10 ILCS 5/7-10, 7-10.2 **X...BIND HERE...X** Suggested
Revised March 2019
SBE No. P-26

COUNTY BOARD MEMBER
(counties that elect members from districts)
PRIMARY PETITION

We, the undersigned, members of and affiliated with the **Democratic** Party and qualified primary electors of the **Democratic** Party, in County Board District **5**, County of DuPage in the State of Illinois, do hereby petition that **Marylee Leu** who resides at 3651 Baybrook Dr. in the City of Aurora, 60504 in the County of DuPage and State of Illinois, shall be a candidate of the Democratic Party for the nomination for the office of **COUNTY BOARD MEMBER,** County Board **District 5** in the County of DuPage in the State of Illinois, to be voted for at the primary election to be held on **March 17, 2026**.

A Full Term is sought, unless an unexpired term is stated here: 4 year unexpired term

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

State of _Illinois_____)
) SS.
County of _____)

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 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 qualified voters of the __Democratic____ Party in the political division in which the candidates is seeking nomination/elective office, and that 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)

SHEET NO. _____