

# PETITION FOR NOMINATION

## STATEWIDE OFFICES — REPUBLICAN PARTY

We, the undersigned, members of and affiliated with the **REPUBLICAN PARTY**, and qualified primary electors of the **REPUBLICAN PARTY** in the **State of Illinois**, do hereby petition that the following named persons shall be candidates of the **REPUBLICAN PARTY** for nomination to the offices hereinafter specified, to be voted for at the General Primary Election to be held **JUNE 28, 2022**.

CANDIDATE NAME	RESIDENCE ADDRESS	OFFICE	PARTY
<b>GARY RABINE</b>	1051 Oakmont Court Bull Valley, IL 60098	<b>GOVERNOR STATE OF ILLINOIS</b>	<b>REPUBLICAN PARTY</b>
<b>AARON DEL MAR</b>	1165 N. Lakeside Drive Palatine, IL 60067	<b>LIEUTENANT GOVERNOR STATE OF ILLINOIS</b>	<b>REPUBLICAN PARTY</b>

SIGNATURE OF QUALIFIED VOTER	VOTER'S RESIDENCE ADDRESS	CITY, TOWN, or VILLAGE	COUNTY, STATE
1.			_____, IL
2.			_____, IL
3.			_____, IL
4.			_____, IL
5.			_____, IL
6.			_____, IL
7.			_____, IL
8.			_____, IL
9.			_____, IL
10.			_____, IL

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

### CIRCULATOR'S STATEMENT

I, \_\_\_\_\_, do hereby certify that I reside at \_\_\_\_\_  
(Print Circulator's Name) (Insert Circulator's Street Address or RR Number)

in the CITY / TOWN / VILLAGE of \_\_\_\_\_, ZIP CODE \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_,  
(Circle One) (Name of City, Town, or Village) (Insert Zip Code) (Insert County Name) (Insert State)

that I am 18 years of age or older, that I am a citizen of the United States, and certify that the signatures on this sheet were signed in my presence, and certify that said signatures are genuine, and certify that none of the signatures on the sheet were signed prior to January 13, 2022, nor later than the date on which this Statement was sworn or affirmed to, and that to the best of my knowledge and belief the persons so signing were at the time of signing the petition qualified voters and qualified primary electors of the **Republican Party**, residing in the **State of Illinois**, the political division in which the candidates are seeking nomination, and that their respective residence addresses are correctly stated as above set forth.

\_\_\_\_\_  
(Signature of Circulator Making this Affidavit)

(To be completed by Notary Public):

Signed and sworn to (or affirmed) by \_\_\_\_\_ before me, on \_\_\_\_\_, 2022.  
(Print Name of Circulator) (Insert month, day)

(NOTARY SEAL OR STAMP)

\_\_\_\_\_  
(Signature of Notary Public)

SHEET NO \_\_\_\_\_