

Board Member Oath of Office

OATH OF OFFICE
STATE OF ILLINOIS)
) SS
COUNTY OF _____)

I do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Illinois, and that I will faithfully discharge the duties of the office of _____ and Library Trustee according to the best of my ability.

Signature of Person Making Oath

Signature of Persons Administering Oath Date: _____

PLEASE PROVIDE THE FOLLOWING INFORMATION:

Governmental Unit

Office and Term

Elected Official's Name

Address (House Number and Street or Road Name)

City and Zip

Home Phone

Work Phone (if applicable)

This information will be filed with the county clerk and the Illinois State Librarian pursuant to 75 ILCS 16/30-40 and 75 ILCS 5/4-6 and made available when inquiries are made by the public concerning local government officials.