2019 Consolidated Election
Candidate Information

On April 2, 2019 there will be a Consolidated Election for Park Ridge Park District Commissioners. Three (3) seats will be up for election and the length of term is four (4) years.

Candidates must be registered to vote and be a resident of the Park Ridge Park District at least one year prior to the election.

Per the Park District Code 2-11 (second paragraph) – A person is not eligible to serve as park commissioner if that person is in arrears in the payment of a tax or other indebtedness due to the park district or has been convicted in any court located in the United States of any infamous crime, bribery, perjury, or felony.

The first day to circulate nomination papers for the April 2, 2019 Consolidated Election is Tuesday, September 18, 2018. The dates to file candidate paperwork are December 10-17, 2018. Filing of nomination petitions and related forms will be received at the Park Ridge Park District, Maryanne Lucarz, 733 N. Prospect Avenue, Park Ridge, 60068; Monday-Friday, between the hours of 9:00am and 5:00pm.

- A candidate for election to the Office of Park Commissioner will need the forms which are attached; provided, however, that the filing of the Loyalty Oath is optional and the Receipt for Filing the Statement of Economic Interest with the Cook County Clerk may be obtained from the Cook County Clerk upon the filing of same with that office.

Please Note: Candidate is to file the Statement of Economic Interest with the Cook County Clerk and then the receipt will need to be filed with the Park Ridge Park District either together with Nomination Petitions and Statement of Candidacy or separately, no later than Monday, December 17, 2018 at 5:00pm.

- This is not intended as legal advice to you.

- If you have questions regarding what, when and where you need to file in order to run for Park Commissioner at the April 2, 2019 Non-Partisan Consolidated Election, you should consult with an attorney knowledgeable about such matters.

- You will need your Nomination Petitions signed by not less than 165 qualified voters in the Park Ridge Park District and you should refer to the 2019 Candidate’s Guide published by the Illinois State Board of Elections, which may be found at the following link:

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

We, the undersigned, qualified voters in the [unit of government] in the County of [ ] and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held on [date of election].

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<thead>
<tr>
<th>NAME</th>
<th>OFFICE</th>
<th>ADDRESS</th>
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(for unexpired terms, specify “2 year unexpired term” or “4 year unexpired term” along with the office in the “OFFICE” space provided above)

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)

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<tr>
<th>NAME (VOTER’S SIGNATURE)</th>
<th>VOTER’S PRINTED NAME (optional)</th>
<th>STREET ADDRESS OR RR NUMBER</th>
<th>CITY, TOWN OR VILLAGE</th>
<th>COUNTY</th>
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State of [ ] ) SS.

County of [ ]

I, [Circulator’s Name] do hereby certify that I reside at [ ], in the City/Village/Unincorporated Area 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 of 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 their respective residences are correctly stated, as above set forth.

(Circulator’s Signature)

Signed and sworn to (or affirmed) by [Name of Circulator] before me, on [Insert month, day, year]

(SEAL)

(Notary Public’s Signature)

SHEET NO. [ ]
STATEMENT OF CANDIDACY
NONPARTISAN

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS-ZIP CODE</th>
<th>OFFICE</th>
<th>CITY, VILLAGE OR SPECIAL DISTRICT</th>
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</table>

(for unexpired terms, specify "2 year unexpired term" or "4 year unexpired term" along with the office in the "OFFICE" space provided above)
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 of ____________________________, 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.

________________________________________
(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)
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 ____________________________ before me,
(Name of Candidate)

on ____________________________.
(insert month, day, year)

__________________________________
(Notary Public’s Signature)

(SEAL)
FOR CANDIDATES ONLY
(type or hand print)

NAME: 

FULL MAILING ADDRESS: 

OFFICE: 

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. (Use blue or black ink only.)

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 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.

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<thead>
<tr>
<th>BUSINESS ENTITY</th>
<th>INSTRUMENT OF OWNERSHIP</th>
<th>POSITION OF MANAGEMENT</th>
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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.

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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 file) and the nature of the entity to which they were rendered if fees exceeding $5,000 were received during the preceding calendar year from the entity for professional services rendered by the person making the statement. (“Professional services” means services rendered in the practice of law, accounting, engineering, medicine, architecture, dentistry, or clinical psychology.)

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4. List the identity (including the address or legal description of real estate) of any capital asset from which a 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 or 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."

Sign Here: ____________________________________________________________________________

(SIGNATURE OF PERSON MAKING THE STATEMENT BLUE OR BLACK INK ONLY) (DATE)

September 1, 2015