PETITION FOR NOMINATION AND FORMATION OF A NEW POLITICAL PARTY SB (IN COUNTIES IN WHICH OFFICERS ARE TO BE ELECTED FROM DISTRICTS AND AT-LARGE)

SBE No. P-8B

Ve, the undersigned, qualified voters of		he County of			State of Illinois,	
o hereby declare that it is our intention t		•			•	
nd the following named persons shall be	• •	offices hereinafter	specified to be vo	ted at the election to	be	
	date of election). didate in slate unless an unexpired term	is specified along with	h the office in the "OF	FICE" space provided be	elow)	
(711 diritorim to obagint sy daoin dan					,	
NAME OF CANDIDATE	COUNTY O	COUNTY OFFICE		ADDRESS - ZIP CODE		
NAMES (OF CANDIDATES FOR OFFIC	CES TO BE ELEC	CTED BY DISTI	RICTS		
NAME OF CANDIDATE		OFFICE OF COUNTY BOARD MEMBER		ADDRESS - ZIP CODE		
	District No.					
For any candidate subject to the requirement on the ballot) FORMERLY KNOWN AS		name with an asterisk UNTIL NAME CH		ne following (this informa	ation will appear	
· · · · · · · · · · · · · · · · · · ·	(List all names during last 3 years)	ON TIE NAME CH		ist date of each name cl	nange)	
NAME	VOTER'S PRINTED	RINTED STREET ADDRES		CITY, TOWN OR	COUNTY	
(VOTER'S SIGNATURE)	NAME (optional)	RR NU	MBER	VILLAGE	COONTT	
1.				,IL		
2.				,IL		
3.				,IL		
4.				,IL		
5.				,IL	_	
tate of	_)) SS.					
ounty of	_ ′)					
	_ (Circulator's Name) do hereby c	certify that I reside a	at		, in the	
City/Village/Unincorporated Area of	(if unincorporated, list municipality that provides postal service) (Zip					
ode), County of_ ge and qualified to vote in Illinois), that	, State of	a and that the sign	that I am 18	B years of age or olde	r (or 17 years of	
ge and qualified to vote in lillinois), that hore than 90 days preceding the last date igning were at the time of signing the perspective residences are correctly stated	y of filing of the petitions and are etition registered voters of the po	genuine and that t	to the best of my	knowledge and belief	f the persons so	
			(Circulator's Signature)			
igned and sworn to (or affirmed) by		before me	before me, on			
.g2 3 3	(Name of Circulator)	55.5.6 1110, 0	(Insert month, day, year)			
(SEAL)			/NIa4= D	blic's Cigaratura		
	SHEET NO		(Notary Pu	blic's Signature)		
	5.1LL1 140					