

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

We, the undersigned, qualified voters in the Electoral Districts of the Pleasure Driveway and Park District of Peoria in the
(unit of government)
County of PEORIA 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 April 4, 2023 (date of election).

NAME:	OFFICE: PRESIDENT
ADDRESS:	
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)

NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1.			.IL	PEORIA
2.			.IL	PEORIA
3.			.IL	PEORIA
4.			.IL	PEORIA
5.			.IL	PEORIA
6.			.IL	PEORIA
7.			.IL	PEORIA
8.			.IL	PEORIA
9.			.IL	PEORIA
10.			.IL	PEORIA

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.