

STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
MIKE FUNK	7139 E 450 NORTH MCLEAN, IL 61754	WATER AUTHORITY TRUSTEE	MT HOPE/ FUNKS GROVE MULTI-TOWN- SHIP	NON- PARTISAN

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)

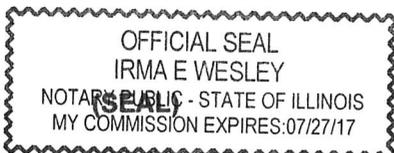
FORMERLY KNOWN AS \_\_\_\_\_ UNTIL NAME CHANGED ON \_\_\_\_\_  
(List all names during last 3 years) (List date of each name change)

STATE OF ILLINOIS )  
County of MCLEAN ) SS.

I, STEPHEN M FUNK (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 7139 E 450 NORTH ROAD, in the City, Village, Unincorporated Area (circle one) of MCLEAN (if unincorporated, list municipality that provides postal service) Zip Code 61754, in the County of MCLEAN, State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the DEMOCRATIC Party; that I am a candidate for Nomination/Election to the office of WATER AUTHORITY TRUSTEE in the MT HOPE, FUNKS GROVE MULTI-TOWN District, to be voted upon at the primary election to be held on 4-4-2017 (date of election) and that I am legally qualified (including being the holder of any license that may be an eligibility requirement for the office to which I seek the nomination) 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 NON-PARTISAN (Name of Party) Primary ballot for Nomination/Election for such office.

Stephen M Funk  
(Signature of Candidate)

Signed and sworn to (or affirmed) by STEPHEN M FUNK before me, on 12-16-16  
(Name of Candidate) (insert month, day, year)



Irma E. Wesley  
(Notary Public's Signature)

**NONPARTISAN PETITION  
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)**

We, the undersigned, qualified voters in the MT HOPE/FUNKSGROVE WATER DISTRICT in the County of McLEAN and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held on 4/4/2017 (date of election).

NAME	OFFICE	ADDRESS--ZIP CODE
MIKE FUNK	office title: full term or <u>6</u> year vacancy (circle one)	7139 E 450 N ROAD McLEAN, IL 61754

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 \_\_\_\_\_  
(List all names during last 3 years) (List date of each name change)

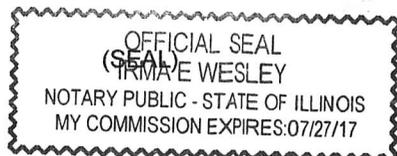
NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1 Mike E Funk	8492 E 200 North Rd	McLean IL	McLean
2 [Signature]	7173 E 600 N Road	McLean IL	McLean
3 Darrell Cameron	2393 N. 1100 E Road	Heyworth IL	McLean
4 Green Dexter	113 N. Moore	McLean IL	McLean
5 Susan E. Kurling	205 S. Elm	McLean IL	McLean
6 John Kurling	205 S Elm	McLean IL	McLean
7 Russ Broadfield	3634 N 685 E	McLean IL	McLean
8 David Under	6120 N 300 E	Stanford IL	McLean
9 [Signature]	507 W North	McLean IL	McLean
10 Randall Stanton	6328 N 425 East Rd	McLean IL	McLean

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) SS.

I, MIKE FUNK (Circulator's Name) do hereby certify that I reside at 7139 E 450 N ROAD in the City/Village/Unincorporated Area (circle one) of McLEAN (if unincorporated, list municipality that provides postal service) Zip Code 61754, County of McLEAN, 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 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 registered voters of the political division in which the candidate is seeking elective office, and that their respective residences are correctly stated, as above set forth.

Stephen M Funk  
(Circulator's Signature)

Signed and sworn to (or affirmed) by STEPHEN M FUNK before me, on 12-09-2016  
(Name of Circulator) (insert month, day, year)



Jana E Wesley  
(Notary Public's Signature)

**NONPARTISAN PETITION  
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)**

We, the undersigned, qualified voters in the MT HOPE/FUNKS GROVE WATER DIST. in the County of MCLEAN and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held on 4/4/2017 (date of election).

NAME	OFFICE	ADDRESS--ZIP CODE
MIKE FUNK	office title: full term or <u>6</u> year vacancy (circle one)	7139 E 450 N ROAD MCLEAN, IL 61754

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 \_\_\_\_\_  
(List all names during last 3 years) (List date of each name change)

NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1 <u>Debby Funk</u>	<u>7139 E. 450 NORTH RD</u>	<u>McLean IL</u>	<u>McLean</u>
2 <u>Patricia K. Telfer</u>	<u>6381 E 535 North Rd</u>	<u>McLean IL</u>	<u>McLean</u>
3 <u>REGINA RUTHERFORD</u>	<u>110 N-BLATCHFORD</u>	<u>MCLEAN IL</u>	<u>MCLEAN</u>
4 <u>[Signature]</u>	<u>4465 E 500 North Rd</u>	<u>McLean IL</u>	<u>McLean</u>
5 <u>[Signature]</u>	<u>205 WESTIN ST</u>	<u>McLean IL</u>	<u>McLean</u>
6 <u>[Signature]</u>	<u>503 W North</u>	<u>McLean IL</u>	<u>McLean</u>
7 <u>[Signature]</u>	<u>104 E Spencer St</u>	<u>McLean IL</u>	<u>McLean</u>
8 <u>[Signature]</u>	<u>10064 E 550 N Rd</u>	<u>Shirley IL</u>	<u>McLean</u>
9 <u>Shirley M. Funk</u>	<u>5257 Old Rd 66</u>	<u>Shirley IL</u>	<u>McLean</u>
10 <u>Patricia K. Telfer</u>	<u>6381 E. 535 N. Rd</u>	<u>McLean IL</u>	<u>McLean</u>

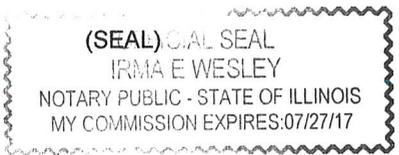
State of ILLINOIS )  
County of MCLEAN ) SS.

I, MIKE FUNK (Circulator's Name) do hereby certify that I reside at 7139 E 450 N Rd in the City/Village/Unincorporated Area (circle one) of MCLEAN (if unincorporated, list municipality that provides postal service) Zip Code 61754, County of MCLEAN, 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 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 registered voters of the political division in which the candidate is seeking elective office, and that their respective residences are correctly stated, as above set forth.

Stephen M Funk  
(Circulator's Signature)

Signed and sworn to (or affirmed) by STEPHEN M Funk before me, on 12-09-2016  
(Name of Circulator) (insert month, day, year)

James E. Wesley  
(Notary Public's Signature)



**NONPARTISAN PETITION  
(NON-MUNICIPAL AND COMMISSION FORM OF MUNICIPALITY)**

We, the undersigned, qualified voters in the MT HOPE/FUNKSGROVE WATER DISTRICT in the County of McLEAN and State of Illinois, do hereby petition that the following named person shall be a Nonpartisan Candidate for election to the office hereinafter specified, in the aforesaid unit of government, to be voted for at the election to be held on APRIL 4, 2017 (date of election).

NAME	OFFICE	ADDRESS--ZIP CODE
MIKE FUNK	office title: full term or <u>4</u> year vacancy (circle one)	7139 E 450 NORTH ROAD MCLEAN, IL 61754

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 \_\_\_\_\_  
(List all names during last 3 years) (List date of each name change)

NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>Justin M Bernay</u>	<u>105 E. Spencer</u>	<u>McLean</u>	<u>IL McLean</u>
<u>Jan Wink</u>	<u>511 County Rd</u>	<u>McLean</u>	<u>IL McLean</u>
3			IL
4			IL
5			IL
6			IL
7			IL
8			IL
9			IL
10			IL

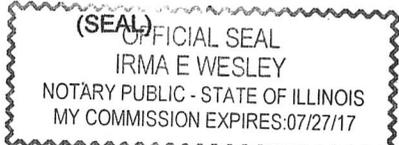
State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) SS.

I, KATIE FUNK (Circulator's Name) do hereby certify that I reside at 104 E SPENCER in the City/Village/Unincorporated Area (circle one) of MCLEAN (if unincorporated, list municipality that provides postal service) Zip Code 61754, County of MCLEAN, 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 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 registered voters of the political division in which the candidate is seeking elective office, and that their respective residences are correctly stated, as above set forth.

Kathryn Funk  
(Circulator's Signature)

Signed and sworn to (or affirmed) by Kathryn Funk before me, on 12-09-2016  
(Name of Circulator) (insert month, day, year)

Irma E. Wesley  
(Notary Public's Signature)



SHEET NO. \_\_\_\_\_

This will be returned to you when  
your statement is filed in the  
County Clerk's Office

**Return to County Clerk's Office  
with Statement**

Receipt is hereby acknowledged  
of your Statement of Economic  
Interest, filed pursuant to the  
Illinois Governmental Ethics Act.  
The Statement was filed as of this  
date.

FUNKS GROVE TOWNSHIP CLERK  
(Office(s) or Position(s) of Employment for which this Statement is Filed)

STEPHEN M FUNK  
Name

7139 E 450 NORTH ROAD  
Address

MCLEAN IL 61754  
City State Zip

**FILED**  
MCLEAN COUNTY, ILLINOIS

DEC 16 2016

*Kathy Michael*  
COUNTY CLERK

**All three pages** must be returned to the McLean County Clerk for filing either in person or by mail.  
We will return this receipt to you.

**Location:** 115 E Washington Street, Room 102  
Bloomington, IL 61701

**Mailing Address:** Kathy Michael, McLean County Clerk  
PO Box 2400  
Bloomington, IL 61702-2400