RECEIPT FOR FILING

Receipt is hereby acknowledged of the petition of:

Bill Oliger
1304 Jeffery Dr.
Mahomet II. (e1853)
Village y Mahomet Trustee 4 year term

This petition is deemed filed at:

8 COO o' clock (AM) (PM) on



ATT		PETITION	
AII	AUTIL) PEIIIIUN	

Suggested Revised March 2020 SBE No. P-1B

DEC 12 2022

STATEMENT OF CANDIDACY

INDEPENDENT

INDLI	INDENT
NAME:	OFFICE:
1 /46 1 01-6	TRUSTEE
ADDRESS - ZIP CODE:	A Full Term is sought, unless an unexpired term is stated here: year unexpired term CITY. VILLAGE OR SPECIAL DISTRICT:
7.551.255 2.11 6552.	CITT. VILLAGE OR SPECIAL DISTRICT:
1304 E JEFFER DRIVE MALOMET 61853 If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the	
FORMERLY KNOWN AS UN (List all names during last 3 years)	ITIL NAME CHANGED ON
(List all names during last 3 years)	(List date of each name change)
STATE OF ILLINOIS County of ChampalGul SS.	
	firmed), say that I reside at 1394 E Jeffery DRWE,
in the City, Village Unincorporated Area of MAhomet	(if unincorporated, list municipality that
provides postal service) Zip Code (\$\lambda \lambda \lamb	Champacou, State of Illinois;
that I am a qualified voter therein, that I am a candidate for election	to the office of
	voted upon at the election to be held on (date of election) and tha
I am legally qualified (including being the holder of any license that m	ay be an eligibility requirement for the office to which I seek election
to hold such office and that I have filed (or I will file before the close	e of the petition filing period) a Statement of Economic Interests as
required by the Illinois Governmental Ethics Act and I hereby requ	est that my name be printed upon the official ballot for election to
such office.	(Signature of Candidate)
Signed and sworn to (or affirmed) by William Joo (Name of Candidate	before me, on December 11, 2,022 (insert month, day, year)
(SEAL) OFFICIAL SEAL	(Notary Public's Signature)
PATRICK J BROWN NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:05/29/23	(Notal y Lablic 5 Signature)

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10 ILCS 5/7-10.1

Suggested Revised July, 2004 SBE No. P-1C

LOYALTY OATH (OPTIONAL)

United States of America)
State of Illinois) SS.
I, WILLAM JOLIGER, do swear (or affirm) that I am a citizen of the
United States and the State of Illinois, that I am not affiliated directly or indirectly with any communist
organization or any communist front organization, or any foreign political agency, party, organization or
government which advocates the overthrow of constitutional government by force or other means not
permitted under the Constitution of the United States or the Constitution of this State; that I do not directly or
indirectly teach or advocate the overthrow of the government of the United States or of this State or any
unlawful change in the form of the governments thereof by force or any unlawful means.
(Signature of Candidate)
Signed and sworn to (or affirmed) by William J OLIGER before me, (Name of Candidate)
on December 1) 2020 (insert month, day, year)
(Notary Public's Signature)
(Notary Public's Signature)

(SEAL)

OFFICIAL SEAL PATRICK J BROWN NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:05/29/23

STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE SECRETARY OF STATE



Reset

INSTRUCTIONS:

DACIO INFORMATIONI

You may find the following documents helpful to you in completing this form:

- (1) federal income tax returns, including any related schedules, attachments, and forms; and
- (2) investment and brokerage statements.

To complete this form, you do not need to disclose specific amounts or values or report interests relating either to political committees registered with the Illinois State Board of Elections or to political committees, principal campaign committees, or authorized committees registered with the Federal Election Commission.

The information you disclose will be available to the public.

You must answer all 7 questions. Certain questions will ask you to report any applicable assets or debts held in, or payable to, your name; held jointly by, or payable to, you with your spouse; or held jointly by, or payable to, you with your minor child. If you have any concerns about whether an interest should be reported, please consult your department's ethics officer, if applicable.

Please ensure that the information you provide is complete and accurate. If you need more space than the form allows, please attach additional pages for your response. If you are subject to the State Officials and Employees Ethics Act, your ethics officer must review your statement of economic interests before you file it. Failure to complete the statement in good faith and within the prescribed deadline may subject you to fines, imprisonment, or both.

BASIC INFORMATION:	
Name: William J Oliger	
Job title: Village Trustee	_
Office, department, or agency that requires you to file this form: Village of Mahomet	_
Other offices, departments, or agencies that require you to file a Statement of Economic Interests form: None	
Full mailing address: 1304 Jeffery Drive, Mahomet II 61853	-
Preferred e-mail address (optional):	
QUESTIONS:	•
1. If you have any single asset that was worth more than \$10,000 as of the end of the preceding calendar year and is held payable to, your name, held jointly by, or payable to, you with your spouse, or held jointly by, or payable to, you with your minor child such assets below. In the case of investment real estate, list the city and state where the investment real estate is located. If you dhave any such assets, list "none" below.	. 0 .
None	
	•
	•

Source of Income / Name of Asset	Date Sold (if applicable)
None	
owed any single debt in the preceding calendar year exceeding "none" below.	ral public, such as mortgages, student loans and credit card debts, if you \$10,000, list the creditor of the debt below. If you had no such debts, list intly by you with your spouse, or owed jointly by you with your minor child.
In addition to the types of debts listed above, you do not ne agencies, such as debts secured by automobiles, household fur the general public, debts to members of your family, or debts to	eed to report any debts to or from financial institutions or government initure or appliances, as long as the debt was made on terms available to or from a political committee registered with the Illinois State Board of ttee, or authorized committee registered with the Federal Election Com-
None	
preceding calendar year other than the unit or units of governm	r your spouse were an employee, contractor, or office holder during the nent in relation to which the person is required to file and the title of the
oreceding calendar year other than the unit or units of governm position or nature of the contractual services. Name of Unit of Government	r your spouse were an employee, contractor, or office holder during the nent in relation to which the person is required to file and the title of the
preceding calendar year other than the unit or units of governm position or nature of the contractual services.	nent in relation to which the person is required to file and the title of the
oreceding calendar year other than the unit or units of governm position or nature of the contractual services. Name of Unit of Government	nent in relation to which the person is required to file and the title of the
oreceding calendar year other than the unit or units of governmossition or nature of the contractual services. Name of Unit of Government None 5. If you maintain an economic relationship with a lobbyist of with any unit of government in the State of Illinois, list the name coobbyist. If you do not have an economic relationship with a lobby	nent in relation to which the person is required to file and the title of the
oreceding calendar year other than the unit or units of governmossition or nature of the contractual services. Name of Unit of Government None 5. If you maintain an economic relationship with a lobbyist of with any unit of government in the State of Illinois, list the name of the state of Illinois.	Title or Nature of Services Title or Nature of Services or if a member of your family is known to you to be a lobbyist registered of the lobbyist below and identify the nature of your relationship with the

6. List the name of each person, organization or entity that was the or in the aggregate in excess of \$500 received during the preceding calculating any gift or gifts from a member of your family that was not be State of Illinois. If you had no such gifts, list "none" below.	ne source of a gift or gifts, or honorarium or honoraria, valued singly alendar year and the type of gift or gifts, or honorarium or honoraria, known to be a lobbyist registered with any unit of government in the
None	
7. List the name of any spouse or immediate family member living in this State and the name of the public utility that employs the relative	with the person making this statement employed by a public utility e.
Name and Relation	Public Utility
None	
"I declare that this statement of economic interests (including ar knowledge and belief is a true, correct and complete statement of my Act. I understand that the penalty for willfully filing a false or incompl penal institution other than the penitentiary not to exceed one year, or Printed Name of Filer: William J Oliger	ete statement is a fine not to exceed \$2,500 or imprisonment in a
Date: 11-08-22	
Signature: William J. Oliyi	
If this statement of economic interests requires ethics officer review pri	
CERTIFICATION OF ETHICS OFFICER REVIEW: "In accordance with law, as Ethics Officer, I reviewed this statement	nt of economic interests prior to its filing."
Printed Name of Ethics Officer:	
Date:	
Signature:	
Preferred email address (optional):	
(-)	

NOTE: This statement is to be filed in the Office of the Secretary of State, Economic Interest Section, Index Department, 111 East Monroe Street, Springfield, Illinois 62756.

		BIDATEFEITION		SBE No. P-3
We, the undersigned, qualified voters in	the Village of _	Mahamet in the Co	ounty of Champa	NGD and
State of Illinois, do hereby petition that the	e following named person shall b	e an Independent Candidate for ele	ction to the office her	einafter specified
to be voted for at the Consolidated	Election to be held on	coll 4th 2023 (date of ele	ction).	
NAME: William J Oliger		OFFICE: Village Trustee	and the second s	
ADDRESS – ZIP CODE:		V 11.00-)C 11.0710		
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired te	rm is stated here: yea	r unexpired term
FORMERLY KNOWN AS		will appear on the ballot) CHANGED ON		
	mes during last 3 years)	(List date of each name cha	nge)	
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
William & Olian	William J Olyger	1304 E Jeffery	MAhomef ,IL	Clampases
The Oliver	Shirley Oligar	110 W. State	Mehomed ,IL	Chances
3. Oak & Slasp	DAlekTharp	1218Windwood	mahonet ,IL	Champaign
5. Des C Tary	2015 THARP	1318 Wendwood	maront	Change
6. KOD-EM	Kristine Oligo	13048 tottory	Mahamat.	Charmaid
Jusan alian	SUSAN Oliger	1203 E JEFFRY	MAHOMET, IL	Champaign
_/Romas Odle	Thomas Odle	\$ 1214 E JEFFREY	Mahornet ,IL	Champaign
8. Ard Kund	Rich Kaunk	107 Eunionsy	127 House IL	Charpaya
10. Coleran Nederland	Elizaboth Michae	[12098. Jeffen, 101	mælcon ,IL	decepage.
Hunder (Sval)	Jennier Caval	1302 Eloffery	Manamed, IL	Chamber
State of TUINOIS)	l		15
County of Champerian) SS.			57 - 2
William J Oliger (Circulator's Name) do hereby ce	ertify that I reside at	Seffer Dr	, in the
	thomet	(if unincorporated, list municipa	ality that provides pos	tal service) (Zip
Code) 6 1853, County of Champy	A 19n, State of	TUtro 25 that I am 1	8 years of age or old	ler (or 17 years
of age and qualified to vote in Illinois), that I more than 90 days preceding the last day of signing were at the time of signing the petition of the petition	o are c	Jenijine and that to the heet of my b	nowlodge and ballet	II.
espective residences are correctly stated, a	as above set forth.	fucal division in which the candidate	is seeking elective of	office, and their
		William & alley		
		(Circulator	's Signature)	
Signed and sworn to (or affirmed) by	inn I Oliga	before me, on l	1/2072	^
Official Seal	(Name of Circulator)		rt month, day, year)	//
(SEAL) Carole E Tempel	ols }	Mull Co	Muse	V
My Commission Expires 06/16	6/2025 \$	(Notary Pub	lic's Signature)	
	SHEET NO			

We, the undersigned, qualified voters in	the Village of	Mahamet in the C	Sounts of Mo.	OBE 110, F=2
State of Illinois, do hereby petition that the		be an Independent Candidate for all	County of Champo	and and
to be voted for at the Consolidate	Election to be held on	pril 4th 2023 (date of el		reinafter specified
NAME: William J Oliger		OFFICE:		
ADDRESS – ZIP CODE:		Village Trustee		
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired t	term is stated here:ye	ar unexpired term
If required pursuant to 10 ILCS 5/10-5. FORMERLY KNOWN AS	1, complete the following (this information UNTIL NAME	n will appear on the ballot) E CHANGED ON		
(List all na	mes during last 3 years)	(List date of each name ch	ange)	
(VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR	CITY, TOWN OR	
1.	C . A	RR NUMBER	VILLAGE ,IL	COUNTY
2.	truc Cover	1302E. Jeffery Dr.	Melionet	Chamaisn
3.	MARY STUCKEY	104 W. STATE ST	MAHE MEI	CHAMPAZEN
4. Queel hort	Samantha Stuckey	106 W. State St.	Mahonet	Champaign
5.	Maurett Smith	108 W. State St.	Mahomet.	Champaign
6. g. sl m	Diana Hanson	12018. Jeffer, Dr	Makemet, IL	Champaign
7. Probleen /007	Dori Stileen Nonne	206 Walnut St	Man ome +	11
8. And Market	DAVE HANSON	1201 E. SEFFERY	MA HOME THE	C HAMPAIGA
9. MASIAL	LISA SLADE	1305 E Jeffery	Malometil	Champaign
10.	THOMASK FRUST	1804 BINEBIRD DR	MAHOMET ,IL	CHAMPOIEN
Jon Gran	Toni Oliger	6065. Jelterson	Mahonet	Champaga
State of Thinois)) SS.	De	1	- traffic 3
County of Champaign	j			
William & Oligh 11	Circulator's Name) do hereby ce	ertify that I reside at 1354 Jo	flex Dr	* "
city/Village/Unincorporated Area of WAM		(if unincorporated, list municipal	ality that provides pos	, in the
code) (853), County of Champe	, State of			
f age and qualified to vote in Illinois), that is nore than 90 days preceding the last day of igning were at the time of signing the petiti	am a citizen of the United States	s, and that the signatures on this sh	eet were signed in my	er (or 17 years presence, not
gning were at the time of signing the petiti espective residences are correctly stated, as	on registered voters of the polits above set forth.	ical division in which the candidate	is seeking elective of	the persons so office, and their
		1.111		
		(Circulator	's Signature)	
gned and sworn to (or affirmed) by Will	m John	\bigcap $1,1,1$	2.20	
******	(Name of Circulator)	before me, on (Inser	t month, day, year)	
Official Seal (SEAL) Carole E Tempel	~ }	1/1/10		1
Notary Public State of Illinois My Commission Expires 06/16/2025	5 \$	(Notary Pinh)	io's Signature)	
***********	SHEET NO	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	- Solgifature	

State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for election to the office hereinafter specific to be voted for at the Confolic data Election to be held on April 14 2003 (date of election). NAME: OFFICE: VIII GGC TV5+EC A Full Term is sought, unless an unexpired term is stated here:	
NAME: VIII CAST TO STEEL VIII CAST TO STEEL	_ ar ecifie
A Full Term is sought, unless an unexpired term is stated here:	
If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot) FORMERLY KNOWN AS (List all names during last 3 years) NAME VOTER'S PRINTED STREET ADDRESS OR CITY, TOWN OR	
If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot) FORMERLY KNOWN ASUNTIL NAME CHANGED ON (List all names during last 3 years) (List date of each name change) NAME	rm
(List all names during last 3 years) NAME VOTER'S PRINTED (VOTER'S SIGNATURE) NAME VOTER'S PRINTED STREET ADDRESS OR CITY, TOWN OR	
(VOTER'S SIGNATURE) VOTER'S PRINTED STREET ADDRESS OR CITY, TOWN OR	
1. Juliphnih Olin Julie Henrich Olian 101 & 100 M. IL	
3. ill Jennifo Difens 403 Jeffey Mchand Champai	gn
Whele I help Mickey Motele 1201 5 1 Place Mil 31 01	<u> </u>
4. Marie Sester Susie Jester 10a Walnut Mahonet Changen	(gU)
Hann Schuht Sewer Schacht 505 bichard Maharilla	<u>el</u> (1
Thomas Carus Thomas Difanis 1800 O 110	
Hear Crowley 505 Craig Dr Mohn A. M. A.	A
8. Ene Crowley 505 Crais Pr Mahound Change	ign
Hay Cronkey GARY CROW/21/ 303 CENTER MARONT IL Changer	151
wendy (rowley 303 Lenter Mnometal Change	n.
tate of Thinois	2
county of Champaign) ss.	
William John (Circulator's Name) do hereby certify that I reside at 1304 John Dr in the	
ity Village Unincorporated Area of Mahama (if unincorporated, list municipality that provides postal service) (
OGEL (4.0) County of 1.00	
fage 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, gring were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and the specific political division in which the candidate is seeking elective office, and the specific political division in which the candidate is seeking elective office, and the specific political division in which the candidate is seeking elective office, and the specific political division in which the candidate is seeking elective office, and the specific political division in which the candidate is seeking elective office, and the specific political division in which the candidate is seeking elective office.	ars not so
And the serious stated, as above set form.	ICII
(Circulator's Signature)	_
ined and sworn to (or affirmed) by William) Wisk	
(Name of Circulator) Official Seal (Name of Circulator)	-
(SEAL) Carole E Tempel Notary Public State of Illinois My Commission Expires 06/16/2025 (Notary Public's Signatury)	
(Notary Public's Signature) SHEET NO.	ā.

We, the undersigned, qualified voters in	n the Village of	Mahamet in the	01	ODE NO. P-,
State of Illinois, do hereby petition that the	ne following named person shall	be an Independent Candidate for a	County of Champ	anc anc
to be voted for at the Consolidate	Election to be held on	pril 4th 2023 (date of e		ereinafter specified
NAME: William J Oliger		OFFICE:	ieotion).	
ADDRESS - ZIP CODE:		Village Trustee		
1304 E Jeffen Drive	61853	A Full Term is sought, unless an unexpired	term is stated horos	
If required pursuant to 10 ILCS 5/10-5. FORMERLY KNOWN AS	1, complete the following (this information	Will annear on the ballet)	ye	ar unexpired term
(List all na	ames during last 3 years)	E CHANGED ON(List date of each name ch	agaga)	
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
1.	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
2. // /	Richie Smith	913 Morretta	Makone (IL	ch. A.
3. Nont	Kyle Smith	913 Markte	Mahomet, IL	Chungas
4.//	Justin Smith	913 Marietta	Mahometil	Charage
5. M M	Christle Smith	913 Manetta	Mahomet, IL	Champaio
6. how Merlice	Chris Merkle	906 Marretta	Mahonet, IL	Channe
7. Jehrolligh	Stephanie Merkle	1065. Marster	Mahanel	Chun 2/90
8. 12 Savender	Dandra Lavender	904 Marietta De	Mahamet ,IL	Champaian
9. 1 H. A.	Greg Lavender	904 Moriette DA	mahomet ,IL	Champaga
18) A SIL OF O	Lindsay Brotherton	902 Marietta Dr	Mahomel "	Champagn
State of Things	Tet Malloch	303 W. State	Mahomet	blomnian
County of Champaign)) SS.			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
11/11/11)			
	Circulator's Name) do hereby ce	rtify that I reside at 1304	Jeller Dr	, in the
FILES	Shonet	(if unincorporated, list municipa	ality that provides post	al service) (Zip
fage and qualified to vote in Illipsia) that I	,	Mary that Lam 1	8 years of one	
f age and qualified to vote in Illinois), that I a nore than 90 days preceding the last day of igning were at the time of signing the petitic	filling of the petitions and are g	s, and that the signatures on this she	eet were signed in my	presence, not
igning were at the time of signing the petitions are correctly stated, as	on registered voters of the polit s above set forth.	ical division in which the candidate	is seeking elective o	he persons so ffice, and their
		(Circulator	's Signature)	
gned and sworn to (or affirmed) by Will (101		[
	Name of Circulator)	before me, on	12027	
Official Seal Carole E Tempel	§ Silver of Griodiction)	(Inser	t month, day, year)	7
(SEA) Notary Public State of Illinois My Commission Expires 06/16/2025	3	aule D	Hews. 11	
\$ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^		(Notary Publi	c's Signature	
	SHEET NO.	1	() /	

Suggeste Revised March 202

We, the undersigned, qualified voters in		Mahamet in the C	County of Champo	2) C = .	
State of Illinois, do hereby petition that the to be voted for at the	e following named person shall	be an Independent Candidate for el	lection to the office he	reinafter specified	
NAME: William Joiger ADDRESS-ZIP CODE:		OFFICE: Village Trustee	ection).		
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired	term is stated here: yea	ar unexpired term	
	1, complete the following (this information UNTIL NAME	will appear on the ballot) CHANGED ON			
(List all na	wes during last 3 years) VOTER'S PRINTED	(List date of each name ch	ange)		
(VOTER'S SIGNATURE)	NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY	
1. GIRISH KRISHNAN	Crv	1209 Cozzene Dr	Mohomet,IL	Champaign	
3.	RAMYA KRISHNAN	1209 Correne Dr.	Mahonul, IL	Champaign	
4 Maker	LaDonna Kaiser	207 Division	Mahonet, IL	(hanguage	
5. D Carse	MarkBlaiser	207 N. Division	Mahonet, IL	Chambrica	
6. Palacon La la Cor	Kehelle Kesler	4075 lakes of the luce		hampagn	
7.	Beneron Wilson	1603 Beaver Lake Dr.	Manoyet "	Chammian	
8. A. N. W. A. A.	JEFF Wilson	1603 Bener L.K. DR.	Mahumat ,IL	Charpanyo	
9.	Deboral Kilouss	1007 Marietta Ar.	Makomet "	Champaign	
10. Part Pon	Dutick Book	100/Marietta Dr	Maliomet "	Changeage	
State of ILLINOIS	Patrick Brown	711Heather Dr.	Mahonet	(hampings	
County of Champaign) SS.				
William John	Circulator's Name) do hereby ce	rtify that I reside at 201	1.06 c D =		
(Circulator's Name) do hereby certify that I reside at 1304 July , in the City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip					
ode) 6/852, County of Champer	Ay, State of	111			
fage and qualified to vote in Illinois), that and a citizen of the United States, and that the signatures on this sheet were signed in my presence, not igning were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and their					
	·	Willen John			
igned and sworn to (or affirmed) by William Oligo before me, on Circulator) Official Seal (Name of Circulator) Carole E Tempel Notary Public State of Illinois					
(SEAL) My Commission Expires 06/16/2025 (Notary Public's Signature)					
	SHEET NO.		0./		

We, the undersigned, qualified voters in		Mahamet in the C	ounty of Champo	3)(0.0
State of Illinois, do hereby petition that the to be voted for at the	e following named person shall I	be an Independent Candidate for ele	ection to the office he	reinafter specifie
NAME: William J Oliger	, and the most off	OFFICE:	ection).	
ADDRESS - ZIP CODE:		Village Trustee		
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired to	erm is stated here:ye;	ar unexpired term
If required pursuant to 10 ILCS 5/10-5.1 FORMERLY KNOWN AS	, complete the following (this information	will appear on the ballot) ECHANGED ON		
(List all nar	mes during last 3 years)	(List date of each name cha	inge)	
(VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
2.	Dan Wardinger	404 FOXRUNDR	Mahomet ,IL	Champing
3. oh	Jason Kuester	307 Fox Bun Dr.	Mahomet	Chamas
4. Chehoa Kuester	Chenoa Kuester	307 Fox Run Dr	Mahomet."	Champan
5. M. Wadygen	. Kristneweldiger	404 FOX RunD	Mahmet	Chama
6. 1 has 1/w	- Nicholas Diffipp	409 FOX Runds	Mahont IL	(hen)
7. Jan John	RYAN Johnson	1708 S. Sunny ACRES RD.	Mahamit ,IL	Chartin
8. Stranger	Nort Aulusa	3645. FZY ALV	Melant ,IL	(Liping
9. De la	Jake Walding	404 S. Fox Rin	Mahomit	Changes
10. The	Brun Metzer	203 Ranchline	We hand IL	Chunge
	Seen Widerer	503 Parcheteret	Mehout ,IL	hames
State of Thinois)) SS.)
County of Champaign)			
, William & Ohyo (C	Circulator's Name) do hereby ce	rtify that I reside at	effry Dr	, in the
Δ1.	onut	(if unincorporated, list municipa	lity that provides pos	al service) (Zip
f age and qualified to vote in Illipsion that I am 18 years of age or older (or 17 years)				
nore than 90 days preceding the last day of igning were at the time of signing the petition aspective residences are correctly stated, as	on registered votors of the sall	s, and that the signatures on this she	et were signed in my	processes
		holden Jille		
* 1.	1 51	(Circulator)	s Signature)	
igned and sworn to (or affirmed) by William Organ before me, on (Name of Circulator)				
Official Seel				
(SEAL) Carole E Tempel Notary Public State of Illinois My Commission Expires 06/16/2025		/mle/s	Mupel	
2000 1012020 7	SHEET NO.	(Notary Public	s Signature)	

We, the undersigned, qualified voters in	the Village of	Mchamet	01	SBE No. P-:	
State of Illinois, do hereby petition that the			ounty of Wampo	anc anc	
to be voted for at the Consolidate	Election to be held on $igwedge$	pril 4th 2003 (date of ele		reinafter specified	
NAME:		OFFICE:			
ADDRESS - ZIP CODE:		Village Trustee			
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired te	rm is stated here:yer	ar unexpired term	
If required pursuant to 10 ILCS 5/10-5.1 FORMERLY KNOWN AS	, complete the following (this information UNTIL NAME	will appear on the ballot) CHANGED ON			
(List all nan	nes during last 3 years)	(List date of each name cha	nge)		
(VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY	
1. Whighelf.	Kerry Lippold Jr.	420 Dorchester Dr.	Mahomet, IL	Champoign	
3. CO	REBECCAGOODWI	420 DORCHESTER DR	MAHOMET, IL	C HAM DAJEA!	
4. What	EMILY DAVIS	IDSN TURNER DR	II.	CHAMPAIGN	
5. 10 1	Kyle Schlorff	810 Flarwood dr	Mahomet ,IL		
6:100	Allyssaltarpst	710 Hawk Mahomet	Mahomer	Champaign	
7.	MarkHarpst	710 Hawk	Mahomet	Champaign	
8.	Andrew Harpst	110 Hawk	Manomet"	Champayan	
9. A Second	KalphSpleht	1009 Maple Tree Lane	Mahomer	Champaign	
10.	Dewn Mon	1808 S. Orchard	Mahomel."	Changuyn	
State of TUINOIS	Stewn Woon	605 5. Elm	Mahont	Chaengan	
County of Champaign)) SS.				
William 7 Olice	,	10-11)		
(Circulator's Name) do hereby certify that I reside at					
county of County					
f 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 and					
igning were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and their					
		Estillian 1001			
		(Circulator's	s Signature)		
igned and sworn to (or affirmed) by	ian When		7072		
(Name of Circulator) (Insert month, day, year)					
(SEAL) Carole E Tempel Notary Public State of Illinois	}	(level 1)	2 Tunder	V	
My Commission Expires 06/16/202	SHEET NO.	(Notary Public	c's Signature)		

We, the undersigned, qualified voters in the Whage of Mahamet in the County of Champaign and						
State of Illinois, do hereby petition that the	e following named person shall t	be an Independent Candidate for ele	ection to the office I	and and		
to be voted for at the Consolidate	Election to be held on	pril 4th 2023 (date of el		reinafter specified		
NAME: William Joliger ADDRESS-ZIP CODE:		OFFICE: Village Trustee				
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired t	erm is stated here:yea	ar unexpired term		
If required pursuant to 10 ILCS 5/10-5. FORMERLY KNOWN AS	1, complete the following (this information UNTIL NAME	will appear on the ballot) ECHANGED ON				
(List all na	mes during last 3 years)	(List date of each name ch	ange)			
(VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR	CITY, TOWN OR	OO! IN ITS		
1. Mal	Matt Robinson	ZOZ N DIVISION	VILLAGE	COUNTY		
2.	Kristma Rabbean	ZUZ N DIVISION	MA AOMET"	CHAMPA16 N		
3. Wallum	Kally Roberson	202 & Main St	Ma Homet "	CHAMPRIEN VICALRO		
Jenny Beotherton.	JEREMY BROTHERTON	902 MARZETTA	MAHONET, IL	CHANGE S		
Rose DWinters	BeverlyDWinters	101 S Tumer Dr	Mahomet "	Champoigh		
Rebect of Kuly	Rebocca Kuhns	407 Northridge Dr	Mahamet	Change		
Hel/166	David Kuhns	407 Northridge Dr	Mahomet "	hamorica		
9. 11	Dustin Brewer	209 N. Division	Mahonet IL	Changain		
10.10.1019	CISA Brewer	209 N. Division	Mahamet"	Champila		
	Wichelle Morgan	2210 Stade	Mahanet."	Champin		
County of Champaign) SS.			43.9		
ibu (illace (Licina and La Maria	Circulator's Name) do hereby ce	rtify that I reside at 134 J	Afri Dr	, in the		
ity/Village/Unincorporated Area of WANNAM State of THZOND WANNAM STATE OF THZ WANNAM STATE OF THE 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 gning were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and their						
		Willem de Circulator	'a Signatura)			
gned and sworn to (or affirmed) by William Defore me, on 17077 Official Seal Carole E Tempel Notary Public State of Illinois My Commission Expires 06/16/2025 (Circulator's Signature) before me, on (Insert month/day, year) (SEAL) Notary Public State of Illinois My Commission Expires 06/16/2025						
~~ ~ ~ ~ <u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>	SHEET NO.	(Notary Publi	c's Signature)			

We, the undersigned, qualified voters in	the Village of	Mahamet in the Co	ounts of Class	OBE NO. P	
State of Illinois, do hereby petition that the to be voted for at the	e following named person shall l	be an Independent Candidate for ele	ection to the office he	reinafter specifie	
NAME: William J Diger ADDRESS-ZIP CODE:		OFFICE: Village Trustee			
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired te	erm is stated here:yea	ar unexpired term	
If required pursuant to 10 ILCS 5/10-5.1 FORMERLY KNOWN AS	UNTIL NAME	will appear on the ballot) E CHANGED ON			
(List all nar	nes during last 3 years)	(List date of each name cha	inge)		
(VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY	
2. A Jamis Dayle	Benjamin Taylor	103 5. OMSAN ST	Mahonel ,IL	champaign	
Hmarda Vaylor	Amanda Taylor	103 S. DIVISION ST	Mahanet ,IL	Champaid	
4. July (months)	Cathy Himetta	1201 Cyproc Pt Ct	Mahret "	Champan	
5. Show & Bux	Susan Pux	1701 Cypress Pt. Ct.	Mahoviet "	Champing	
Marusknight	Mayflyto	509 Christian Blad 505 Riverbow Blad	Mahout!	Ohmpri zn	
8. Janu grusal	Laurie Coward	403 River bend 13/14	1 . 4 . 11	Charles	
9.	Jun (out	603 Kinhel Sh	Ment IL	Change	
10. Ostall Centra	Stary (arolan	BIO HICKONITIZEO (+	nohmet!"	Champa	
State of Illinois	FORT CATOIM	1310 Hickory Tree Ct.	M Hhart !	Chypny	
County of Champaign)) SS.			V 0	
. William Jelley 10	Circulator's Name) do hereby ce	rtify that I recide at 1304 Ju	Dl. , h-		
city/Village/Unincorporated Area of WW	ont		lity that provides post	, in the	
(if unincorporated, list municipality that provides postal service) (Zip Sode) 1/253, County of Amplity, State of Many that I am 18 years of age or older (or 17 years nore than 90 days preceding the last day of filing of the petitions and are genuine and that to the best of my knowledge and I in my presence, not					
ore than 90 days preceding the last day of igning were at the time of signing the petitic espective residences are correctly stated, as	filing of the petitions and are gon registered voters of the political above set forth.	s, and that the signatures on this she enuine and that to the best of my knical division in which the candidate	et were signed in my nowledge and belief t is seeking elective o	presence, not he persons so ffice, and their	
		William Jelly			
* 1.1	()	((Ĉirculator's	s Signature)		
igned and sworn to (or affirmed) by William Duy before me on 11/10/4					
Official Seal Carole E Tempel (SEA) Notary Public State of Illinois My Commission Expires 06/16/2025	\$	July &	month, day, year)		
&	SHEET NO.	(Notary Public	s Signature)		

We, the undersigned, qualified voters in	n the Village of	Mchamat	ΔI	SBE No. P-:	
State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for election to the office hereinafter specified to be voted for at the CODDOL CODE TO THE CODE TO THE PROPERTY OF THE					
to be voted for at the COnsolidate	Election to be held on	pril 4th 2003 (date of ele		reinafter specifiec	
NAME: William J Oliger		OFFICE: Village Trustee			
ADDRESS - ZIP CODE:		1 1110000 1107100			
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired te	rm is stated here: ye	ar unexpired term	
	1, complete the following (this information UNTIL NAME	will appear on the ballot) E CHANGED ON			
(List all na	ames during last 3 years)	(List date of each name cha	nge)		
(VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COLINEAL	
1.	Susan Adamson		Mahomet	Channe	
3. A	NATHAN ADAMSON	1510 REMUELLAKE DR	MAHOMET, IL	CHAMPAUZA	
4. January	Alicia Kessel	1501 Beaver Laxe	Tr.	to hamon	
5. 00 Suxal	JOLGLAS JOHNSON	1507BENEZLAKED	- MANDAIF, IL	CHANNER	
6. Tail Colins	Caristine Johnson	1507 Beaver Lake DR.	Mahomet, IL	Champing	
7. 8 - 50/4	Jenniter Seik	1509 Beaver Lake Dr.	Mahmet, IL	Changeer	
8. S. Josep Van Wygerak	BRIAN SEIR	1509 BEAVERLANG DR.	MAHOWET!	CHAMPAGE	
9.	Scott Van Wingerden	1505 BeaverLAKE DR	Mahomet ,IL	Champaign	
10. jull of myuden	Lori Van Wingerden	1505 Beavertake Dr.	Malomet "	Chargagn	
State of TUNNIS	William P. Shafer	1604 Bener Lake Di	Mahamet "	Chingeson	
County of Champaign)) SS.)			, 2,	
. William J Oligy (Circulator's Name) do hereby certify that I reside at [304 Jelled Do					
City/Village/Unincorporated Area of Manual Village/Unincorporated Area					
code) 6/953 County of Manufa		(if unincorporated, list municipa			
f 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 igning were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and their					
	a market south of the	Dilling M. J. Willed			
		(Circulator's	s Signature)		
igned and sworn to (or affirmed) by William Digue before me, on [[/]/2027					
(Name of Circulator) (Name of Circulator)					
(SEAL) Official Seal Carole E Tempel	}	Walls &	An Del	/	
Notary Public State of Illinois My Commission Expires 06/16/2025	SUPPRISO	(Notary Public	s's Signature)		
A A A A A A A A A A A A A A A A A A A	SHEET NO	U	1 1		

We, the undersigned, qualified voters in	the Village of	Mahamet in the Co	ounty of Champo	SBE No. P-	
State of Illinois, do hereby petition that the	. ,	be an Independent Candidate for ele	ction to the office have	anc anc	
to be voted for at the Consolidate	Election to be held on	oril 4th 2023 (date of ele		einafter specified	
NAME: William J Oliger		OFFICE:	,		
ADDRESS - ZIP CODE:		Village Trustee			
1304 E Jeffery Drive 6/853 A Full Term is sought, unless an unexpired term is stated here: 4 year unexpired term					
	1, complete the following (this information UNTIL NAME	will appear on the ballot) CHANGED ON			
(List all na	wes during last 3 years) VOTER'S PRINTED	(List date of each name cha	nge)		
(VOTER'S SIGNATURE)	NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY	
MALL AM	more Akus	211 Raymond Dr	Metonet ,IL	Chronica	
3. 1 2 m Acro	Amandam Akus	211 Roumond Dr	mchant, IL	CA JAGO	
4.0	Marcie Stout	604 W. Dianne Lane	Mahomet ,IL	Chemira	
5 Jahren Lakele	Jernsey Labor	602 W. Diannelane	Mahomet, IL	Chan Dair	
6. CM of 1 = 0 a	Robert Ma	Cooz W Diame Long	Melynd, IL	Clannen.	
70 1 O I	TYUT LARDE	602 West dianne	munumet, IL	Champaign	
8 Seniod	Christina Kenrod	212 Berbara dr	mahomet	Chamaian	
9.	Clay Sanders	212 Barbara dr.	mahomet	1 hammin	
10.	604 FRAN	Gal E Min	MATCINET!L	11-	
	CRICHETT Engelbrech	1059 DIVISION	Wahomet ,IL	12	
State of Things)) SS.		C of Facility	V.	
County of Unimparian)				
(Circulator's Name) do hereby certify that I reside at 1394 Jeffy Dr., in the					
	Moment	(if unincorporated, list municipa	lity that provides post		
code), County of	one (-iti - cui	MINIS that I am 18	vears of age or old	or /or 17	
f 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 igning were at the time of signing the petition registered voters of the political division in which the candidate is readily to the persons so					
igning were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and their espective residences are correctly stated, as above set forth.					
		William Claritator's	s Signature)		
$\sim 1.4 \times 1.00$					
igned and sworn to (or affirmed) by William (Name of Circulator) before me, on (Insert month, day, year)					
Official Seal (SEAL) Carole E Tempel	~~~}	Ulrale L	1,000		
Notary Public State of Illin My Commission Expires 06/1	nois 16/2025 🕏	(Notary Public	s's Signature)		
********	SHEET NO.				

We, the undersigned, qualified voters in	the Village of	Mahamet in the C	" - CI	SBE No. F
State of Illinois, do hereby petition that the		oe an Independent Candidate for ele	ounty of Champa	190, ar
to be voted for at the LOnsolidated	Election to be held on $oldsymbol{\triangle}$	pril 4th 2003 (date of ele	Contract of the contract of th	einafter specifie
NAME: William J Oliger		OFFICE:	333311	
ADDRESS - ZIP CODE:		Village Trustee		127
1304 E Jeffery Drive	61853	A Full Term is sought, unless an unexpired t	erm is stated here: yea	unexpired term
If required pursuant to 10 ILCS 5/10-5.1 FORMERLY KNOWN AS	UNTIL NAME	will appear on the ballot) E CHANGED ON	-	
NAME (List all nam	voter's printed	(List date of each name cha	The state of the s	
(VOTER'S SIGNATURE)	NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
Jarricea Bernett	Patricia Berne	4505 W. Main	Mahomel	Para
. Poula Goetho	Paula Goethe	204 Foxkumby	Mahamel Mahamel	OI TIPA
4.	2.0	11/1	,IL ,	Champag as
5.			,IL	. /
6.	1		,iL	*
			,11_	
7.			,IL	
8.			,IL	
9.			,IL	
10.		a, -	,IL	-
State of Illinois)			
County of Champerian) SS.		· ·	
. William Olia	Circulator's Name) do hereby ce	ertify that I rapida at \$ 1359	7.01	
City/Village/Unincorporated Area of Mah	Unit	. 6	2014 9 121	, in the
code) 4857 County of Manner	160	(if unincorporated, list municipal		
ore than 90 days preceding the last day of	am a citizen of the United States	s, and that the signatures on this she	8 years of age or olde eet were signed in my	er (or 17 years presence, not
igning were at the time of signing the petitic espective residences are correctly stated, as	on registered voters of the political above set forth.	tical division in which the candidate	is seeking elective or	fice, and their
61 °		(Circulator	s Signature)	
igned and sworn to (or affirmed) by	and Ohn	hoforo ms - 11 / 1	7.77	
Official Seal	(Name of Circulator)	before me, on(Inser	month, day, year)	
SEAL Notary Public State of Illinois		11/1/200G	P. HIN	
My Commission Expires 06/16/20	20 E	(Notary Publi	C's Signature)	1-
	SHEET NO.	1		