

STATEMENT OF CANDIDACY
(NOMINATION BY CAUCUS)

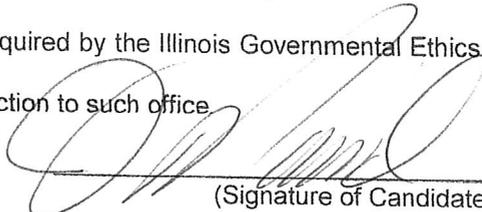
NAME	ADDRESS-ZIP CODE	OFFICE	CITY, VILLAGE OR TOWNSHIP	PARTY
JEFF MARTINDALE	507 W NORTH 61754	TAX ASSESSOR	MT HOPE- FUNKS GROVE	REPUBLICAN

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.

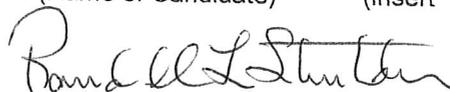
I, JEFF MARTINDALE (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 507 W NORTH ST., in the City, Village, Unincorporated Area (circle one) of McLEAN (if unincorporated, list municipality that provides postal service) Zip Code 61754, in the County of McLEAN, State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the REPUBLICAN Party; that I am a candidate for election to the office of TAX ASSESSOR in the MT HOPE / FUNKS GROVE MTAD (city, village or township), as duly nominated at said party's caucus, to be voted upon at the election to be held on 4-4-17 (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 ballot for election to such office.


(Signature of Candidate)

Signed and sworn to (or affirmed) by JEFF MARTINDALE before me, on 12-6-16 (insert month, day, year)

(SEAL)




(Notary Public's Signature)

CERTIFICATE OF NOMINATION BY CAUCUS

To STEPHEN M FUNK
(Local Election Official)

We, the undersigned, do hereby certify that on 12-7-2016 at a caucus of the REPUBLICAN PARTY in the MT HOPE (insert month, day, year)

MTAD of FUNKS GROVE in MCLEAN County, Illinois, the following nominations were made (City, Village, Township)

for the respective offices herein designated, to be voted for at the CONSOLIDATED Election to be held on 4-4-2017. (insert month, day, year)

NAME OF CANDIDATE (As it is to appear on ballot)	OFFICE	RESIDENCE ADDRESS (Street and number)
<u>JEFF MARTINDALE</u>	<u>TAX ASSESSOR</u>	<u>507 W NORTH</u>

Place an asterisk (*) after the name of each candidate who has changed names within three years and is required to report such changes pursuant to 10 ILCS 5/7-10.2 or 10-5.1, and attach a completed Form H-2A Name Change Supplement providing details as to said name change(s). Such candidate's former name(s) and the date(s) of the change(s) shall appear on the ballot along with the candidate's current name.

We also certify that at the last candidate election in this political subdivision aforesaid, the REPUBLICAN PARTY polled more than 5% of the entire vote cast.

STEPHEN M FUNK
(Secretary)
7139 E 450 NORTH, MCLEAN, IL 61754
(Address)

Danny Egan
(Presiding Officer)
6120 W 300E Stanford, IL 61774
(Address)

STATE OF ILLINOIS)
County of MCLEAN) SS

The persons whose names are subscribed to the above certificate personally appeared before me on _____ (insert month, day, year) and upon their oaths stated that the same is true and correct to the best of their knowledge.

Stephen M Funk
(Signature of Person Authorized to Administer Oaths in Illinois)
CLERK
(Title)

Filed _____ in the office of _____ (insert month, day, year)

This certificate of nomination shall be accompanied by a Statement of Candidacy and a receipt for filing Economic Interests Statement for each candidate nominated.

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.

M. H. Hope/Kuntz Grove Multi-Tax Assessor
(Office(s) or Position(s) of Employment for which this Statement is Filed)

Jeffrey S. Martindale
Name
507 W North St
Address
McLean IL 61754
City State Zip

Clerk's Date Stamp Here
FILED
McLEAN COUNTY, ILLINOIS
DEC 08 2016
Kathy Michael
COUNTY CLERK

All 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 East Washington Street, Room 102
Bloomington, IL 61701

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