

# STATE BOARD OF ELECTIONS

**TO: POTENTIAL CANDIDATES (Independent & New Party)**  
**FROM: STATE BOARD OF ELECTIONS**  
**SUBJECT: PETITION FILING INSTRUCTIONS**  
**DATE: March 2016**

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You are strongly advised to obtain legal advice on the following subjects: (1) your legal qualifications for office; (2) the proper method for completing the petition forms with respect to the office; (3) the minimum number of signatures required; and (4) the qualifications of the signers and circulators, etc. **The State Board of Elections does not provide legal advice to candidates.**

The attached forms are prescribed by Illinois Law and/or required by the State Board of Elections. For additional information on filing, the [2016 Candidate's Guide](#) and the [2016 Candidate's Guide for Presidential Preference, Delegates and Alternate Delegates](#) is available for download at [www.elections.il.gov/](http://www.elections.il.gov/).

1. **Data Entry Card\*** (For SBE office use only)  
Complete the appropriate sections but **do not bind with the petition**. A line has been provided for the candidate to list (optional) his/her campaign website address. The Board's website will provide links to the websites of candidates who provide this information. Each set of petitions must be accompanied by a Data Entry Card. **If the petition includes more than one candidate, complete a separate Data Entry Card for each candidate.**
2. **Statement of Candidacy\***
3. **Loyalty Oath** (optional)
4. **Statement of Economic Interests** (does not apply to Federal offices)  
A receipt indicating that the Statement has been filed with the Office of the [Secretary of State, Index Department](#), 111 E. Monroe, Springfield, IL 62756, 217/782-7017 or the County Clerk's Office (**you will need to contact the county clerk with whom you are filing your statement to receive the form, Index no longer provides them**) for Prairie Dupont Levee and Sanitary District, must be filed no later than **5:00 p.m. on the last day to file petitions with the State Board of Elections.**

5. **Code of Fair Campaign Practices** (optional)  
If you plan to file this statement, **DO NOT** bind this document with your petitions. Please submit it separately at the time of filing.
6. **Nominating Petition\***  
The packet contains 1 original petition sheet. Duplication of this sheets is permitted **prior** to circulation.

**\* The Candidate's name should appear in the same form on the Data Entry Card, Petition Sheets, and the Statement of Candidacy. The Board will certify every candidate's name as it appears on page #1 of the petition. Please see 10 ILCS 5/7-17, 8-8.1 and 10-5.1 for information on designation of names on petitions or nomination papers.**

7. **Certificate of Officers Authorized to Fill Vacancies in Nomination for a New Political Party** (optional)  
A New Political Party must file this form with the petition if it wished to be able to fill any vacancy in nomination which may later arise.
8. **Certificate of Deletions**  
In order to delete signatures, New Party candidates must file form SBE No. P-2A. Independent candidates must file both the SBE No. P-2A and P-2B forms. Only the person circulating the petition, or the candidate on whose behalf the petition is circulated, may strike any signature from the petition.

## **OFFICE HOURS**

**Nominating petitions may only be filed with the Board's Principal Office in Springfield.** The Principal Board office will be open **Monday - Friday** during the petition filing period from 8:00 a.m. through 5:00 p.m. On the first day of filing, anyone who is in line as of 8:00 a.m., will be deemed filed at 8:00 a.m. and are eligible for any lottery for ballot position. If a filer is in line as of 8:00 a.m. on the first day of filing, but the petition is not ready to be filed as of the time of processing the last filer in line as 8:00 a.m., then the petition will be deemed filed at the actual time of its filing (not as of 8:00 a.m.) and the candidate will not be eligible for the ballot position lottery. **A simultaneous lottery will also be held when 2 or more petitions are filed for the same office and party within the last hour of the filing deadline.**

The State Board of Elections **no longer maintains a P.O. Box.** All mailed petitions should be addressed to the State Board of Elections Springfield office at 2329 S. MacArthur Blvd., Springfield IL 62704-4503. In order to be deemed filed in the opening hour lottery for ballot position, your petition packet has to be included in the first regular **United States Postal Service** mail delivery of the day (NOT UPS, FED Ex or any other carrier) on the first day of filing.

In accordance with 10 ILCS 5/7-1 et seq., 8-1 et seq., and 10-1 et seq., petitions for any Federal, State, Congressional, Legislative, Representative, Judicial District, Circuit or Subcircuit, or any division or district greater than one county must be filed with the **principal office** of the State Board of Elections, 2329 South MacArthur Boulevard, Springfield, Illinois.

**FILING CLOSURES AT 5:00 P.M. ON THE LAST DAY OF FILING. A SIMULTANEOUS LOTTERY WILL ALSO BE HELD WHEN 2 OR MORE PETITIONS ARE FILED FOR THE SAME OFFICE AND PARTY WITHIN THE LAST HOUR OF THE FILING DEADLINE. P.A. 97-1044**

## **FILING PERIODS**

**JUNE 20-27, 2016**

**(First day to circulate - March 29, 2016)**

President & Vice President

U. S. Senate

Comptroller (Un-expired term)

Representative in Congress (all 18 districts)

State Senator - For 2 year term

2,5,8,11,14, 17,20,23,26,29,32,35,38,41,44,47,50,53,56 & 59

For 4 year term

1,4,7,10,13,16,19,22,25,28,31,34,37,40,43,46,49,52,55 & 58

Representative in the General Assembly (all 118 districts)

Judicial Offices

Prairie DuPont Levee and Sanitary District

## **PETITION COPY REQUESTS**

Board staff will begin accepting requests for petition copies and/or CD's starting at 1:00 p.m. on the first day of the filing period.

## **OBJECTIONS**

Objections may be filed in either the Springfield or Chicago office of the State Board of Elections. Under the provisions of 10 ILCS 5/10-8, individuals who wish to file an objection to a candidate's nominating petition must file an original **plus two copies**. Board staff will not make copies of objection petitions for filers. For objections which will be heard by an electoral board other than the State Board of Elections, it is mandatory that two copies of the objection be filed along with the original objection.

Historically, the Board's offices receive numerous objection filings on the last day to file. Potential objectors are cautioned that all objections must be **FILE STAMPED NO LATER**

**THAN 5:00 P.M.** on the last day to file objections (5 business days following the last day to file nominating petitions). Please plan accordingly. **NO OBJECTION FILING WILL BE ACCEPTED AFTER 5:00 P.M., EVEN IF THE OBJECTOR IS IN LINE FOR PROCESSING PRIOR TO 5:00 P.M.**

## **OBJECTION FILING**

June 20-27, 2016 petition filing

July 5, 2016 - last day to object

## **DEADLINE TO WITHDRAW FROM INCOMPATIBLE OFFICES**

June 20-27, 2016 petition filing

July 5, 2016

## **BALLOT FORFEITURE**

The Illinois Campaign Disclosure Act states that any candidate who owes a fine to the State Board of Elections cannot appear on an election ballot. **Therefore, the name of any candidate whose committee has an outstanding assessment not paid by 10:30 a.m. on August 26, 2016 will not be certified for the November 8, 2016 General Election ballot. (10 ILCS 5/9-30)**

# STATE BOARD OF ELECTIONS

## DATA ENTRY CARD FOR INDEPENDENT & NEW PARTY

PLEASE PRINT name as it appears on the 1<sup>st</sup> page of the petition

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

Campaign Website Address (optional): www. \_\_\_\_\_

SLATE: If more than one candidate is listed on the petition, name of first candidate (HEAD OF SLATE) \_\_\_\_\_

OFFICE:

\_\_\_\_\_ PRESIDENT & VICE PRESIDENT

\_\_\_\_\_ UNITED STATES SENATOR

\_\_\_\_\_ COMPTROLLER (unexpired term)

\_\_\_\_\_ CONGRESSIONAL DISTRICT

\_\_\_\_\_ LEGISLATIVE (SENATE) DISTRICT

\_\_\_\_\_ REPRESENTATIVE DISTRICT

\_\_\_\_\_ PRAIRIE DUPONT LEVEE & SANITARY DISTRICT

\_\_\_\_\_ INDEPENDENT

NEW PARTY: \_\_\_\_\_

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### OFFICE USE ONLY

FILING DATE: JUNE \_\_\_\_\_, 2016

TIME: \_\_\_\_\_

STATEMENT OF CANDIDACY Y or N

HOW FILED: C - CANDIDATE

LOYALTY OATH Y or N

A - AGENT

ECONOMIC INTEREST Y or N

M - MAIL

LAST PAGE NUMBER \_\_\_\_\_

CODER INITIALS \_\_\_\_\_

**STATEMENT OF CANDIDACY**  
**NEW POLITICAL PARTY**

NAME	ADDRESS-ZIP CODE	OFFICE	CITY, VILLAGE, TOWNSHIP, COUNTY, DISTRICT OR STATE	PARTY

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)

STATE OF ILLINOIS )  
 )  
County of \_\_\_\_\_ ) SS.

I, \_\_\_\_\_ being first duly sworn (or affirmed), say that I reside at \_\_\_\_\_, in the City, Village, Unincorporated Area (circle one) of \_\_\_\_\_ (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 election to the office of \_\_\_\_\_ in the \_\_\_\_\_  
Name of City, Village, Township, County, District or State

to be voted upon at the election to be held on \_\_\_\_\_ (date of election) and that I am legally qualified (including being the holder of any license that may be an eligibility requirement for the office to which I seek election) 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 election to such office.

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

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

(SEAL)

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

ATTACH TO PETITION

10 ILCS 5/7-10.1

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

**L O Y A L T Y   O A T H**  
(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)

# STATEMENT OF ECONOMIC INTERESTS

TO BE FILED WITH  
THE SECRETARY OF STATE



(Type or print name and address in the blank space below.)

\_\_\_\_\_  
(List each office or position of employment for which this Statement is filed.)

## 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 more space is needed, please attach supplemental listing.)

1. List the name and instrument of ownership in any entity doing business in the State of Illinois, 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 derived during the preceding calendar year. (In the case of real estate, location thereof shall be listed by street address or, if none, by legal description.) No time or demand deposit in a financial institution nor any debt instrument need be listed.

Business Entity

Instrument of Ownership

_____	_____
_____	_____
_____	_____
_____	_____

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 State of Illinois) of 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.

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5. List the identity of any compensated lobbyist with whom the person making the statement maintains a close economic association, including the name of the lobbyist and specifying the legislative matter or matters that are the object of the lobbying activity, and describing the general type of economic activity of the client or principal on whose behalf that person is lobbying.

Lobbyist	Legislative Matter	Client or Principal
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

6. List the name of any entity doing business in the State of Illinois 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. (In the case of real estate, location thereof shall be listed by street address or, if none, by legal description.) No time or demand deposit in a financial institution nor any debt instrument need be listed.

Entity	Position Held
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

7. List the name of any unit of government that 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.

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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.

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#### 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 Statement)

\_\_\_\_\_  
(Date)

**NOTE: This statement must be filed in the Office of the Secretary of State, Index Department, Ethics Section, 111 E. Monroe, Springfield, IL 62756.**



## **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 untrammelled 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





**CERTIFICATE OF OFFICERS  
AUTHORIZED TO FILL VACANCIES IN NOMINATION  
FOR A NEW POLITICAL PARTY**

We, the undersigned, duly certify that the persons whose names and addresses are listed below are the designated officers of the \_\_\_\_\_ who are authorized to fill vacancies in nomination  
(Name of New Political Party)  
pursuant to 10 ILCS 5/10-11.

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

Signed: \_\_\_\_\_  
(CHAIRMAN)

Attest: \_\_\_\_\_  
(SECRETARY)

(Use additional sheets if necessary)

A new political party petition shall have attached thereto a certificate stating the names and addresses of the party officers authorized to fill vacancies in nomination. Failure to file this form results in the party forfeiting the right to fill vacancies. It does not alone invalidate the petition.



**CERTIFICATE OF OFFICERS  
AUTHORIZED TO FILL VACANCIES IN NOMINATION  
FOR A NEW POLITICAL PARTY**

We, the undersigned, duly certify that the persons whose names and addresses are listed below are the designated officers of the \_\_\_\_\_ who are authorized to fill vacancies in nomination  
(Name of New Political Party)  
pursuant to 10 ILCS 5/10-11.

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

\_\_\_\_\_  
(Name and Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (Zip Code)

Signed: \_\_\_\_\_  
(CHAIRMAN)

Attest: \_\_\_\_\_  
(SECRETARY)

(Use additional sheets if necessary)

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