Suggested Revised July, 2007 SBE No. P-1

## STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
ARLENG H. SHOEMAKEN	1492 FOXCROPTA AURONA, IL 60506	PRECIDIT COMMITTEE, MAN	5-8	DEMOCRAT

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 KAPE ) SS.
I, ARLENG H. SHOGNAKER (Name of Candidate) being first duly sworn (or affirmed), say that I reside
at 1492 FOXCROFT DRIVE, in the City Village, Unincorporated Area (circle one) of
AURONA (if unincorporated, list municipality that provides postal service) Zip Code 60506, in the
County of KANE, 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
PRECINCT COMMFTREMAN in the 5-8 District, to be voted upon at the primary election to be held on
Tube 2, 2010 (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 <u>DEMOCRATIC</u> (Name of Party)
Primary ballot for Nomination/Election for such office.
(Signature of Candidate)
Signed and sworn to (or affirmed) by <u>Divine Dr. Shoemoker</u> before me, on <u>Tran 2, 260 9</u> . (Name of Candidate) before me, on <u>(Insert month, day, year)</u>
(SEAL) "OFFICIAL SEAL" (Notary Public's Signature)

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Suggested Revised July, 2007 SBE No. P-27

## PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and affiliated with the DEMOCRATIC Party and qualified primary electors of the Party, in AURO RATE (township name and precinct number) in the County of Kane, State of Illinois, do hereby petition that ARCED HAMPER who resides at in the City, Village, Unincorporated Area (circle one) of ADRAGE (if unincorporated, list municipality that provides postal service) Zip Code 60506, County of Kane and State of Illinois, shall be a candidate of the DEMOCRATIC Party for election to the office of PRECINCT COMMITTEEMAN, for AURO RATE (township name and precinct number), to be voted for at the primary election to be held on February 2, 2010.						
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 date of each name change)						
NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY			
1 h Jame R. Wieltra	1 1504 Foxcrost in	aurora	Kane County, IL			
Find, L. Chespan	1825 Marihalis	Dunna	Kane County, IL			
3 Henry Motchell	1835 Walden	Aurora.	Kane County, IL			
4 Jers Oslan M. Herry don	1455 Fox Croft Dr.	Aurora	Kane County, IL			
50 0 S & Par 67	1515 Brighton	Aurora	Kane County, IL			
6 Mario Quiroz	1857 Wolden Curk	Aurora,	Kane County, IL			
7 (Vaire Klasley,	1492 Forcroft Dr.	auros	Kane County, IL			
8 Volene H Shoemaker	1492 Facroft Res	aurosa	Kane County, IL			
& hotel Seel	1496 FORE 10PF Dr	George	Kane County, IL			
107/1/20 / 11	1496 Foxcatt Dr.	Avron	Kane County, IL			
State of Illinois  County of Kane  I, ANCIONE T-SHOEKAKON (Circulator's Name) do hereby certify that I reside at 1496 FOXCROFT DA						
in the City/Village/Unincorporated Area (circle one) of ACVA (if unincorporated, list municipality that provides postal service) Zip Code 6556, County of 7, State						
Chlore / Stepen Jules 1. Sheemile (Circulator's Signature)						
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on(insert in	<u>c a∫o</u> q month, day, year)			
"OFFICIAL SE John W. Craig Notary Public, State of My Commission Expires September	SHEET NO.	(Notary Public's Signature	9)			

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## PRECINCT COMMITTEEMAN PRIMARY PETITION

unincorporated list municipality that provides no	ition that ACLEDE H. Since the City, Village, Unincorporated Area (circustal service) Zip Code Committee on to the office of PRECINCT COMMITTEEN	ame and precinct number) in  Solution with the control of Ao No	ho resides at (if shall be a candidate			
If required pursuant to 10 ILCS 5/7-10.2, complete the following (this information will appear on the ballot)						
FORMERLY KNOWN ASUNTIL NAME CHANGED ON(List all names during last 3 years) (List date of each name change)						
(List all names di	uring last 3 years)	(List date of each	Thanie change,			
NAME (VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY			
1 Danly O. Ocemen	1815WALDEN CIRCLE	AURORA	Kane County, IL			
2 Jan All McCann	1865 Brantine	Awara	Kane County, IL			
3 (Knul) 6/2000	1857 Brighton ac	Aurora	Kane County, IL			
4 / /			Kane County, IL			
5		N 3	Kane County, IL			
6		N. S.	Kane County, IL			
7		00	Kane County, IL			
8		Y.	Kane County, IL			
9		CLE	Kane County, IL			
10		2000年	Kane County, IL			
State of Illinois  SS.  County of Kane  I, ARLEVE T. SHOEMAN (circulator's Name) do hereby certify that I reside at 1416 FORCROFT DR.  in the City/Village/Unincorporated Area (circle one) of AURONA (if unincorporated, list municipality that provides postal service) Zip Code 500, County of 400, State of 1000 States, and 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 1000 Party in the political division in which the candidate is seeking elective office, and that their respective residences are correctly stated, as above set forth.						
Orbal	Circula (Circula	ator's Signature)				
Signed and sworn to (or affirmed) by ARCENE T SHORLARON before me, on (insert month, day, year)						
(SEAL)	SHEET NO.	(Notary Public's Signature	3)			