

#25-3

STATE OF ILLINOIS

**MARSHALL**

County,

} SS.

### OFFICIAL OATH

I, PATRICIA G. WELSH

having been APPOINTED to the office of SUPERVISOR OF ASSESSMENT  
(elected or appointed)

in the \_\_\_\_\_ of \_\_\_\_\_

in the County of MARSHALL aforesaid, DO SOLEMNLY SWEAR

or affirm, 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 SUPERVISOR OF ASSESSMENT

to the best of my ability.

Patricia G. Welsh

Signed and sworn to before me \_\_\_\_\_

2/13, 20 25  
Jill M. Kenyon  
JILL M. KENYON  
MARSHALL COUNTY CLERK & RECORDER

STATE OF ILLINOIS

MARSHALL COUNTY } ss. #25-3

# CERTIFICATE OF APPOINTMENT

THIS CERTIFIES

PATRICIA G. WELSH

has been appointed

SUPERVISOR OF ASSESSMENT

by the

COUNTY BOARD of said county, effective FEBRUARY 13TH, 20 25

until 02/2029

and is hereby authorized to perform the duties of said office.

Dated FEBRUARY 13TH 20 25



*Patricia G. Welsh*  
(County Clerk)

(Appointee)