

**CITY OF DECATUR, ILLINOIS
CITY CLERK'S OFFICE
ONE GARY K. ANDERSON PLAZA
Phone 424-2708**

ELECTION FACTS

I. One Mayor and Three City Council Positions to be filled:

Mayor:

One four-year term beginning May 1, 2011 and expiring April 30, 2015.

Council Members:

Three (3) four-year terms beginning May 1, 2011 and expiring April 30, 2015.

II. Consolidated Primary Election, if required, will be held February 22, 2011.

Consolidated Primary Election is required if:

More than four (4) persons file for Mayor,

More than twelve (12) persons file for Council seats (4-year term).

III. Consolidated Election will be held April 5, 2011.

A. Qualifications for candidacy:

U.S. Citizen, Registered Voter, Age 18 years or older and residing in City of Decatur limits for one year preceding the election.

B. Nominating Petition:

- 1) Petitions may be circulated on or after August 24, 2010;
- 2) File at City Clerk's Office, Third Floor, One Gary K. Anderson Plaza;
- 3) Signatures required: 128 registered voters;
- 4) First day for filing: November 15, 2010;
- 5) Last day for filing: November 22, 2010;
- 6) Office hours of City Clerk: 8:00 AM to 5:00 PM, Monday through Friday;
- 7) **Statement of Economic Interests must be filed with the MACON COUNTY CLERK, 141 South Main Street;**
- 8) **Submit a receipt of filing Statement of Economic Interests to CITY CLERK at time nominating petition is filed; and,**
- 9) Candidate's names will be placed on the ballot in the order of time of filing.

All persons filing at 8:00 A.M. on Monday, November 15, will be considered as filing simultaneously and order of ballot position will be determined by a lottery to be held no later than November 24, 2010. Candidates will receive notification of the lottery date.

- IV. Election will be conducted by the Macon County Clerk. Ballots will be counted at the Macon County Clerk's Office, Macon County Office Building, 141 South Main Street.

Statement of Economic Interests to be Filed with the County Clerk
Your Name Was Submitted For Filing by an Entity That You Represent
 (Type or Print)

Name: _____

Each Office or Position of Employment for which this Statement is Filed: _____

Full Post Office Address: _____

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If more space is needed, please attach supplemental listing.**

- List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of \$5,000 fair market value, or from which dividends in excess of \$1,200 were received during the preceding calendar year: (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

| Business Entity | Instrument of Ownership | Position of Management |
|-----------------|-------------------------|------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

- List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor, or served in any advisory capacity, from which income in excess of \$1,200 was derived during the preceding calendar year:

| Name | Address | Type of Practice |
|-------|---------|------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

- List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding \$5,000 was received for professional services rendered during the preceding calendar year by the person making the statement:

COMPLETE BUT DO NOT DETACH

This section will be returned to you when the Statement is filed with the County Clerk.

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

Office or Position of Employment for which this statement is filed _____

(Type or Print)

Name _____

Address _____

City/State/ZIP Code _____

4. List the identity (including address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 or more was realized during the preceding calendar year:

5. List the name of any entity and the nature of the governmental action requested by any entity that has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year, if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing, or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year:

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file, from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity: (No time or demand deposit in a financial institution nor any debt instrument need be listed.)

7. List the name of any unit of government that employed the person making the statement during the preceding calendar year, other than the unit or units of government in relation to which the person is required to file:

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year:

VERIFICATION

I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$1,000, or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment.

Signature of Person Making Statement

Date

**DO NOT DETACH
(WILL BE RETURNED AS YOUR RECEIPT)**

**CITY OF DECATUR, ILLINOIS
ONE GARY K. ANDERSON PLAZA
DECATUR, IL 62523**

MAYOR:

- 1) Part time position under Council / Manager form of government.
- 2) Official head of the City.
- 3) Presiding officer of all City Council meetings and various ceremonial occasions in the community.
- 4) Signs all official documents relating to local government.
- 5) Appoints city manager to act as administrative head of the various City departments and the employees, with the advice and consent of City Council members.
- 6) Makes the appointment of City Clerk and City Treasurer with the advice and consent of City Council members.
- 7) Makes the appointment of members to various advisory committees and commissions with the advice and consent of City Council members.
- 8) May act as Liquor Control Commissioner for the City.
- 9) Participates in all activities listed for Council Members and is a voting member of the City Council.
 - a) Defines the powers and duties of appointed officers and employees;
 - b) Adopts a budget to guide expenditures and revenue; and,
 - c) Appropriates funds to operate city government.

Annual Salary: \$8,000

Term: 4 years

Qualifications:

- a) Resident of the City for one year prior to election and of voting age.
- b) Must not be in arrears or in debt to local government.
- c) Never convicted in a court of law of malfeasance of office, bribery or other corrupt crime.

STATEMENT OF CANDIDACY
NONPARTISAN

| NAME | ADDRESS-ZIP CODE | OFFICE | CITY, VILLAGE OR SPECIAL DISTRICT |
|----------|------------------|--------|-----------------------------------|
| John Doe | 119 Main Street | Mayor | Decatur |

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)

STATE OF ILLINOIS)
County of Macon) SS.

I, John Doe being first duly sworn (or affirmed), say that I reside at 119 Main Street in the City, Village, Unincorporated Area (circle one) of Decatur (If unincorporated, list municipality that provides postal service) Zip Code 6252 in the County of Macon, State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/Election to the office of Mayor in the City of Decatur Name of City, Village or Special District

to be voted upon at the election to be held on February 22, 2011 (date of election) and that I am legally qualified 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 Nomination/Election to such office.

(Signature of Candidate)

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

(SEAL)

(Notary Public's Signature)

STATEMENT OF CANDIDACY
NONPARTISAN

| NAME | ADDRESS-ZIP CODE | OFFICE | CITY, VILLAGE OR SPECIAL DISTRICT |
|------|------------------|--------|-----------------------------------|
| | | | |

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)

STATE OF ILLINOIS)
) SS.
County of _____)

I, _____ being first duly sworn (or affirmed), say that I reside at _____, in the City, Village, Unincorporated Area (circle one) of _____ (if unincorporated, list municipality that provides postal service) Zip Code _____, in the County of _____, State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/Election to the office of _____ in the _____ Name of City, Village or Special District

to be voted upon at the election to be held on _____ (date of election) and that I am legally qualified 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 Nomination/Election to such office.

(Signature of Candidate)

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

(SEAL)

(Notary Public's Signature)

CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Decatur in the County of Macon and State of Illinois, and residing at the places set opposite our respective names, do hereby petition that the name of John Doe, who resides at 119 Main Street in the City, Town or Village of Decatur, Zip Code 6252, County of Macon, State of Illinois, be placed upon the ballot as a candidate for nomination for the office of Mayor full term or vacancy (circle one) at the Consolidated Primary election to be held on February 22, 2011 (date of primary election); provided that no primary election is required, the candidate's name will appear on the ballot at the Consolidated Election for election to said office and term.

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)

Table with 4 columns: NAME (VOTER'S SIGNATURE), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Rows 1-15. Includes a large handwritten signature 'SPM' across the table.

State of Illinois)
County of Macon) SS.

I, (Circulator's Name) do hereby certify that I reside at (Street Address) in the City of Decatur (City/Village/Unincorporated Area) of Decatur (If unincorporated, list municipality that provides postal service) (Zip Code) 6252 County of Macon, State of Illinois that I am 18 years of age or older, 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.

(Circulator's Signature)

Signed and sworn to (or affirmed) by before me, on (Name of Circulator) (insert month, day, year)

(Notary Public's Signature)

CONSOLIDATED PRIMARY PETITION (NONPARTISAN – MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the _____ of _____ in the County of _____ and State of Illinois, and residing at the places set opposite our respective names, do hereby petition that the name of _____, who resides at _____ in the City, Town or Village of _____ Zip Code _____ County of _____ State of Illinois, be placed upon the ballot as a candidate for nomination for the office of _____ full term or vacancy (circle one) at the Consolidated Primary election to be held on _____ (date of primary election); provided that no primary election is required, the candidate's name will appear on the ballot at the Consolidated Election for election to said office and term.

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 | | DECATUR | MACON IL |
| 2 | | DECATUR | MACON IL |
| 3 | | DECATUR | MACON IL |
| 4 | | DECATUR | MACON IL |
| 5 | | DECATUR | MACON IL |
| 6 | | DECATUR | MACON IL |
| 7 | | DECATUR | MACON IL |
| 8 | | DECATUR | MACON IL |
| 9 | | DECATUR | MACON IL |
| 10 | | DECATUR | MACON IL |
| 11 | | DECATUR | MACON IL |
| 12 | | DECATUR | MACON IL |
| 13 | | DECATUR | MACON IL |
| 14 | | DECATUR | MACON IL |
| 15 | | DECATUR | MACON IL |

State of _____)
County of _____) SS.

I, _____ do hereby certify that I reside at _____
(Circulator's Name) (Street Address)

in the _____ of _____
(City/Village/Unincorporated Area) (if unincorporated, list municipality that provides postal service) (Zip Code)
County of _____, State of _____ that I am 18 years of age or older, 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.

(Circulator's Signature)

Signed and sworn to (or affirmed) by _____ before me, on _____
(Name of Circulator) (insert month, day, year)

(Notary Public's Signature)

(SEAL)

SHEET NO. _____

Guide to Temporary and Political Sign Regulations

August 2006

City of Decatur, Illinois

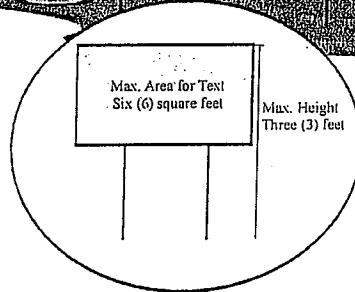
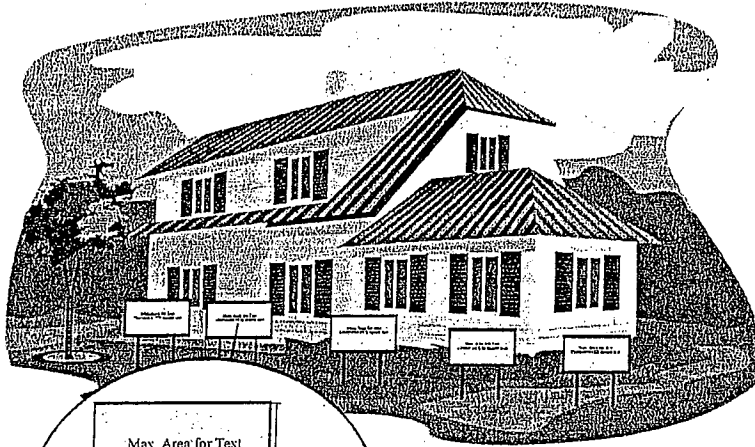
Temporary & Political Sign Regulations

City of Decatur

Residential Property

Freestanding Signs (up to 90 days)

1. **Number per Lot:** Five (5)
2. **Maximum Area per Sign:** Six (6) square feet
3. **Maximum Height:** Three (3) feet
4. **Time Limit:** Display is limited to ninety (90) days
5. **Construction Material:** Sign must be constructed of non-rigid or semi-rigid materials and are designed so as to not be permanently mounted to the ground or to a structure.



Extended Freestanding Signs

(90 days or more)

1. **Number per Lot:** One (1)
2. **Maximum Area per Sign:** Six (6) square feet
3. **Maximum Height:** Three (3) feet
4. **Time Limit:** Display is limited to twelve (12) months
5. **Construction Material:** Sign must be constructed of a rigid steel frame to be placed in the ground and to resist rot, decay or deterioration by the elements.

Wall Signs or Banners

1. **Number per Lot:** Three (3); including any permanent wall signs
2. **Placement Location:** Signs or banners may only be placed on the main building
3. **Maximum Area per Sign:** No more than fifteen (15) percent of the wall on which it is located
4. **Time Limit:** Display is limited to ninety (90) days
5. **Construction Material:** Sign must be constructed of non-rigid or semi-rigid materials and are designed so as to not be permanently mounted to the ground or to a structure.

Who do I call if I have a question about signs in general?

Please contact the City of Decatur, Department of Economic and Urban Development, at (217) 424-2793 if you have additional questions.

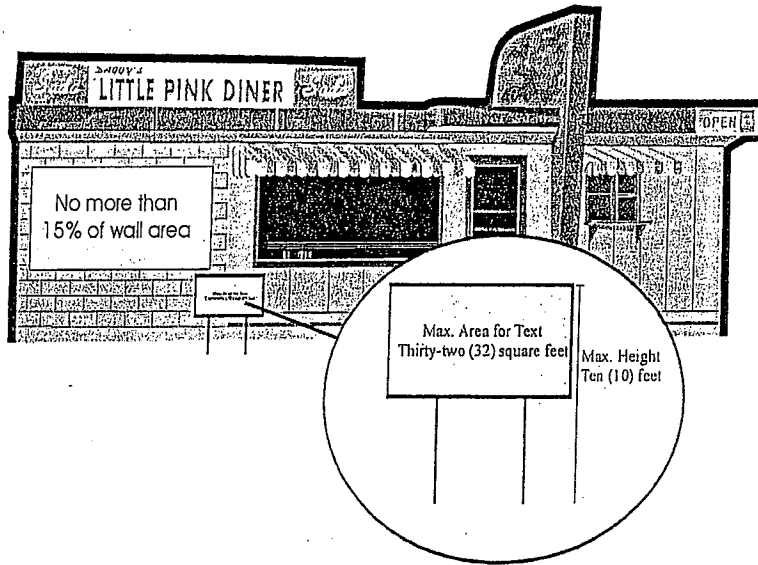
Temporary & Political Sign Regulations

City of Decatur

Commercial Property

Freestanding Signs (up to 90 days)

1. **Number per Lot:** One (1)
2. **Maximum Area per Sign:** Thirty-two (32) square feet
3. **Maximum Height:** Ten (10) feet
4. **Time Limit:** Display is limited to ninety (90) days
5. **Construction Material:** Sign must be constructed of non-rigid or semi-rigid materials and are designed so as to not be permanently mounted to the ground or to a structure.



Extended Freestanding Signs (90 days or more)

1. **Number per Lot:** One (1)
2. **Maximum Area per Sign:** Six (6) square feet
3. **Maximum Height:** Three (3) feet
4. **Time Limit:** Display is limited to twelve (12) months
5. **Construction Material:** Sign must be constructed of a rigid steel frame to be placed in the ground and to resist rot, decay or deterioration by the elements.

Wall Signs or Banners

1. **Number per Lot:** Three (3); including any permanent wall signs
2. **Placement Location:** Signs or banners may only be placed on the main building
3. **Maximum Area per Sign:** No more than fifteen (15) percent of the wall on which it is located
4. **Time Limit:** Display is limited to ninety (90) days
5. **Construction Material:** Sign must be constructed of non-rigid or semi-rigid materials and are designed so as to not be permanently mounted to the ground or to a structure.

Who do I call if I have a question about signs in general?

Please contact the City of Decatur, Department of Economic and Urban Development, at (217) 424-2793 if you have additional questions.