COUNTY BOARD MEMBER (counties that elect members from districts) PRIMARY PETITION

We, the undersigned, members of a Republican					
raity, in		_, County of Will			
petition that David G. Oxley Unincorporated Area of Lockport					
		Republican P			
COUNTY BOARD MEMBER, County Bo					
at the primary election to be held on					
A Full Term is sought, unless an unex					
-	/7-10.2, complete the following (this inf				
FORMERLY KNOWN AS	UNT	IL NAME CHANGED ON			
(Li	st all names during last 3 years)	(List date of	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 Illinois	_)) SS.				
County of Will	_)				
l,	_ (Circulator's Name) do hereby o	certify that I reside at		, in the	
City/Village/Unincorporated Area of	(if unincorp	orated, list municipality that provide	es postal service)(Zip C	Code),	
County of, State of_	that I am 18 years of	age or older (or 17 years of age an	d qualified to vote in III	inois), that I am	
a citizen of the United States, and that the	ne signatures on this sheet were s	igned in my presence, not more th	an 90 days preceding	the last day for	
filing of the petitions and are genuine and	d that to the best of my knowledge	and belief the persons so signing	were at the time of sign	ning the petition	
qualified voters of the	Party in the political di	vision in which the candidates is s	eeking nomination/ele	ctive office, and	
that their respective residences are corre	ectly stated, as above set forth.				
		(Circulator	(Circulator's Signature)		
Signed and sworn to (or affirmed) by		before me, on	before me, on		
	(Name of Circulator)	(Insert	before me, on(Insert month, day, year)		
(SEAL)		(Notary Pu	ublic's Signature)		
	SHEET NO				