

LISLE LIBRARY DISTRICT

777 Front Street, Lisle IL 60532 - lislelibrary.org - 630.971.1675

August 20, 2024

TO: Person Seeking Election to the Lisle Library District Board of Trustees

FROM: Lisle Library District | Tatiana Weinstein, LLD Director

RE: Election Packet

Thank you for your interest in serving the community as a Lisle Library District (LLD) Trustee. The enclosed packet has the following:

- 1. Candidate Checklist
- 2. Statement of Candidacy
- 3. Loyalty Oath (optional)
- 4. Fair Campaign Practice Act (optional)
- 5. Petition Sheet

To obtain a copy of the 2025 State Board of Elections Candidate's Guide, Election Official's Handbook, and the Election Campaign & Finance Calendar, visit: www.dupageco.org/election or www.elections.il.gov.

The first day to circulate petitions is August 20, 2024. Petition sheets must have signatures from a minimum of 50 qualified registered voters residing in the District.

Please bring the Statement of Candidacy and the Petitions for Nomination to the LLD with the receipt of the Statement of Economic Interest between Tuesday, November 12, 2024 and Monday, November 18, 2024. LLD Administrative Office staff will be available during regular business hours Tuesday through Friday until 4:00 pm (11/12-11/15) and Monday, November 18, 2024 until 5:00 pm to accept candidate documents. The LLD opens at 9:30AM Monday through Friday.

Sincerely,

Tatiana Weinstein LLD Director tatiana@lislelibrary.org 630-971-1675 x1004

CANDIDATE CHECKLIST Meet residency, age, and other qualifications for the specific office File paperwork with the SBE Campaign Disclosure division File a notarized Statement of Candidacy including (but not limited to): - Your name - Your address - Office sought - Party - Office location (for example, the district or county) - Date of the election File a Statement of Economic Interests receipt (does not apply to federal offices or political party offices) https://www.dupagecounty.gov/elected_officials/county_clerk/economic_interests/ File a **Loyalty Oath** (optional) File a Code of Fair Campaign Practices (optional) File notarized **petition sheets** with the required number of signatures, numbered consecutively starting with the number "1" Include a Certificate of Deletions with petitions, numbered consecutively starting with the number "1" (if applicable) Fill out data entry card (for people who file with the State Board of Elections) and place on top of nominating petition packet (does not need to be attached to packet) File with the appropriate election authority (see specific office in this guide for details) **NOTE**: This checklist is not binding and should not be construed as sufficient argument in response to any objection or legal argument. If you have further questions, you may contact the division of Election Operations at the State Board of Elections or your legal counsel.

ATTACH TO PETITION

STATEMENT OF CANDIDACY

NONPARTISAN

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 577-10.2, 8-8.1 or 10-5.1, complete the following (this information will appear on the ballot) FORMERLY KNOWN AS	NAME:	OFFICE:
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) UNTIL NAME CHANGED ON STATE OF ILLINOIS) SS.) County of) In		
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 ASUNTIL NAME CHANGED ON		A Full Term is sought, unless an unexpired term is stated here: year unexpired term
FORMERLY KNOWN AS	ADDRESS – ZIP CODE:	CITY. VILLAGE OR SPECIAL DISTRICT:
FORMERLY KNOWN AS		
FORMERLY KNOWN AS		
STATE OF ILLINOIS) SS. I	If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the	e following (this information will appear on the ballot)
STATE OF ILLINOIS) SS. I	FORMERLY KNOWN AS UN	ITIL NAME CHANGED ON
SS	(List all names during last 3 years)	(List date of each name change)
SS		
County of	,	
	l beir	ng first duly sworn (or affirmed), say that I reside at
(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. 		
, State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/ Election to the office of in the	, in the City, Village, Ur	nincorporated Area of
Election to the office ofin 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	(if unincorporated, list municipality that provides postal service)	Zip Code, in the County of
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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)	to be voted upon at the election to be held on	(date of election) and that I am legally qualified
Nomination/Election to such office. (Signature of Candidate)	to hold such office and that I have filed (or I will file before the close	se of the petition filing period) a Statement of Economic Interests
(Signature of Candidate)	as required by the Illinois Governmental Ethics Act and I here	by request that my name be printed upon the official ballot for
Signed and sworp to (or affirmed) by	Nomination/Election to such office.	
Signed and sworp to (or affirmed) by		
Signed and sworn to (or affirmed) bybefore me, on (Name of Candidate) (insert month, day, year)		(Signature of Candidate)
Signed and sworn to (or affirmed) bybefore me, on (Name of Candidate)(insert month, day, year).		
(Name of Candidate) (insert month, day, year)	Signed and sworn to (or affirmed) by	before me, on
	(Name of Candidate	e) (insert month, day, year)

(Notary Public's Signature)

Suggested Revised July, 2004 SBE No. P-1C

LOYALTY OATH (OPTIONAL)

United States of America)	
)	SS.
State of Illinois)	

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_____

(Name of Candidate)

on ___

(insert month, day, year)

(Notary Public's Signature)

before me,

(SEAL)



STATE BOARD OF ELECTIONS STATE OF ILLINOIS

ARTICLE 29B FAIR CAMPAIGN PRACTICES ACT

10 ILCS 5/29B-5. Purpose. The Legislature hereby declares that the purpose of this Article is to encourage every candidate for public office in this State to subscribe to the Code of Fair Campaign Practices. It is the intent of the Legislature that every candidate for public office in this State who subscribes to the Code of Fair Campaign Practices will follow the basic principles of decency, honesty and fair play in order to encourage healthy competition and open discussion of issues and candidate qualifications and discourage practices that cloud issues or unfairly attack opponent. (Source: P.A. 86-873.)

10 ILCS 5/29B-10. Code of Fair Campaign Practices. At the time a political committee, as defined in Article 9, files its statement of organization, the State Board of Elections, in the case of a state political committee or a political committee acting as both a state political committee and a local political committee, or the county clerk, in the case of a local political committee, shall give the political committee a blank form of the Code of Fair Campaign Practices and a copy of the provisions of this Article. The State Board of Elections or county clerk shall inform each political committee that subscription to the Code is voluntary. The text of the code shall read:

CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate for public office in the State of Illinois has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional right to a free and untrammeled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- (1) I will conduct my campaign openly and publicly, and limit attacks on my opponent to legitimate challenges to his record.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or his personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, sexual orientation, religion or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opposition.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our American system of free elections or that hampers or prevents the full and free expression of the will of the voters.
- (6) I will defend and uphold the right of every qualified American voter to full and equal participation in the electoral process.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this Code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Illinois or chairman of a political committee in support of or opposition to a question of public policy, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

Date

Signature

Office Sought

(Print Name)

Date of Election

Name of Political Committee

X...BIND HERE...X

Suggested Revised March 2020 SBE No. P-4

in the

NONPARTISAN PETITION (NON-MUNICIPAL AND COMMISSION FORM OF MUNCIPALITY)

We, the undersigned, qualified voters in the

County of

(unit of government)

_____and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan

on	(date of elect	tion).		
NAME: OFFICE:				
ADDRESS:				
		A Full Term is sought, unless an unex	xpired term is stated here:year u	inexpired term
If required pursuant to 10 ILCS 5/10-5. FORMERLY KNOWN AS	, I 0(ME CHANGED ON	ch name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS	, , , , , , , , , , , , , , , , , , ,	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1.			,IL	
2.			,IL	
3.			,IL	
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6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	
State of)			
County of) SS. _)			
l,	_(Circulator's Name) do hereb	by certify that I reside at		, in the
City/Village/Unincorporated Area of		(if unincorporated, list	municipality that provides post	al service) (Zip
Code), County of age and qualified to vote in Illinois), that I am a	, State of	tr	nat I am 18 years of age or olde	r (or 17 years of
age and qualified to vote in Illinois), that I am a preceding the last day of filing of the petitions a petition registered voters of the political division	and are genuine and that to the b	est of my knowledge and belief t	he persons so signing were at the f	ime of signing the
		((Circulator's Signature)	
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on	(Insert month, day, year)	
(SEAL)	,			
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State of)			
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