

PETITION FOR NOMINATION

We, the undersigned, members of and affiliated with the **REPUBLICAN PARTY**, and qualified primary electors of the **REPUBLICAN PARTY** in **Will County, State of Illinois**, do hereby petition that the following named person shall be a candidate of the **REPUBLICAN PARTY** for nomination to the office hereinafter specified, to be voted for at the **Primary Election** to be held **March 17, 2026**.

CANDIDATE FOR WILL COUNTY TREASURER — REPUBLICAN PARTY

| CANDIDATE NAME | RESIDENCE ADDRESS | OFFICE | PARTY |
|--------------------------------|---|---|-----------------------------|
| CARMEN MAURELLA III | 14048 Chicory Trail Homer Glen, IL 60491 | COUNTY TREASURER WILL COUNTY, STATE OF ILLINOIS | REPUBLICAN PARTY |

| SIGNATURE OF QUALIFIED VOTER | PRINTED NAME | VOTER'S RESIDENCE ADDRESS | CITY or VILLAGE |
|---------------------------------|--------------|---------------------------|--------------------------|
| 1. | | | _____ WILL COUNTY, IL |
| 2. | | | _____ WILL COUNTY, IL |
| 3. | | | _____ WILL COUNTY, IL |
| 4. | | | _____ WILL COUNTY, IL |
| 5. | | | _____ WILL COUNTY, IL |
| 6. | | | _____ WILL COUNTY, IL |
| 7. | | | _____ WILL COUNTY, IL |
| 8. | | | _____ WILL COUNTY, IL |
| 9. | | | _____ WILL COUNTY, IL |
| 10. | | | _____ WILL COUNTY, IL |

State of Illinois)
County of Will) SS.

CIRCULATOR'S STATEMENT

I, _____, do hereby certify that I reside at _____
(Print Circulator's Name) (Insert Circulator's Street Address or RR Number)

in the CITY / TOWN / VILLAGE of _____, ZIP CODE _____, County of _____, State of _____,
(Circle One) (Name of City, Town, or Village) (Insert Zip Code) (Insert County Name) (Insert State)

that I am 18 years of age or older, that I am a citizen of the United States, and certify that the signatures on this sheet were signed in my presence, and certify that said signatures are genuine, and certify that none of the signatures on the sheet were signed more than 90 days preceding the last day for filing 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 **Republican Party**, residing in **Will County, State of Illinois**, the political division in which the candidate is seeking nomination, and that their respective residence addresses are correctly stated as above set forth.

(Signature of Circulator Making this Affidavit)

(To be completed by Notary Public):

Signed and sworn to (or affirmed) by _____ before me, on _____, 2025.

(NOTARY SEAL OR STAMP)

(Print Name of Circulator)

(Insert month, day)

(Signature of Notary Public)

SHEET NO