

PETITION FOR NOMINATION
(To Form a New Political Party)

We, the undersigned qualified voters of the State of Illinois do declare that it is our intention to form a new political party in the political division aforesaid, to be known and designated as the Libertarian Party, and do hereby petition that the following named persons shall be candidates for the offices hereinafter specified, to be voted at the General Election to be held on November 8, 2022.

A COMPLETE SLATE IS HEREBY PRESENTED

NAME	OFFICE	ADDRESS, ZIP CODE
Scott Schluter	Governor	1510 N State St, Marion, IL 62959
John Phillips	Lieutenant Governor	441 Shadow Lane, Decatur, IL 62526
Daniel K. Robin	Attorney General	246 Devonshire Ct, Schaumburg, IL 60173
Jesse White	Secretary of State	305 N Park St, Centralia, IL 62801
Preston Nelson	Treasurer	11810 Petroff Road, Benton, IL 62812
Deirdre McCloskey	Comptroller	720 S Dearborn, Unit 206, Chicago, IL 60605
Bill Redpath	United States Senator	1303 Westley Lane, West Dundee, IL 60118

SIGNATURE	PRINTED NAME	REGISTERED STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1.				IL
2.				IL
3.				IL
4.				IL
5.				IL
6.				IL
7.				IL
8.				IL
9.				IL
10.				IL
11.				IL
12.				IL
13.				IL
14.				IL
15.				IL

State of Illinois)
County of _____) SS.

I, _____ do hereby certify that I reside at _____, in the _____
(Circulator's Name) (Street Address) (City/Village/Unincorporated Area)
of _____, _____, County of _____, State of _____
(if unincorporated, list municipality that provides postal service) (Zip Code)

that I am 18 years of age or older, 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 for 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 that their respective residences are correctly stated, as above set forth.

Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (insert month, day, year)

(Circulator's Signature)

(SEAL)

(Notary Public's Signature)