

PETITION FOR NOMINATION

We, the undersigned, members of and affiliated with the Democratic Party and registered voters and qualified primary electors of the Democratic Party, in the Appellate Court Third Judicial District of the State of Illinois, do hereby petition that the following named person shall be a candidate of the Democratic Party for the nomination for the office hereinafter specified, to be voted for at the primary election to be held on the 17th day of March 2026.

Candidate Name	Candidate Residence Address	Office	Party
John Pavich	21438 Plank Trail Drive, Frankfort, Illinois 60423	Judge of the Appellate Court, Appellate Court Third Judicial District, State of Illinois (Hon. Mary M. McDade Vacancy)	Democratic

Voter Signature	Voter Residence Address	City/Village/Town	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)
) ss.
County of _____)

I, _____, being first duly sworn, do hereby certify that I reside at _____ in the
(Circulator's Name) (Circulator's Street Address)

City / Village / Town / Unincorporated Area of _____, ZIP CODE _____, County of _____,
(Circle One) (Print Name of City, Town or Village)

and State of Illinois, 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, and are genuine, and that none of the signatures on this sheet were signed more than ninety (90) days preceding the last day for the filling of the petition, 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 Democratic Party, and registered voters and qualified primary electors residing in the political division for which the nomination is sought, and that their respective residences are correctly stated, as above set forth.

SIGNATURE OF CIRCULATOR

Signed and sworn to by _____ before me this _____ day of _____, 2025.
(Print Name of Circulator Here)

SIGNATURE OF NOTARY PUBLIC

(SEAL OR STAMP)

Sheet Number _____