

RECEIPT FOR FILING

Receipt is hereby acknowledged of the petition of:

Bruce Colravv
NAME

1213 Vista View
ADDRESS

Mahomet, Il. 61853
OFFICE

Village of Mahomet Trustee 4 year

This petition is deemed filed at: 8:00 o'clock (AM) (PM) on 12/12/2022
(insert month, day, year)

DATED: 12/12/2022
(insert month, day, year)

[Signature]
SIGNATURE OF ELECTION AUTHORITY



STATEMENT OF CANDIDACY

DEC 12 2022

INDEPENDENT

NAME: Bruce Colravy	OFFICE: Trustee, Village of Mahomet <small>A Full Term is sought, unless an unexpired term is stated here: ___ year unexpired term</small>
ADDRESS - ZIP CODE: 1213 Vista View Court, Mahomet, Illinois 61853	CITY, VILLAGE OR SPECIAL DISTRICT: Mahomet

If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the following (this information will appear on the ballot)

FORMERLY KNOWN AS _____ UNTIL NAME CHANGED ON _____
(List all names during last 3 years) (List date of each name change)

STATE OF ILLINOIS)
County of Champaign) SS.

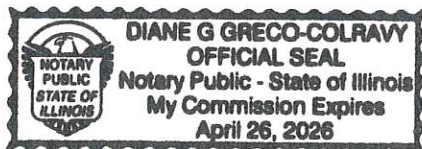
I, Bruce Colravy being first duly sworn (or affirmed), say that I reside at 1213 Vista View Court in the City, Village, Unincorporated Area of Mahomet (if unincorporated, list municipality that provides postal service) Zip Code 61853 in the County of Champaign, State of Illinois; that I am a qualified voter therein, that I am a candidate for election to the office of Trustee in the village of Mahomet to be voted upon at the election to be held on (date of election) and that (Name of City, Village, Township, County, District or State)

I am legally qualified (including being the holder of any license that may 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 of the petition filing period) a Statement of Economic Interests as required by the Illinois Governmental Ethics Act and I hereby request that my name be printed upon the official ballot for election to such office.

Bruce Colravy
(Signature of Candidate)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022
(Name of Candidate) (insert month, day, year)

(SEAL)



Diane G. Greco-Colravy
(Notary Public's Signature)

ATTACH TO PETITION

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, Bruce Colravy, 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.

Bruce Colravy
(Signature of Candidate)

Signed and sworn to (or affirmed) by Bruce Colravy before me,
(Name of Candidate)

on 12/11/2022
(insert month, day, year)

Diane G. Greco-Colravy
(Notary Public's Signature)

(SEAL)



INDEPENDENT CANDIDATE PETITION

We, the undersigned, qualified voters in the Village of Mahomet in the County of Champaign and 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 Consolidated Election to be held on April 4, 2023 (date of election).

NAME: Bruce Colravy OFFICE: Village Trustee ADDRESS - ZIP CODE: 1213 Vista View Ct, Mahomet, IL 61853 A Full Term is sought, unless an unexpired term is stated here: ___ year unexpired term

If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot) FORMERLY KNOWN AS UNTIL NAME CHANGED ON

Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court, in the City/Village/Unincorporated Area of Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois

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 of 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 their respective residences are correctly stated, as above set forth.

Bruce Colravy (Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022 (Name of Circulator) (Insert month, day, year)

(SEAL)



Diane G. Greco-Colravy (Notary Public's Signature)

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State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court Mahomet (City/Village/Unincorporated Area of) (if unincorporated, list municipality that provides postal service) (Zip Code) 61853 Champaign (County of) Illinois (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 of 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 their respective residences are correctly stated, as above set forth.

Bruce Colravy (Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022 (Name of Circulator) (Insert month, day, year)



Diane G. Greco-Colravy (Notary Public's Signature)

(SEAL)

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State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court Mahomet in the City/Village/Unincorporated Area of Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois 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 of 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 their respective residences are correctly stated, as above set forth.

Bruce Colravy (Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022 (Name of Circulator) (Insert month, day, year)

(SEAL)



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State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853 Champaign State of Illinois 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 of 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 their respective residences are correctly stated, as above set forth.

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State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois 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 of 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 their respective residences are correctly stated, as above set forth.

Bruce Colravy (Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022 (Name of Circulator) (Insert month, day, year)



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State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois 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 of 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 their respective residences are correctly stated, as above set forth.

Bruce Colravy (Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022 (Name of Circulator) (Insert month, day, year)

(SEAL)



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State of Illinois County of Champaign ss.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois

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 of 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 their respective residences are correctly stated, as above set forth.

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State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court in the City/Village/Unincorporated Area of Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois 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 of 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 their respective residences are correctly stated, as above set forth.

Bruce Colravy (Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022 (Name of Circulator) (Insert month, day, year)



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ADDRESS - ZIP CODE: 1213 Vista View Ct, Mahomet, IL 61853	A Full Term is sought, unless an unexpired term is stated here: ____ year unexpired term

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NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	IL	COUNTY
1. Cheryl S. Dixon	Cheryl S. Dixon	1202 Vista View Ct	Mahomet	IL	Champaign
2. Rick L Dixon	Rick L Dixon	1202 Vista View Ct	Mahomet	IL	Champaign
3. Gary Gillham	Gary Gillham	1209 Marietta	Mahomet	IL	Champaign
4. Karen L. Gillham	Karen L. Gillham	1209 Marietta Dr	Mahomet	IL	Champaign
5. Dustin Sears	Dustin Sears	1208 Marietta Dr	Mahomet	IL	Champaign
6. Stanley Ann	Stanley Ann	1206 S. MARILYN	Mahomet	IL	Champaign
7. Marie Burge	Marie Burge	1110 Marietta Dr	Mahomet	IL	Champaign
8. Leslie Hess	Leslie Hess	1102 S. Marietta Dr	Mahomet	IL	Champaign
9. Maureen Van Horn	Maureen Van Horn	1107 Marietta Dr	Mahomet	IL	Champaign
10. Ross Wallace	Ross Wallace	1203 Marietta Dr	Mahomet	IL	Champaign

State of Illinois)
County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court, in the City/Village/Unincorporated Area of Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois

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 of 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 their respective residences are correctly stated, as above set forth.

Bruce Colravy
(Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022
(Name of Circulator) (Insert month, day, year)

(SEAL)



Diane H. Greco-Colravy
(Notary Public's Signature)

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State of Illinois) County of Champaign) SS.

I, Bruce Colravy (Circulator's Name) do hereby certify that I reside at 1213 Vista View Court, in the City/Village/Unincorporated Area of Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853, County of Champaign, State of Illinois

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Bruce Colravy (Circulator's Signature)

Signed and sworn to (or affirmed) by Bruce Colravy before me, on 12/11/2022 (Name of Circulator) (Insert month, day, year)



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(SEAL)

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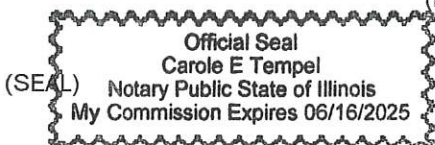
Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of Illinois) County of Champaign) SS.

I, Sean M. Widener (Circulator's Name) do hereby certify that I reside at 503 Dorchester Ct, in the City/Village/Unincorporated Area of Mahomet (if unincorporated, list municipality that provides postal service) (Zip Code) 61853 County of Champaign, State of Illinois 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 of 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 their respective residences are correctly stated, as above set forth.

Signature of Sean M. Widener (Circulator's Signature)

Signed and sworn to (or affirmed) by Sean M Widener before me, on 11/22/2022 (Name of Circulator) (Insert month, day, year)



Signature of Notary Public (Notary Public's Signature)

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



INSTRUCTIONS:

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: Bruce Colravy

Job title: 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: 1213 Vista View Court, Mahomet, Illinois 61853

Preferred e-mail address (optional): bmcovravy@msn.com

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 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, list such assets below. In the case of investment real estate, list the city and state where the investment real estate is located. If you do not have any such assets, list "none" below.

None

2. Excluding the position for which you are required to file this form, list the source of any income in excess of \$7,500 required to be reported during the preceding calendar year. If you sold an asset that produced more than \$7,500 in capital gains in the preceding calendar year, list the name of the asset and the transaction date on which the sale or transfer took place. If you had no such sources of income or assets, list "none" below.

Source of Income / Name of Asset	Date Sold (if applicable)
None	

3. Excluding debts incurred on terms available to the general public, such as mortgages, student loans and credit card debts, if you owed any single debt in the preceding calendar year exceeding \$10,000, list the creditor of the debt below. If you had no such debts, list "none" below.

List the creditor for all applicable debts owed by you, owed jointly 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 need to report any debts to or from financial institutions or government agencies, such as debts secured by automobiles, household furniture or appliances, as long as the debt was made on terms available to the general public, debts to members of your family, or debts to or from a political committee registered with the Illinois State Board of Elections or any political committee, principal campaign committee, or authorized committee registered with the Federal Election Commission.

None

4. List the name of each unit of government of which you or your spouse were an employee, contractor, or office holder during the preceding calendar year other than the unit or units of government in relation to which the person is required to file and the title of the position or nature of the contractual services.

Name of Unit of Government	Title or Nature of Services
None	

5. If you maintain an economic relationship with a lobbyist or if a member of your family is known to you to be a lobbyist registered with any unit of government in the State of Illinois, list the name of the lobbyist below and identify the nature of your relationship with the lobbyist. If you do not have an economic relationship with a lobbyist or a family member known to you to be a lobbyist registered with any unit of government in the State of Illinois, list "none" below.

Name of Lobbyist	Relationship to Filer
None	

6. List the name of each person, organization or entity that was the source of a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500 received during the preceding calendar year and the type of gift or gifts, or honorarium or honoraria, excluding any gift or gifts from a member of your family that was not known to be a lobbyist registered with any unit of government in the State of Illinois. If you had no such gifts, list "none" below.

None

7. List the name of any spouse or immediate family member living with the person making this statement employed by a public utility in this State and the name of the public utility that employs the relative.

Name and Relation

Public Utility

None

_____	_____
_____	_____
_____	_____

VERIFICATION:

"I declare that this statement of economic interests (including any attachments) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement is a fine not to exceed \$2,500 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Printed Name of Filer: Bruce Colravy

Date: 10/26/2022

Signature: *Bruce Colravy*

If this statement of economic interests requires ethics officer review prior to filing, the applicable ethics officer must complete the following:

CERTIFICATION OF ETHICS OFFICER REVIEW:

"In accordance with law, as Ethics Officer, I reviewed this statement 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.