

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

COMPLETE BUT DO NOT ATTACH

Receipt is hereby acknowledged of your
Statement of Economic Interests, filed
in accordance with the Illinois Government Ethics
Act. The Statement was filed on this date:

FILED

NOV 03 2025

DeKalb County Clerk

Office of Position of Employment for which this statement is filed:

COUNTY BOARD MEMBER

Name: **JOANNE PICKERING**

1155 GRACE DR. APT D SYCAMORE, IL 60178

Full Mailing Address: _____

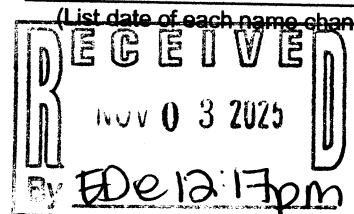
STATEMENT OF CANDIDACY

NAME: JOANNE PICKERING	OFFICE: DEKALB COUNTY BOARD MEMBER
ADDRESS - ZIP CODE: 1155 GRACE DR. APT D SYCAMORE, IL 60178	A Full Term is sought, unless an unexpired term is stated here: _____ year unexpired term
	DISTRICT: 3
	PARTY: DEMOCRATIC

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)

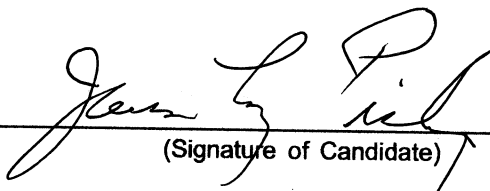
STATE OF ILLINOIS)
County of DeKalb) SS.



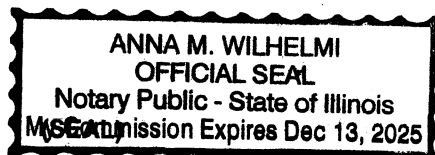
I, **JOANNE PICKERING** (Name of Candidate) being first duly sworn (or affirmed), say that I reside at **1155 GRACE DR. APT D** in the City, Village, Unincorporated Area of **SYCAMORE**

(if unincorporated, list municipality that provides postal service) Zip Code **60178** in the County of **DeKalb**

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 **DEKALB COUNTY BOARD** in the **3** District, to be voted upon at the primary election to be held on **March 17, 2026** (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 **DEMOCRATIC** (Name of Party) Primary ballot for Nomination/Election for such office.


(Signature of Candidate)

Signed and sworn to (or affirmed) by Joanne Pickering before me, on 10-31-25
(Name of Candidate) (insert month, day, year)




(Notary Public's Signature)

____ATTACH TO PETITION____

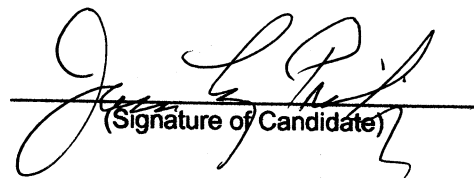
10 ILCS 5/7-10.1

SBE No. P-1C

LOYALTY OATH
(OPTIONAL)

United States of America)
)
State of Illinois) SS.

I, JOANNE PICKERING, do swear (or affirm) that I am a citizen of the United States and the State of Illinois, that I am not affiliated directly or indirectly with any communist organization or any communist front organization, or any foreign political agency, party, organization or government which advocates the overthrow of constitutional government by force or other means not permitted under the Constitution of the United States or the Constitution of this State; that I do not directly or indirectly teach or advocate the overthrow of the government of the United States or of this State or any unlawful change in the form of the governments thereof by force or any unlawful means.

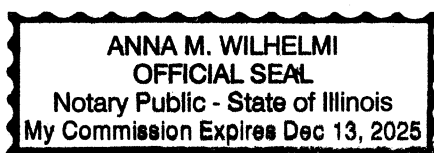

(Signature of Candidate)

Signed and sworn to (or affirmed) by JOANNE PICKERING before me,
(Name of Candidate)

on 10-31-25
(Date)


(Notary Public's Signature)

(SEAL)





STATE BOARD OF ELECTIONS STATE OF ILLINOIS

ARTICLE 29B FAIR CAMPAIGN PRACTICES ACT

10 ILCS 5/29B-5. Purpose. The Legislature hereby declares that the purpose of this Article is to encourage every candidate for public office in this State to subscribe to the Code of Fair Campaign Practices. It is the intent of the Legislature that every candidate for public office in this State who subscribes to the Code of Fair Campaign Practices will follow the basic principles of decency, honesty and fair play in order to encourage healthy competition and open discussion of issues and candidate qualifications and discourage practices that cloud issues or unfairly attack opponent. (Source: P.A. 86-873.)

10 ILCS 5/29B-10. Code of Fair Campaign Practices. At the time a political committee, as defined in Article 9, files its statement of organization, the State Board of Elections, in the case of a state political committee or a political committee acting as both a state political committee and a local political committee, or the county clerk, in the case of a local political committee, shall give the political committee a blank form of the Code of Fair Campaign Practices and a copy of the provisions of this Article. The State Board of Elections or county clerk shall inform each political committee that subscription to the Code is voluntary. The text of the code shall read:

CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate for public office in the State of Illinois has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional right to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- (1) I will conduct my campaign openly and publicly, and limit attacks on my opponent to legitimate challenges to his record.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or his personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, sexual orientation, religion or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opposition.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our American system of free elections or that hampers or prevents the full and free expression of the will of the voters.
- (6) I will defend and uphold the right of every qualified American voter to full and equal participation in the electoral process.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this Code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Illinois or chairman of a political committee in support of or opposition to a question of public policy, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

Date

DEKALB COUNTY BOARD

Office Sought

March 17, 2026

Date of Election

Signature

JOANNE PICKERING

(Print Name)

Democratic

Name of Political Committee

SHEET NO. 1

COUNTY BOARD MEMBER
(counties that elect members from districts)
PRIMARY PETITION

We, the undersigned, members of and affiliated with the DEMOCRATIC Party and qualified primary electors of the DEMOCRATIC Party, in County Board District 3, County of DeKalb in the State of Illinois, do hereby petition that JOANNE PICKERING who resides at 1155 GRACE DR. APT D in the City, Village, Unincorporated Area of SYCAMORE (if unincorporated, list municipality that provides postal service) Zip Code 60178 County of DeKalb and State of Illinois, shall be a candidate of the DEMOCRATIC Party for the nomination for the office of **COUNTY BOARD MEMBER**, County Board District 3 in the County of DeKalb in the State of Illinois, to be voted for at the primary election to be held on March 17, 2026 (date of election).

A Full Term is sought, unless an unexpired term is stated here: _____ year unexpired term

If required pursuant to 10 ILCS 5/7-10.2, 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)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1. American Nash	American Nash	1964 Buckingham th Sycamore ^{IL}	Sycamore ^{IL}	DEKALB
2. Elsie Blackenship	Elsie Blackenship	120 Penny Ln	Sycamore ^{IL}	DEKALB
3. Amy Potter	Amy Potter	113 Penny Ln	Sycamore ^{IL}	DEKALB
4. Kristin Janisch	Kristin Janisch	960 Wells Dr.	Sycamore ^{IL}	DEKALB
5. Ryan Janisch	Ryan Janisch	960 Wells Dr.	Sycamore ^{IL}	DEKALB
6. Megan Martin	Megan Martin	923 Wells	Sycamore ^{IL}	DEKALB
7. Tim Turner	Tim Turner	923 Wells	Sycamore ^{IL}	DEKALB
8. Martina Pain	Martina Pain	912 Wells Dr	Sycamore ^{IL}	DEKALB
9. Kathy Beck	Kathy Beck	922 N. Main St	Sycamore ^{IL}	DEKALB
10. Cynthia Webb	Cynthia Webb	295 Vida St	Sycamore ^{IL}	DEKALB

State of IL

SS.

County of DeKalb

I, Anna Wilhelm (Circulator's Name) do hereby certify that I reside at 3454 Gable Rd, in the City/Village/Unincorporated Area of Earlville (if unincorporated, list municipality that provides postal service) (Zip Code) 60555, County of DeKalb, State of IL 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 qualified voters of the DEMOCRATIC Party in the political division in which the candidates is seeking nomination/elective office, and that their respective residences are correctly stated, as above set forth.

(Circulator's Signature)

Signed and sworn to (or affirmed) by

(Name of Circulator)

before me, on

_____, (Insert month, day, year)

(Notary Public's Signature)



SHEET NO.



OFFICE OF DEKALB COUNTY ELECTIONS
110 E SYCAMORE ST
SYCAMORE, IL 60178
elections@dekalbcounty.org
dekalbcountyclerk.il.gov

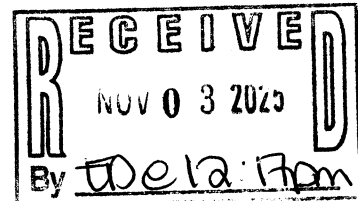
RECEIPT FOR FILING

NAME: Joanne Pickering
ADDRESS: 1155 Grace Dr. Apt D, Sycamore, IL 60178
PHONE NUMBER: 847-305-9033 EMAIL: joannepickering@comcast.net
OFFICE: County Board Member
DISTRICT: 3 PARTY: D TERM (Full/Unexpired): Full

DOCUMENTS RECEIVED FROM CANDIDATE:

- ☒ STATEMENT OF CANDIDACY
☒ PETITION(S)
☒ LOYALTY OATH (OPTIONAL)
☒ CODE OF FAIR CAMPAIGN PRACTICES (OPTIONAL)
☒ ECONOMIC INTEREST STATEMENT RECEIPT***
☐ ADDITIONAL DOCUMENTATION

DATE & TIME RECEIVED:



FORM OF BINDING:

☐ BINDER/PAPER CLIP ☐ STAPLE ☒ PRONG ☐ OTHER ☐ NO BINDING

DOCUMENTS GIVEN TO CANDIDATES: Please have the candidate (or representative) initial below.

AMW ILLINOIS CAMPAIGN DISCLOSURE ACT, NOTICE OF OBLIGATION (Form D5)

AMW CODE OF FAIR CAMPAIGN PRACTICES (Optional)

AMW I understand my candidate filing paperwork cannot be returned to me or altered after it is turned in.

Tasha Sims (EO)

Signature of Election Authority/Clerk

[Signature]
Signature of Candidate or Candidate's Representative