Address: .....

Preferred E-mail 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.

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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.

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

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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.

Name of Unit of Government

Title or Nature of Services

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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.

Name of Lobbyist

Relationship to Filer

.....  
.....

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.

Name and Relation

Public Utility

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**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."

Printed Name of Filer: .....

Signature: ..... Date: .....

If this statement of economic interests requires ethics officer review prior to filing, the applicable ethics officer must complete the following:

**CERTIFICATION OF ETHICS OFFICER REVIEW:**

"In accordance with law, as Ethics Officer, I reviewed this statement of economic interests prior to its filing."

Printed Name of Ethics Officer: .....

Signature: ..... Date: .....

Preferred e-mail address (optional): .....

**NOTE: THIS STATEMENT OF ECONOMIC INTERESTS MUST INCLUDE THE FILER'S ORIGINAL SIGNATURE. THE ORIGINAL FORM MUST BE FILED IN THE OFFICE OF THE COUNTY CLERK, 18 NORTH COUNTY STREET, ROOM 101, WAUKEGAN, ILLINOIS, 60085.**

**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 State 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)

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(Day) (Month) (Year)

\_\_\_\_\_  
(Signature of Notary Public)

(SEAL)



### CERTIFICATION OF DELETIONS INDEPENDENT CANDIDATE

I, \_\_\_\_\_, do hereby certify that I have properly initialed the deletions  
(Name of Candidate or Circulator)  
of signatures listed hereinafter by page and line numbers, from the petitions of \_\_\_\_\_  
(Name of Candidate)  
who is a candidate for election to the office of \_\_\_\_\_ to be voted on at the  
Consolidated Election to be held on the 1<sup>st</sup> day of April 2025.

Page Number	Line Number	Page Number	Line Number	Page Number	Line Number

\_\_\_\_\_  
(Signature of Person Deleting Signatures)

**NOTE:** 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 **CERTIFICATE OF DELETIONS** shall be filed as part of the petition.

**CERTIFICATE OF ATTACHED LIST OF DELETIONS**  
**INDEPENDENT CANDIDATE**  
**(TO BE FILED WITH P-2A)**

We, the undersigned persons who have stricken signatures from the attached petitions do 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 \_\_\_\_\_, who is a candidate for election to the office of \_\_\_\_\_ to be voted on at the **Consolidated Election to be held on the 1<sup>st</sup> day of April 2025.**

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

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
*(Candidate's Signature)*

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*(Circulator)*  
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*(Circulator)*

**NOTE:** 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 voter's signatures and preceding any **CERTIFICATION OF DELETIONS** sheets.