

## **2023 CONSOLIDATED ELECTION**

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Nominating petitions may be circulated beginning August 30, 2022. Filing dates for candidates seeking nomination at the Consolidated Election on February 28, 2023 are **November 21-28, 2022**. Petitions may be filed with the City Clerk at City Hall offices on the following dates: November 21<sup>st</sup>, 22<sup>nd</sup>, 23<sup>rd</sup>, and 28<sup>th</sup> between the hours of 8:00 a.m. and 5:00 p.m.

The 2023 Candidates Guide, issued by the State Board of Elections, is available on the City of Washington website at:

[https://www.ci.washington.il.us/egov/documents/1661791748\\_79941.pdf](https://www.ci.washington.il.us/egov/documents/1661791748_79941.pdf)

A Candidate's Guide to Municipal Government is available at:

<https://www.iml.org/file.cfm?key=14434>

The following elected seats will be open for nomination at the Consolidated Election:

**ALDERPERSON, WARD I – 4-YEAR TERM**  
**ALDERPERSON, WARD II – 4-YEAR TERM**  
**ALDERPERSON, WARD III – 4-YEAR TERM**  
**ALDERPERSON, WARD IV – 4-YEAR TERM**  
**ALDERPERSON, WARD IV – 2-YEAR UNEXPIRED TERM**

Signature Requirements: (taken from page 29 of the 2023 Candidates Guide)

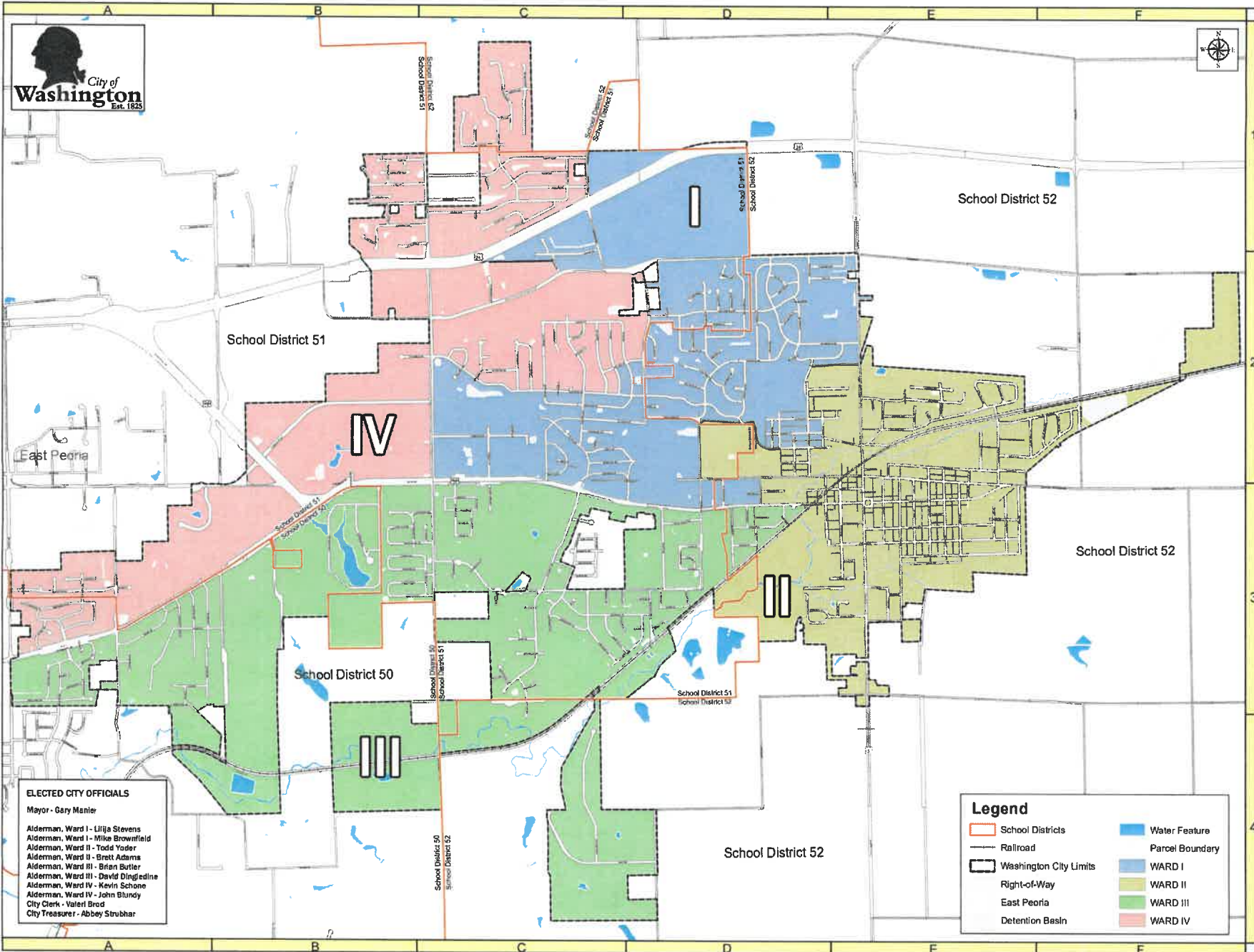
**Nonpartisan (City):** For the consolidated election, not less than 5% nor more than 8% (or 50 more than the minimum, whichever is greater) of the number of persons who voted at the last regular election in the district or political subdivision in which such district or political subdivision voted as a unit for the election of officers to serve its respective territorial area. (10 ILCS 5/10-3, 10-3.1)



# CITY OF WASHINGTON

## TAZEWELL COUNTY, ILLINOIS

### CITY WARDS MAP



#### STREET INDEX

A	ADAMS ST. E1, E2, F3	H	HALL CT. A1	P	PARK BLVD. E2
B	ADAMS ST. F3, D2	I	HAMILTON ST. D2	PARSONS DR. C3	PARSONS DR. C3
C	ADAMS ST. D2	J	HANCOCK RD. C2	PARTRIDGE LN. A4	PARTRIDGE LN. A4
D	ADAMS ST. C2	K	HANCOCK ST. C2	PEACH ST. A3, A5	PEACH ST. A3, A5
E	ADAMS ST. B2	L	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
F	ADAMS ST. A2	M	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		N	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		O	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		P	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		Q	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		R	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		S	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		T	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		U	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		V	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		W	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		X	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		Y	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3
		Z	HANCOCK DR. C3	PEPPER CT. D3	PEPPER CT. D3

**ELECTED CITY OFFICIALS**

Mayor - Gary Manier

Alderman, Ward I - Lijia Stevens  
 Alderman, Ward I - Mike Brownfield  
 Alderman, Ward II - Todd Yoder  
 Alderman, Ward II - Brett Adams  
 Alderman, Ward III - Brian Butler  
 Alderman, Ward III - David Dingeldine  
 Alderman, Ward IV - Kevin Schone  
 Alderman, Ward IV - John Blundy  
 City Clerk - Valeri Brod  
 City Treasurer - Abbey Strubbar

**Legend**

- School Districts
- Railroad
- Washington City Limits
- Right-of-Way
- East Peoria
- Detention Basin
- Water Feature
- Parcel Boundary
- WARD I
- WARD II
- WARD III
- WARD IV

*This map indicates approximate street right-of-way and may not be 100% accurate. Newly constructed streets or recently annexed areas may not be shown.*



**STATEMENT OF CANDIDACY**

**NONPARTISAN**

<b>NAME:</b>	<b>OFFICE:</b>  A Full Term is sought, unless an unexpired term is stated here: ____ year unexpired term
<b>ADDRESS – ZIP CODE:</b>	<b>CITY, VILLAGE OR SPECIAL DISTRICT:</b>

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) (List date of each name change)

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

I, \_\_\_\_\_ being first duly sworn (or affirmed), say that I reside at \_\_\_\_\_, in the City, Village, Unincorporated Area 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 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)

CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_ and State of Illinois, do hereby petition that the name of \_\_\_\_\_, who resides at \_\_\_\_\_ in the City, Town or Village of \_\_\_\_\_ Zip Code \_\_\_\_\_ County of \_\_\_\_\_ State of Illinois, be placed upon the ballot as a candidate for nomination for the office of \_\_\_\_\_ at the Consolidated Primary election to be held on \_\_\_\_\_ (date of primary election); provided that if no primary election is required, the candidate's name will appear on the ballot at the Consolidated Election for election to said office and term.

A Full Term is sought, unless an unexpired term is stated here: \_\_\_\_\_ year unexpired term

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)

Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Rows 1-10.

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

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 \_\_\_\_\_ before me, on \_\_\_\_\_ (Name of Circulator) (Insert month, day, year)

(SEAL)

(Notary Public's Signature)

### CERTIFICATION OF DELETIONS

I, \_\_\_\_\_, Candidate or Circulator (circle one) do hereby certify that I have properly initialed the deletions of signatures, listed hereinafter by page and line numbers, from the petition of \_\_\_\_\_ (Name of Candidate) who is a candidate for election or nomination (circle one) to the office of \_\_\_\_\_ at the \_\_\_\_\_ Election to be held on \_\_\_\_\_ (date of election).

Page No.	Line No.	Page No.	Line No.	Page No.	Line No.

\_\_\_\_\_  
(Signature of Person Deleting Signatures)

Only the person circulating the petition, or the candidate on whose behalf the petition is circulated, may strike any signature from the petition. If deletions are made, this **CERTIFICATION OF DELETIONS** shall be filed as part of the petition.

**CERTIFICATE OF ATTACHED LIST OF DELETIONS**

We, the undersigned persons who have stricken signatures from the attached hereby certify that there is/are \_\_\_\_\_ page(s) of **CERTIFICATION OF DELETIONS** listing signatures which have been stricken, and are attached hereafter to the petitions of \_\_\_\_\_ (Name of Candidate) who is a candidate for election to the office of \_\_\_\_\_ at the \_\_\_\_\_ Election to be held on \_\_\_\_\_ (date of election).

The following are the page numbers indicated on the attached **CERTIFICATION OF DELETIONS**:

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

\_\_\_\_\_  
(CANDIDATE)

\_\_\_\_\_  
(Circulator)

\_\_\_\_\_  
(Circulator)

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(Circulator)

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(Circulator)

\_\_\_\_\_  
(Circulator)

\_\_\_\_\_  
(Circulator)

Every person striking signatures from the petition shall each sign this certificate. This certificate shall be filed as part of the petition, shall be numbered, and shall be attached immediately following the last page of voters' signatures and preceding any **CERTIFICATE OF DELETION** sheet.

ATTACH TO PETITION

10 ILCS 5/7-10.1

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

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

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

(SEAL)

CAMPAIGN DISCLOSURE NOTICE OF OBLIGATION RECEIPT

The undersigned, \_\_\_\_\_, being a Candidate for  
(Candidate Name)

nomination or election to the office of \_\_\_\_\_ hereby

acknowledges receipt of Campaign Disclosure materials as specified by 10 ILCS 5/9

for the \_\_\_\_\_ Primary Election to be held on \_\_\_\_\_ February 28,

20<sup>23</sup> \_\_\_\_\_, from \_\_\_\_\_ Valeri L. Brod \_\_\_\_\_ City Clerk  
(Election Official's Name) (Title)

in and for \_\_\_\_\_ City of Washington \_\_\_\_\_, County of Tazewell  
(Political Subdivision)

and State of Illinois.

Dated: \_\_\_\_\_  
(Candidate Signature)



## D-5 NOTICE OF OBLIGATION

TO: All Candidates for Nomination, Election or Retention to Public Office and for Questions of Public Policy

This letter is to officially notify you of your filing obligation under Article 9 of the Election Code (An Act to Regulate Campaign Financing).

**ALL CAMPAIGN DISCLOSURE DOCUMENTS, INCLUDING THE D-1 STATEMENT OF ORGANIZATION, MUST BE FILED WITH THE STATE BOARD OF ELECTIONS ONLY.**

**The Act requires a political committee to file a form D-1, Statement of Organization, within 10 business days of the creation of such committee, except any political committee created within the 30 days before an election must file a Statement of Organization within 2 business days. Required forms and A Guide to Campaign Disclosure are available from the Board offices and online. Failure to file or late filing of a Statement of Organization will result in a civil penalty being imposed by the Board.**

Committees who must file fall within five categories: Candidate Political Committee, Political Party Committee, Political Action Committee, Ballot Initiative Committee, or Independent Expenditure Committee.

### 10 ILCS 5/9-1.8 Political Committees

**Candidate Political Committee:** means the candidate himself or herself or any natural person, trust, partnership, corporation, or other organization or group of persons designated by the candidate that accepts contributions or makes expenditures during any 12 month period in an aggregate amount exceeding \$5000 on behalf of the candidate.

**Political Party Committee:** means the State central committee of a political party, a county central committee of a political party, a legislative caucus committee, or a committee formed by a ward or township committeeman of a political party. A legislative caucus committee means a committee established for the purpose of electing candidates to the General Assembly by the person elected President of the Senate, Minority Leader of the Senate, Speaker of the House of Representatives, Minority Leader of the House of Representatives, or a committee established by 5 or more members of the same caucus of the Senate or 10 or more members of the same caucus of the House of Representatives.

**Political Action Committee:** means any natural person, trust, partnership, committee, association corporation, or other organization or group of persons, other than a candidate, political party, candidate political committee, or political party committee, that accepts contributions or makes expenditures during any 12 month period in an aggregate of amount exceeding \$5000 on behalf of or in opposition to a candidate or candidates for political office. Political Action Committee includes any natural person, trust, partnership, committee, association, corporation, or other organization or group of persons, other than a candidate, political party, candidate political committee, or political party committee, that makes electioneering communications during any 12 month period in an aggregate amount exceeding \$5000 related to any candidate or candidates for public office.

**Ballot Initiative Committee:** means any natural person, trust, partnership, committee, association, corporation, or other organization or group of persons that accepts contributions or makes expenditures during any 12 month period in an aggregate amount exceeding \$5000 in support of or in opposition to any question of public policy to be submitted to the electors. Ballot initiative committee includes any natural person, trust, partnership, committee, association, corporation, or other organization or group of persons that makes electioneering communications during any 12 month period in an aggregate amount exceeding \$5000 related to any question of public policy to be submitted to the voters. The \$5000 threshold applies to any contributions or expenditures received or made with the purpose of securing a place on the ballot for, advocating the defeat or passage of, or engaging in electioneering communication regarding the question of public policy, regardless of the method of initiation of the question of public policy and regardless of whether petitions have been circulated or filed with the appropriate office or whether the question has been adopted and certified by the governing body.

**Independent Expenditure Committee:** means any trust, partnership, committee, association, corporation, or other organization or group of persons formed for the exclusive purpose of making independent expenditures during any 12-month period in an aggregate amount exceeding \$5000 in support of or in opposition to (i) the nomination for election, election, retention, or defeat of any public official or candidate or (ii) any question of public policy to be submitted to the electors. "Independent expenditure committee" also includes any trust, partnership, committee, association, corporation, or other organization or group of persons that makes electioneering communications that are not made in connection, consultation, or concert with or at the request or suggestion of a public official or candidate, a public official's or candidate's designated political committee or campaign, or an agent or agents of the public official, candidate, or political committee or campaign during any 12-month period in an aggregate amount exceeding \$5000 related to (i) the nomination for election, election, retention, or defeat of any public official or candidate or (ii) any question of public policy to be submitted to the voters.

**PLEASE PRINT  
STATEMENT OF  
ECONOMIC INTEREST  
ON LEGAL SIZE PAPER  
AND 2-SIDED**



STATEMENTS OF ECONOMIC INTERESTS
TO BE FILED WITH THE TAZEWELL COUNTY CLERK

FOR OFFICE USE ONLY

CANDIDATE

Empty box for office use only

(TYPE OR HAND PRINT)

(NAME)

(LIST EACH OFFICE OR POSITION OF EMPLOYMENT FOR WHICH THIS STATEMENT IS FILED)

PREFERRED E-MAIL ADDRESS (OPTIONAL):

(FULL MAILING ADDRESS & PHONE NUMBER)

GENERAL DIRECTIONS

You may find the following documents helpful to you in completing this form: (1) federal income tax returns, including any related schedules, attachments, and forms; and (2) investment and brokerage statements. To complete this form, you do not need to disclose specific amounts or values or report interests relating either to political committees registered with the Illinois State Board of Elections or to political committees, principal campaign committees, or authorized committees registered with the Federal Election Commission. The information you disclose will be available to the public. You must answer all 6 questions. Certain questions will ask you to report any applicable assets or debts held in, or payable to, your name; held jointly by, or payable to, you with your spouse; or held jointly by, or payable to, you with your SB2408 Enrolled LRB102 11366 BMS 16699 b Public Act 102-0662 minor child. If you have any concerns about whether an interest should be reported, please consult your department's ethics officer, if applicable. Please ensure that the information you provide is complete and accurate. If you need more space than the form allows, please attach additional pages for your response. If you are subject to the State Officials and Employees Ethics Act, your ethics officer must review your statement of economic interests before you file it. Failure to complete the statement in good faith and within the prescribed deadline may subject you to fines, imprisonment, or both. BASIC INFORMATION:

1. IF YOU HAVE ANY SINGLE ASSET THAT WAS WORTH MORE THAN \$10,000 AS OF THE END OF THE PRECEDING CALENDAR YEAR AND IS HELD IN, OR PAYABLE TO, YOUR NAME, HELD JOINTLY BY, OR PAYABLE SB2408 ENROLLED LRB102 11366 BMS 16699 B PUBLIC ACT 102-0662 TO, YOU WITH YOUR SPOUSE, OR HELD JOINTLY BY, OR PAYABLE TO, YOU WITH YOUR MINOR CHILD, LIST SUCH ASSETS BELOW. IN THE CASE OF INVESTMENT REAL ESTATE, LIST THE CITY AND STATE WHERE THE INVESTMENT REAL ESTATE IS LOCATED. IF YOU DO NOT HAVE ANY SUCH ASSETS, LIST "NONE" BELOW.

Three horizontal lines for listing assets

2. Excluding the position for which you are required to file this form, list the source of any income in excess of \$7,500 required to be reported during the preceding calendar year. If you sold an asset that produced more than \$7,500 in capital gains in the preceding calendar year, list the name of the asset and the transaction date on which the sale or transfer took place. If you had no such sources of income or assets, list "none" below. Source of Income / Name of Date Sold (if applicable).

Source of Income / Name of Date Sold (if applicable).

Three horizontal lines for listing sources of income

COMPLETE BUT DO NOT DETACH

This section will be returned to you when the Statement is filed with the County Clerk.

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

Office or Position of Employment for which this statement is filed

(Type or Print)

Name

Address

City/State/ ZIP code

3. Excluding debts incurred on terms available to the general public, such as mortgages, student loans, and credit card debts, if you owed any single debt in the preceding calendar year exceeding \$10,000, list the creditor of the debt below. If you had no such debts, list "none" below. List the creditor for all applicable debts owed by you, owed jointly by you with your spouse, or owed jointly by you with your minor child. In addition to the types of debts listed above, you do not need to report any debts to or from financial institutions or government agencies, such as debts secured by automobiles, household furniture or appliances, as long as the debt was made on terms available to the general public, debts to members of your family, or debts to or from a political committee registered with the Illinois State Board of Elections or any political committee, principal campaign committee, or authorized committee registered with the Federal Election Commission.

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4. List the name of each unit of government of which you or your spouse were an employee, contractor, or office holder during the preceding calendar year other than the unit or units of government in relation to which the person is required to file and the title of the position or nature of the contractual services. SB2408 Enrolled LRB102 11366 BMS 16699 b Public Act 102-0662 Name of Unit of Government Title or Nature of Services

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5. If you maintain an economic relationship with a lobbyist or if a member of your family is known to you to be a lobbyist registered with any unit of government in the State of Illinois, list the name of the lobbyist below and identify the nature of your relationship with the lobbyist. If you do not have an economic relationship with a lobbyist or a family member known to you to be a lobbyist registered with any unit of government in the State of Illinois, list "none" below. Name of Lobbyist Relationship to Filer

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6. List the name of each person, organization, or entity that was the source of a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500 received during the preceding calendar year and the type of gift or gifts, or honorarium or honoraria, excluding any gift or gifts from a member of your family that was not known to be a lobbyist registered with any unit of government in the State of Illinois. If you had no such gifts, list "none" below. SB2408 Enrolled LRB102 11366 BMS 16699 b Public Act 102-0662

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7. List the name of any spouse or immediate family member living with the person making this statement employed by a public utility in this State and the name of the public utility that employs the relative. Name and Relation Public Utility

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### VERIFICATION

"I declare that this statement of economic interests (including any attachments) 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 is a fine not to exceed \$2,500 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)

If this statement of economic interests requires ethics officer review prior to filing, the applicable ethics officer must complete the following: CERTIFICATION OF ETHICS OFFICER REVIEW: "In accordance with law, as Ethics Officer, I reviewed this statement of economic interests prior to its filing."

Printed Name of Ethics Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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