

Thank you for being a Circulator, and helping Stacy get on the ballot!

20,000+ signatures must be turned in by

MAY 20th!

Please do your best to make every signature count!

Circulator Requirements:

~ U.S. Citizen ~

~ Verifiable Home Address ~

~ Age 18+ ~

Does NOT need to be a registered voter.

Signature Requirements:

~ Registered Voter ~

~ Must sign home-county petition ~

Illinois' 11th Congressional District includes parts of Boone, Cook, Dekalb, DuPage, Kane, Lake, McHenry, and Will counties. This PDF contains the eight counties in alpha order starting on page 3.

Do a little or a lot. We appreciate and honor your support!

Even a few hours a week, and a few sheets makes a difference!

Print out some sheets, and take them to your office, club, community event, church, school function, social gathering, local festival and farmers' market, etc. Print just the ones you need for the area(s) you're working in. Each sheet has lines for 10 signatures, but you can turn in sheets with less. You can set up a table in a public area, have them available in your non-profit business or privately-owned retail location, canvas a residential area, host Stacy at your event or group meeting, or come up with your own idea.

Petition sheets can also be picked up and dropped off at either location:

The Hempstock Healing Center

728 E Calhoun St. Woodstock, IL 60098

Hempstock Pharms

14023 W South Street Rd, Woodstock, IL 60098

***Contact Stacy at 630-301-2010, and we'll give you everything you need,
and help you complete and notarize your sheets.***

INDEPENDENT CANDIDATE PETITION

We, the undersigned, qualified voters in the 11th District of ILLINOIS in the County of Boone and State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for election to the office hereinafter specified to be voted for at the GENERAL Election to be held on NOVEMBER 3, 2026 (date of election).

NAME: STACY McCASKILL OFFICE: U.S. HOUSE OF REPRESENTATIVES-ILLINOIS DISTRICT 11 ADDRESS - ZIP CODE: 14023 W SOUTH STREET RD, WOODSTOCK, IL 60098 A Full Term is sought, unless an unexpired term is stated here: year unexpired 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 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Rows 1-10.

State of) County of) SS.

I, (Circulator's Name) do hereby certify that I reside at in the City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip Code) County of State of 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 of 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 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)

(SEAL)

(Notary Public's Signature)

INDEPENDENT CANDIDATE PETITION

We, the undersigned, qualified voters in the 11th District of ILLINOIS in the County of COOK and State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for election to the office hereinafter specified to be voted for at the GENERAL Election to be held on NOVEMBER 3, 2026 (date of election).

NAME: Stacy McCaskill
ADDRESS - ZIP CODE: 14023 W SOUTH STREET RD, WOODSTOCK, IL 60098
OFFICE: U.S. HOUSE OF REPRESENTATIVES-ILLINOIS DISTR
A Full Term is sought, unless an unexpired term is stated here: year unexpired 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 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Rows 1-10.

State of)
County of) SS.

I, (Circulator's Name) do hereby certify that I reside at in the City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip Code) County of State of 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 of 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 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)

(SEAL)

(Notary Public's Signature)

INDEPENDENT CANDIDATE PETITION

We, the undersigned, qualified voters in the 11th District of ILLINOIS in the County of DEKALB and State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for election to the office hereinafter specified to be voted for at the GENERAL Election to be held on NOVEMBER 3, 2026 (date of election).

NAME: Stacy McCaskill	OFFICE: U.S. HOUSE OF REPRESENTATIVES-ILLINOIS DISTR
ADDRESS – ZIP CODE: 14023 W SOUTH STREET RD, WOODSTOCK, IL 60098	A Full Term is sought, unless an unexpired term is stated here: _____ year unexpired 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)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip Code) _____, County of _____, State of _____ 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 of 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 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)

(SEAL)

(Notary Public's Signature)

INDEPENDENT CANDIDATE PETITION

We, the undersigned, qualified voters in the 11th District of ILLINOIS in the County of DUPAGE and State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for election to the office hereinafter specified to be voted for at the GENERAL Election to be held on NOVEMBER 3, 2026 (date of election).

NAME: Stacy McCaskill	OFFICE: U.S. HOUSE OF REPRESENTATIVES-ILLINOIS DISTRICT 11
ADDRESS – ZIP CODE: 14023 W SOUTH STREET RD, WOODSTOCK, IL 60098	A Full Term is sought, unless an unexpired term is stated here: _____ year unexpired 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)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip Code) _____, County of _____, State of _____ 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 of 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 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)

(SEAL)

(Notary Public's Signature)

INDEPENDENT CANDIDATE PETITION

We, the undersigned, qualified voters in the 11th District of ILLINOIS in the County of KANE and State of Illinois, do hereby petition that the following named person shall be an Independent Candidate for election to the office hereinafter specified to be voted for at the GENERAL Election to be held on NOVEMBER 3, 2026 (date of election).

NAME: Stacy McCaskill	OFFICE: U.S. HOUSE OF REPRESENTATIVES-ILLINOIS DISTR
ADDRESS – ZIP CODE: 14023 W SOUTH STREET RD, WOODSTOCK, IL 60098	A Full Term is sought, unless an unexpired term is stated here: _____ year unexpired 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)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
1.			,IL	
2.			,IL	
3.			,IL	
4.			,IL	
5.			,IL	
6.			,IL	
7.			,IL	
8.			,IL	
9.			,IL	
10.			,IL	

State of _____)
County of _____) SS.

I, _____ (Circulator's Name) do hereby certify that I reside at _____, in the City/Village/Unincorporated Area of _____ (if unincorporated, list municipality that provides postal service) (Zip Code) _____, County of _____, State of _____ 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 of 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 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)

(SEAL)

(Notary Public's Signature)

