

Welcome candidates, and thanks so much for your willingness to be public servants.

The offices in the City of Batavia up for election in the 2017 Municipal Elections are:

Aldermen in Wards 1-7

Mayor

City Clerk

City Treasurer

Each office is a four year term

Batavia has a partisan form of election but there are no established political parties at this time. Candidates may either run as independents or follow the directions for establishing a political party.

The information contained here is simply for informational use. Please note that the City of Batavia cannot advise political candidates and that the information contained herein does not constitute legal advice. Specific legal questions may be referred to the staff attorneys at the Illinois State Board of Elections.

**Circulation Dates for petitions:** Petitions may NOT be circulated prior to September 20, 2016

**Filing Dates for nominating papers:** December 12-19, 2016

**File with the County Clerk:** Statement of Economic Interest

**File with the City Clerk:** This may be done in person, by a representative of the candidate or By U.S. Mail.

- Statement of Candidacy – Must be notarized
- Nominating petition sheets -numbered and fastened together, each sheet must be notarized
- Receipt from the office of the Kane County Clerk for the Filing of the Economic Interest Statement
- Loyalty Oath (Optional) – must be notarized

**Additional requirements for new party candidates:**

A full slate of candidates and  
Certificate of officers authorized to fill vacancies

**Where to find the forms and information:**

The Candidates Guide to the 2017 elections is available at the State Board of Elections website.

<https://www.elections.il.gov/Downloads/ElectionInformation/PDF/2017CanGuide.pdf>

The forms required for filing can be printed from the Candidate Guide. Candidate Packets are also available at City Hall.

The guide also contains the following information:

The Requirements for Filing Nominating Papers

Information Specific to the Circulation and Filing of Petitions

Qualifications and Residency requirements -The candidate must be qualified elector/registered voter; must not be in arrears in the payment of any tax or other indebtedness due the municipality; must not have been convicted in any court located in the United States of any infamous crime, bribery, perjury, or other felony. Alderman must reside in the ward at least 1 year preceding their election. Mayor, Clerk, and Treasurer also require a one-year residency in the municipality preceding the Consolidated Election.

**Forms for the Nominating Papers begin on page 63 of the guide you may also find the Frequently Asked Questions section very helpful.**

### Petition Guidelines

Petition forms for Independents are Form P-3  
For New Party Candidates Form P-8 or P-8A

General Guidelines for Filling in the Heading on the Petition:  
City of Batavia, County of Kane, for the Consolidated Election to be held on April 4, 2017.

The form of name on the petition sheets must match the form of name on the Statement of Candidacy.  
**THE CANDIDATE'S NAME SHOULD APPEAR IN EXACTLY THE SAME FORM ON THE PETITION SHEETS, STATEMENT OF CANDIDACY AND LOYALTY OATH.**

Failure to match the name on the petition to the name on the Statement of Candidacy may result in the candidate not being certified for ballot.

Each petition signature page must contain precisely the same information in the heading. No photocopies can be filed. You must file the original notarized petition.

### Office

If running for alderman make sure you indicate the ward by writing Alderman Ward and the number of the ward for which you are standing as a candidate.

Example: Alderman Ward 3

A city wide ward map is available on the City of Batavia website:  
<http://cobil.maps.arcgis.com/apps/Viewer/index.html?appid=4f4bb31047f34228b67887e4f0da9113>

**Petition signature requirements are as follows:**

### Petition Circulation

A petition circulator must be 18 years of age or older and a citizen of the United States. The circulator must personally witness all signatures given and sign the certificate required stating that all signatures were taken in his or her presence. No one may be considered a circulator of any petition page except the person who signs its certificate.

### Number of Signatures

New Political Party Candidates - For the Consolidated Election, not less than 5% of the total number of persons who voted in the last regular election in the 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. [10 ILCS 5/10-2]

Independent Candidates - For the Consolidated Election, 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 last regular election in the 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. [10 ILCS 5/10-3]

Alderman

	<u>Ballots Cast 2015</u>	<u>5% Minimum</u>	<u>Maximum is 5% + 50</u>
Ward 1	647	33	83
Ward 2	484	25	75
Ward 3	492	25	75
Ward 4	276	14	64
Ward 5	504	26	76
Ward 6	616	31	81
Ward 7	419	21	71

Mayor, City Clerk, City Treasurer

Ballots Cast in 2013: 2617    5% Minimum: 131    8% Maximum: 210

Statement of Candidacy for Independents is Form P-1B  
For new party is Form P-1D

The candidate's name should appear on the petition pages as indicated on the Statement of Candidacy.

Loyalty Oath (optional) Form P-1C

Economic Interest Statement: must be filed with the Kane County Clerk and the receipt from that filing must be included in the nominating papers. A copy of the form can be downloaded from Kane County Clerk's website. <http://kanecountyclerk.org/Records/EIS/economicinterest.pdf>

If you require more information on how to file please contact me at 630-454-2022 or email my office at [csimkins@cityofbatavia.net](mailto:csimkins@cityofbatavia.net). Please remember I cannot give you any legal advice on elections however I may be able to help you direct your questions to those who can assist.

Christine Simkins  
Deputy City Clerk



**INDEPENDENT CANDIDATE PETITION**

We, the undersigned, qualified voters in the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_ 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 for at the \_\_\_\_\_ Election to be held on \_\_\_\_\_ (date of election).

NAME	OFFICE	ADDRESS--ZIP CODE

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

NAME (VOTER'S SIGNATURE)	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	
11		IL	
12		IL	
13		IL	
14		IL	
15		IL	

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) SS.

I, \_\_\_\_\_ (Circulator's Name) do hereby certify that I reside at \_\_\_\_\_, in the City/Village/Unincorporated Area (circle one) of \_\_\_\_\_ (if unincorporated, list municipality that provides postal service) Zip Code \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_ that I am 18 years of age or older (or 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, on \_\_\_\_\_  
(Name of Circulator) (insert month, day, year)

(SEAL)

\_\_\_\_\_  
(Notary Public's Signature)

**INDEPENDENT CANDIDATE PETITION**

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1		IL	
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3		IL	
4		IL	
5		IL	
6		IL	
7		IL	
8		IL	
9		IL	
10		IL	
11		IL	
12		IL	
13		IL	
14		IL	
15		IL	

State of \_\_\_\_\_ )

) SS.

County of \_\_\_\_\_ )

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

Signed and sworn to (or affirmed) by \_\_\_\_\_ before me, on \_\_\_\_\_  
(Name of Circulator) (insert month, day, year)

(SEAL)

\_\_\_\_\_  
(Notary Public's Signature)







**Your Name Was Submitted for Filing by an Entity that You Represent**  
**STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK**  
(Type or Hand Print)

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Each office or position of employment for which this statement is filed**

\_\_\_\_\_  
**Full post office address to which notification of an examination of this statement should be sent**  
**HOME ADDRESS:**

**GENERAL DIRECTIONS**

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of \$5,000 fair market value or from which dividends in excess of \$1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of \$1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding \$5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

\_\_\_\_\_  
\_\_\_\_\_

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 or more was realized during the preceding calendar year.

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning of rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year.

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year.

#### VERIFICATION

"I declare that this statement of economic interests (including any accompanying schedules and statements) 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 shall be a fine not to exceed \$1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

\_\_\_\_\_  
(signature of person making the statement)

\_\_\_\_\_  
(date)

This will be returned to you when statement is filed in the office of the County Clerk .

**(COMPLETE BUT DO NOT DETACH)**

Receipt is hereby acknowledged of your Statement of Economic Interests, filed pursuant to the Illinois Governmental Ethics Act. The Statement was filed as of this date.

\_\_\_\_\_  
(office or position of employment for which this statement is filed)

TYPE OR HAND PRINT

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

IL

\_\_\_\_\_  
City

State

\_\_\_\_\_  
Zip Code

All 3 pages must be returned to the Kane County Clerk for filing either in person or by mail. We will return this receipt to you.

**LOCATION:** 719 S. Batavia Ave., Bldg. B  
Geneva

**MAILING ADDRESS:** Kane County Clerk  
719 S. Batavia Ave., Bldg. B  
Geneva, Illinois 60134

\_\_\_\_ATTACH TO PETITION\_\_\_\_

10 ILCS 5/7-10.1

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

**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 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 \_\_\_\_\_ before me,  
(Name of Candidate)

on \_\_\_\_\_  
(insert month, day, year)

\_\_\_\_\_  
(Notary Public's Signature)

(SEAL)

Find address or place

Fargo, Blvd



Setler's Hill Golf Course

806 ft

