



**ILLINOIS STATE
BAR ASSOCIATION**

**2019
CANDIDATE CONTACT INFORMATION**

ASSEMBLY VACANCIES

The circuit or district you wish to represent: _____

(Circuit 1 to 23 or 1st Judicial District/Cook County)

Name: _____

Address: _____

City: _____

Phone Number: _____

Email: _____

This form serves as the cover sheet for your Nominating Packet and must be completed by the candidate and returned with Nominating Petitions.

Please send to:

Kim Weaver
Assistant to the Executive Director
Illinois State Bar Association
424 South Second Street
Springfield, IL 62701

2019 NOMINATING PETITION

ASSEMBLY VACANCIES

The circuit or district you wish to represent: _____

(Circuit 1 to 23 or 1st Judicial District/Cook County)

We, members of the Illinois State Bar Association eligible to vote* for the following named candidate,

nominate _____

(Name of Candidate)

(Mailing Address of Candidate)

1) _____
Signature Address

PRINT NAME City/State/Zip

2) _____
Signature Address

PRINT NAME City/State/Zip

3) _____
Signature Address

PRINT NAME City/State/Zip

4) _____
Signature Address

PRINT NAME City/State/Zip

5) _____
Signature Address

PRINT NAME City/State/Zip

Completed, original Petitions must be filed by 4:30 p.m. on Tuesday, May 21st in person at either the Illinois Bar Center, 424 South Second Street, Springfield or the Chicago Regional Office at 20 South Clark Street, Suite 900, Chicago, or by mail to the Illinois Bar Center, attention Executive Director's Office.

Signatures on the petition must be of members in good standing* of the Illinois State Bar Association.

Only petitions containing legible original signatures will be accepted for filing; facsimile or petitions with photocopied signatures will NOT be deemed to meet the filing requirements.

*dues are fully paid