10 ILCS 5/7-13.1, 7-60

EXAMPLE
(City/Village/Township)

Suggested
Revised July 2020
CC #G-1

CERTIFICATION OF BALLOT

(Party Candidates)

To: Robin M. O'Connor, Lake County Clerk, Election Authority

From: ***(name of person responsible for submitting this form)*** Local Election Official in and for

(name of City, Village or Township) in the County of ***(office located in)*** and State of Illinois.
(Political Division)

I, the undersigned Local Election Official in and for the political division aforesaid, do hereby state that this Certification of Ballot, consisting of ***(total #)*** page(s), is a true and correct listing of all offices and candidates, in the order they are to appear on the ballot, to be voted on at the ***(Consolidated)*** Election to be held on ***(April 6, 2021)***.
(insert month, day, year)

Dated: ***(date form is completed)***, 20_____.

(signature of person responsible for submitting this form)
(Local Election Official)

(SEAL)

(official mailing address for City, Village or Township)
(Address to which Election Authority shall send canvass results)

Office ***(name of office as it would appear on ballot)*** District or Ward ***(if City – "Ward #")***

Term of Office ***(Full-Term)*** Number to be voted for ***(# of full-term seats for the office)***

PARTY: ***(name of established or new political party)***

*****NOTE: established party and new political party <u>must</u> be certified on separate forms*****

	Candidate's Name	Residence City/Zip
1.	***(exactly as noted on page 1 of candidate's petition)***	***(exactly as noted on page 1 of candidate's petition)***
2.		
3.		
4.		

PARTY: ***(name of opposing established or new political party)***

	Candidate's Name	Residence City/Zip
1.	***(exactly as noted on page 1 of candidate's petition)***	***(exactly as noted on page 1 of candidate's petition)***
2.		
3.		
4.		

Office ***(name of office as it would appear on ballot)*** District or Ward ***(if City – "Ward #")***

Term of Office ***(#-Yr Unexpired-Term)*** Number to be voted for ***(# of Unexpired-Term seats for office)***

*****NOTE: If you have unexpired terms of differing years (ex. 2-Yr and 4-Yr), they <u>must</u> be listed in separate sections*****

PARTY: ***(name of established or new political party)***

	Candidate's Name	Residence City/Zip
1.	***(exactly as noted on page 1 of candidate's petition)***	***(exactly as noted on page 1 of candidate's petition)***
2.		
3.		
4.		

PARTY: ***(name of opposing established or new political party)***

	Candidate's Name	Residence City/Zip
1.	***(exactly as noted on page 1 of candidate's petition)***	***(exactly as noted on page 1 of candidate's petition)***
2.		
3.		
4.		