

**DECLARATION OF
INTENT TO BE A WRITE-IN CANDIDATE**

To: DeKalb County Clerk, in the County of DeKalb and State of Illinois.

I, _____, state that I am a qualified primary elector of the _____
(for use in primary only)

Party (for use in primary only) and a resident of precinct # _____

residing at _____ in such City, Village or Town

of _____ and State of Illinois, that It's my intention to be a

_____ Party write-in candidate for the office of _____,
(for use in primary only)

full term or vacancy at the _____ election to be held on ____/____/_____.
(Type of Election) (date of election).

Under penalties as provided by law pursuant to 10 ILCS 5/29-10 the undersigned certifies that the statements set forth in this request are true and correct.

Phone #: (____) _____ - _____ Email Address: _____
@ _____

(Signature of Candidate)

Signed and sworn to (or affirmed) by _____ before me, on
(Name of Candidate)

(insert month, day, year)

(Notary Public's Signature)

(SEAL)

**An original Declaration of Intent must be filed with each election authority [county clerk(s) or board(s) of election commissioners in the territory] not later than 61 days before the election.
10ILCS 5/7-59B.1, 19-9.1**