LIBRARY TRUSTEE CANDIDATE COURTESY PACKET

The following is a courtesy packet. Candidates should consult the 2025 State of Illinois Candidate's Guide and the 2025 Abbreviated Election Calendar for all information regarding becoming a Public Library

District Board-Trustee Candidate.

To view the guide and calendar in its entirety, visit the Running for Office Section of the Illinois State Board of Elections'

website at: https://www.elections.il.gov/

What Are the Responsibilities of a Library Trustee?

Along with fellow board members, the library's trustees establish policies and long-term goals. Trustees understand the Library's mission, service roles, and strategic plan and can articulate these to the community. They also oversee the budget process, set the annual tax levy, and advocate for the library in the community.

ESSENTIAL DUTIES AND RESPONSIBILITIES

- Attends board meetings and participates appropriately.
- Follows the Illinois Open Meetings Act, the Illinois Freedom of Information Act, and all other pertinent state and federal laws.
- Assists in establishing clear by-laws which outline operating procedures for the board.
- Assists in establishing Library policies and helps update them as needed.
- Assists in overseeing budget preparation, sets the annual tax levy, and ensures that documents for the library's annual tax levy are properly posted, published, and filed.
- Encourages and participates in long-term strategic planning.
- Hires, evaluates and approves compensation for the Library Director.
- Recognizes that the board as a whole supervises and deals directly with the Library Director, while the Library Director supervises all other library staff.

SPECIFIC DUTIES

- Prepares for board meetings by reading board meeting minutes and all reports, serves on committees as needed, and is appointed by the board president.
- Reads the McHenry Public Library's Policy Manuals. Reads other publications related to Library trustees, such as the Illinois Trustee Facts File and the Financial Manual for Illinois Public Libraries.
- Abides by the board's decisions and publicly supports them. Follows the established chain of command to effect change.
- Understands the relationship of the Library, Library Board with the Friends of the Library.
- Participates with other board members in signing checks for the library. Review the library's financial reports monthly and help to ensure that an audit is carried out annually and reviewed by the library board.
- Become informed of the services offered by the library and promote these services to the community.
- Become aware of services and issues related to the Illinois Library Systems and contact local and state elected officials when library-related issues arise.
- Is familiar with intellectual freedom principles, including book challenges and how they are applied.
- Keeps up with current library trends and practices by reading the literature of the profession and by visiting other public libraries.
- Is aware of the board duties as outlined in the Board of Trustee By-laws and the Policy Manual.



McHenry Public Library District

809 Front Street McHenry, Illinois 60050 Phone: 815.385.0036 www.mchenrylibrary.org

Memo

To: Prospective Public Library District Board- Trustee Candidates

From: Lesley Jakacki, Library Director (on behalf of Library Board Secretary Monica Leccese)

Date: August 20, 2024

Re: April 1, 2025 Library Trustee Election:

Candidate Filing Information and Petition Signature Requirements

General Information

Four (4) positions on the McHenry Public Library District's Board of Trustees will be filled at the consolidated election on April 1, 2025.

The terms for the positions are as follows:

- Six-year unexpired term (remaining 4 years of the term and serves until 2029)
- Six-year unexpired term (remaining 4 years of the term and serves until 2029)
- Six-year expired term (full 6-year term and serves until 2031)
- Six-year expired term (full 6-year term and serves until 2031)

Petitions may be circulated from August 20, 2024-November 18, 2024

The filing period runs from 9:00 AM Tuesday, November 12, 2024, through 5:00 PM Monday, November 18, 2024. Completed forms can only be accepted during this time. Please submit these forms to the Library, in the care of the Library Director, during the following hours.

- Monday Friday: 9:00 AM to 5:00 PM
- Weekday evening and weekend hours are available by appointment only. Candidates should contact Lesley Jakacki to make an appointment to submit the nomination paperwork. This can be done via email at director@mchenrylibrary or by calling 815-385-0036 ext. 300.

Petition Signature Requirements

The statutory requirement governing the number of signatures needed on candidates' nominating petitions for the April 1, 2025, Library Trustee election reads as follows: "A number of qualified voters residing in the district equivalent to at least 2% of the votes cast at the last election for library trustees, or 50, whichever is less."

The last time that Trustees for the McHenry Public Library District were elected was at the consolidated election held on April 4, 2023. McHenry PLD voters cast a total of 4,419 ballots for library trustees in that election. Two percent of 4,419 is 88; therefore, the minimum number of valid signatures needed is 50. Candidates should consider exceeding the minimum number of signatures by a comfortable margin, just in case some signatures on their petition sheets are challenged and invalid. Petitions may not be circulated prior to August 20, 2024

Election Information

Candidates should consult the 2025 State of Illinois Candidate's Guide and the 2025 Abbreviated Election Calendar for all information regarding becoming a **Public Library District Board-Trustee Candidate**.

The complete guide can be viewed at the 'Running for Office' Section of the Illinois State Board of Elections website at https://www.elections.il.gov/.

Disclaimer: This is not legal advice. The McHenry Public Library District is providing this for general information purposes only. All candidates should consult with legal counsel regarding election matters. We cannot provide legal advice on these matters nor recommend an attorney.

PUBLIC LIBRARY DISTRICT BOARD — TRUSTEE

Public Library District

NOMINATION PAPERS

Petitions: Nonpartisan (SBE Form P-4)

Statement of Candidacy: Nonpartisan (SBE Form P-1A)
Loyalty Oath (optional): All candidates (SBE Form P-1C)

Statement of Economic Interests: Filed with the county clerk of the county in which the principal office of the unit of local government with which the person is associated is located. (5 ILCS 420/4A-106) See page 22 regarding filing the receipt.

Fair Campaign Practices Act (voluntary): Filed with the State Board of Elections.

QUALIFICATIONS

Qualified elector of the library district with one-year residency in the library district at the time nomination papers are filed. (75 ILCS 16/30-20(d))

A person is not eligible to serve as a library trustee who, at the time of filing nomination papers, is in arrears in the payment of a tax or other indebtedness due to the library district or has been convicted in any court located in the United States of any infamous crime, bribery, perjury, or other felony. (75 ILCS 16/30-20(e))

A person convicted of a felony, bribery, perjury, or other infamous crime, for an offense committed on or after November 17, 2023 (the effective date of Public Act 103-562) and committed while the person was serving as a public official in this State, is ineligible to hold any local public office unless the person's conviction is reversed, the person is again restored to such rights by the terms of a pardon for the offense, the person has received a restoration of rights by the Governor, or the person's rights are otherwise restored by law. (730 ILCS 5/5-5-5)

SIGNATURE REQUIREMENTS

A number of qualified voters residing in the district equivalent to at least 2% of the votes cast at the last election for library trustees, or 50, whichever is less. (75 ILCS 16/30-20(a))

FILING DATES

November 12-18, 2024 (not more than 141 nor less than 134 days prior to the consolidated election).

WHERE TO FILE

With the Library District Secretary. (75 ILCS 16/30-20(a)

TERM

7 Trustees: 6-year terms. The library board may, by resolution, change to 4-year terms. (75 ILCS 16/30-10)

TERM BEGINS

The third Monday of the month (May 19, 2025) following the regular election of trustees. (75 ILCS 16/30-10, 30-40(e))

Within 74 days after their election or appointment, the incumbents and new trustees shall take their oaths of office and meet to organize the board. (75 ILCS 16/30-40(a))

CAMPAIGN DISCLOSURE

Reports must be filed either on paper or electronically with the State Board of Elections, 2329 S. MacArthur Blvd., Springfield, IL 62704 or 69 W. Washington St., Pedway LL-08, Chicago, IL 60602.

FEBRUARY AND APRIL 2025 ELECTIONS

ESTABLISHED POLITICAL PARTIES, INDEPENDENT, NEW POLITICAL PARTY AND NONPARTISAN OFFICES TO BE ELECTED

MUNICIPAL

Mayor or President

Clerk Treasurer

Alderman or Trustee

• TOWNSHIP
Supervisor
Clerk

Assessor

Highway Commissioner

Trustees

- PARK DISTRICT Commissioners, Trustees
- PUBLIC LIBRARY DISTRICT Trustees
- TOWNSHIP AND MUNICIPAL LIBRARY Trustees
- REGIONAL BOARD OF SCHOOL TRUSTEES Trustees
- SCHOOL DISTRICT Board Members
- COMMUNITY COLLEGE DISTRICT Trustees
- FIRE PROTECTION DISTRICT Trustees

FILING DATES AND DEADLINES:

October 21-28 2024 Filing period for candidates seeking nomination at the FEBRUARY 25, 2025 Consolidated Primary Election. Petitions may NOT be circulated prior to July 30, 2024. File with local election official in main district office. November 12-18, 2024 Filing period for candidates seeking election at the APRIL 1, 2025 Consolidated Election. Petitions may NOT be circulated prior to August 20, 2024. All candidates, except school board members, MUST file with local election official in main district office.

SIGNATURE REQUIREMENTS:

Established Party Candidates:

Ballots Cast (highest # within party) x .5%

.5% (.005) of the qualified **primary** electors of their **party**. For political subdivisions, the number of primary electors shall be determined by taking the total vote cast for the candidate for that political party who received the highest number of votes in the political subdivision at the last regular election at which an officer was regularly scheduled to be elected from that subdivision.

Independent Candidates:

Ballots Cast x 5% =minimum

Ballots Cast x 8% = maximum (or 50 more than the minimum)

New Party Candidates:

Ballots Cast x 5%

Park District Candidates:

Ballots Cast x 2% or not less than 25

Public Library Candidates:

Ballots Cast x 2% or 50 signatures, whichever is less.

Municipal/Township Library Candidates: 25 minimum

Fire Protection District Candidates: 5% of registered voters or 25, whichever is less.

Board of Education Candidates: 10% of registered voters or 50 signatures, whichever is less.

NOMINATION PAPERS MUST BE SECURELY FASTENED TOGETHER AND INCLUDE:

<u>STATEMENT OF CANDIDACY</u> – Must include the candidate's name, the candidate's legal address and the office sought. Changes cannot be made after the filing of the nomination papers.

NOMINATING PETITIONS WITH NUMBER OF SIGNATURES REQUIRED (pages sequentially numbered) – The form of the candidate's name for the ballot will be taken from the first numbered page of the nomination petition. The top of each petition page must include the candidate's name, legal address, title of office, term and district.

LOYALTY OATH (optional)

RECEIPT OF FILING STATEMENT OF ECONOMIC INTEREST - Required by the Illinois Governmental Ethics Act, this form must be filed with the County Clerk and a receipt issued. The receipt must be filed with the petition papers. The receipt is the only form that may be added to nomination papers once they have been filed.

<u>CERTIFICATION OF DELETIONS</u> – This form is completed by the candidate or circulator deleting a name from the petition for nomination. A separate form must be used by each person striking signatures.

<u>CERTIFICATION OF ATTACHED LIST OF DELETIONS</u> – This form is completed by the candidate in addition to the Certificate of Deletions if names are deleted from the petitions.

Disclaimer: This is not legal advice. The McHenry County Clerk's office is providing this for general information purposes only. All candidates should consult with legal counsel regarding election matters. The McHenry County Clerk's office cannot recommend an attorney or give legal advice on these matters. For the complete Election Calendar and Candidates Guide please visit the Illinois State Board of Elections Website: www.elections.state.il.us

A TT	ACH TO	DETITION	
ALL	ACH IU	PETITION	

Suggested Revised March 2020 SBE No. P-1A

STATEMENT OF CANDIDACY

NONPARTISAN

NAME:	OFFICE	≣:
	A Full Te	erm is sought, unless an unexpired term is stated here: year unexpired term
ADDRESS – ZIP CODE:	CITY. V	ILLAGE OR SPECIAL DISTRICT:
If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10	0-5.1, complete the following	ng (this information will appear on the ballot)
FORMERLY KNOWN AS (List all names during I	UNTIL NAI ast 3 years)	ME CHANGED ON(List date of each name change)
STATE OF ILLINOIS)		
County of)	SS.	
I,	being first	duly sworn (or affirmed), say that I reside at
	-	prated Area of
(if unincorporated, list municipality that provides		
, State of Illinois;	that I am a qualified vo	oter therein, that I am a candidate for Nomination/
Election to the office of	in the	(Name of City, Village or Special District)
		(date of election) and that I am legally qualified
to hold such office and that I have filed (or I will fi	le before the close of th	e 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
Nomination/Election to such office.		
		(Signature of Candidate)
Signed and sworn to (or affirmed) by (Na	nme of Candidate)	before me, on (insert month, day, year)
(SEAL)		(Notary Public's Signature)

X...BIND HERE...X

Suggested Revised March 2020 SBE No. P-4

NONPARTISAN PETITION (NON-MUNICIPAL AND COMMISSION FORM OF MUNCIPALITY)

We, the undersigned, qualified voters in t	he			in	the
County of	and State of Illinois, do	(unit of government) be hereby petition that the	e following name	d person shall be a No	onpartisan
Candidate for election to the office herein					
on	(date of elec	ction).			
NAME:		OFFICE:			1
ADDRESS:					
		A Full Term is sought, unless	an unavnirad tarm is	stated here:	movmired to rm
If required pursuant to 10 ILCS 5/10-5	.1, complete the following (this informa	_	an unexpired term is	stateunereyear u	nexpireaterm
FORMERLY KNOWN AS	UNTIL N	AME CHANGED ON			
(List all n	ames during last 3 years) VOTER'S PRINTED	(List da	te of each name cha	city, town or	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUM		VILLAGE	COUNTY
1.				,IL	
2.				,IL	
3.				,IL	
4.				,IL	
5.				,IL	
6.				,IL	
7.				,IL	
8.				,IL	
9.				,IL	
10.	+			,IL	
State of)				
County of	/) SS.				
	_)				
l,	_(Circulator's Name) do here	by certify that I reside at			, in the
City/Village/Unincorporated Area of		(if unincorporated	d, list municipali	ty that provides post	al service) (Zip
Code), County of age and qualified to vote in Illinois), that I am	, 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 preceding the last day of filing of the petitions	a citizen of the United States, and are genuine and that to the	d that the signatures on this best of my knowledge and	s sheet were signed belief the persons	ed in my presence, not n so signing were at the t	nore than 90 days ime of signing the
petition registered voters of the political division	n in which the candidate is seeking	g elective office, and their re	espective residence	es are correctly stated, a	s above set forth.
			·	s Signature)	
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on)(Ins	ert month, day, year)	
(SEAL)	((0	, , , ,	
(OLAL)		-	(Notary Pu	blic's Signature)	
	SHEET NO	1			

	AT	TACH TO	PETITION	
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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.				
State of Illinois	,					
I,			, do swea	ar (or affirm) that	l am a citize	en of the
United States and the State of Illi	nois, that I	am not af	filiated dired	ctly or indirectly	with any cor	mmunist
organization or any communist fro	ont organiza	tion, or an	y foreign po	olitical agency, p	arty, organiz	zation or
government which advocates the	overthrow o	of constitu	tional gover	nment by force	or other me	ans not
permitted under the Constitution of	the United S	States or th	e Constitutio	on of this State; t	hat I do not d	irectly or
indirectly teach or advocate the ov	erthrow of t	he govern	ment of the	United States o	r of this State	e or any
unlawful change in the form of the	governments	s thereof b	y force or ar	ny unlawful mear	ns.	
				(Signature (of Candidate)	
				(Signature t	n Candidate)	
Cianad and awarn to (ar of	firm od) by				bofe	ara ma
Signed and sworn to (or af	inned) by		(Name of C	andidate)	beid	ore me,
on (insert month, day, year)						
				(Notary P	ublic's Signa	ture)
(SEAL)						

STATEMENT OF ECONOMIC INTERESTS

TO BE FILED WITH THE COUNTY CLERK

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.

ı	FILED

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.

faith and within the p BASIC INFORMATI	ON:			
	<u></u>			
Name		J	lob Title	
Office, departmen	t, or agency that requires you to fil	e this form		
Other offices, dep	artments, or agencies that require	you to file a Statemer	nt of Economic Interests for	m
Full Mailing Addre	ess			
Preferred E-Mail A	Address (Optional)			
your name, held join	ngle asset that was worth more than style by, or payable to, you with your specifinvestment real estate, list the city are allow.	ouse, or held jointly by	, or payable to, you with your	minor child, list such assets
during the preceding	ition for which you are required to file calendar year. If you sold an asset the and the transaction date on which t	nat produced more than he sale or transfer took	n \$7,500 in capital gains in the c place. If you had no such so	e preceding calendar year, list urces of income or assets, list
_	Source of Income / Name of As		Date Sold (if applica	
single debt in the pre List the cre child. In addition to the agencies, such as de general public, debts	ncurred on terms available to the genericeding calendar year exceeding \$10 ditor for all applicable debts owed by the types of debts listed above, you doebts secured by automobiles, househes to members of your family, or debts ee, principal campaign committee, or	,000, list the creditor of you, owed jointly by you not need to report any old furniture or appliant to or from a political co	the debt below. If you had no u with your spouse, or owed ju y debts to or from financial ins ces, as long as the debt was rommittee registered with the Ill	o such debts, list "none" below. ointly by you with your minor stitutions or government made on terms available to the linois State Board of Elections or

the contractual services.	
Name of Unit of Government	Title or Nature of Services
of government in the State of Illinois, list the name of the lobbyist b	nember of your family is known to you to be a lobbyist registered with any unit below and identify the nature of your relationship with the lobbyist. If you do ber known to you to be a lobbyist registered with any unit of government in Relationship to Filer
aggregate in excess of \$500 received during the preceding calendary	e source of a gift or gifts, or honorarium or honoraria, valued singly or in the ar year and the type of gift or gifts, or honorarium or honoraria, excluding o be a lobbyist registered with any unit of government in the State of Illinois.
7. List the name of any spouse or immediate family member living State and the name of the public utility that employs the relative. Name and Relation	with the person making this statement employed by a public utility in this Public Utility
and belief is a true, correct and complete statement of my economic	attachments) has been examined by me and to the best of my knowledge ic interests as required by the Illinois Governmental Ethics Act. I understand a fine not to exceed \$2,500 or imprisonment in a penal institution other than nent."
Printed Name of Filer	Signature
Date	
If this statement of economic interests requires ethics officer review	w 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 statem	nent of economic interests prior to its filing."
Printed Name of Ethics Officer	Signature
Date	Preferred E-Mail Address (Optional)

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

NOTE: THIS STATEMENT OF ECONOMIC INTERESTS MUST INCLUDE THE FILER'S ORIGINAL SIGNATURE. THE ORIGINAL FORM MUST BE FILED IN THE OFFICE OF THE COUNTY CLERK, 667 WARE ROAD, ROOM 107, WOODSTOCK, ILLINOIS, 60098.

CERTIFICATE OF ATTACHED LIST OF DELETIONS

and are attached hereafter to the petitions of	(Name of Candidate) who
is a candidate for election to the office of	· · · · · · · · · · · · · · · · · · ·
	(date of election).
The following are the page numbers indicated on the	ne attached CERTIFICATION OF DELETIONS:
(CANDIDATE)	
(Circulator)	(Circulator)
Every person striking signatures from the pet This certificate shall be filed as part of the pet be attached immediately following the last preceding any CERTIFICATE OF DELETION	ition, shall be numbered, and shall page of voters' signatures and

SHEET NO. _____

CERTIFICATION OF DELETIONS

		(Name of (Candidata) who is	e and line numbers, a candidate for ele	ction or nomi
on		(date of election).	ne	Licotioi
Page No.	Line No.	Page No.	Line No.	Page No.	Line No
			<u> </u>		

Only the person circulating the petition, or the candidate on whose behalf the petition is circulated, may strike any signature from the petition. If deletions are made, this **CERTIFICATION OF DELETIONS** shall be filed as part of the petition.

(Signature of Person Deleting Signatures)