## CITY OF AURORA PRECINCT COMMITTEEMAN RECEIPT FOR NOMINATING PETITION

CANDIDATE NAME: Jennifer T. Wevins
CANDIDATE ADDRESS: LOOL Vineyard
CITY: Aurora, IL 60502
DATE FILED: 130-15 OFFICE WARD PCT 9 (PCP)
TIME FILED: 1:14 pm PARTY: Republican
The following have been received:
1. Statement of Candidacy
2. Loyalty Oath 3. Petition pages 1 to
4. Receipt for Statement of Economic Interest
Received from:  CANDIDATE  AGENT
Signature  Jennife T. Wins  Print Name Candidate / Agent
Deputy Clerk

## STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY		
As shown on the ballot:  Jennifer T. Nevin	Address:  OOL VINLYOND City, Village, or Unincorporated Area:  Szip Code:  OOO	PRECINCT COMMITTEEMAN	Township/Ward: ACVORCA  Precinct:	R		
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 ASUNTIL NAME CHANGED ON  (List all names during last 3 years) (List date of each name change)						
STATE OF ILLINOIS County of Kane SS.						
I, Jente Veris (Name of Candidate) being first duly sworn (or affirmed), say that I reside at 100 (VINLIAND), in the City Village, Unincorporated Area (circle one) of (if unincorporated, list municipality that provides postal service) Zip Code in the						
County of Kane, State of Illinois; that I am a qualified voter therein and am a qualified Primary voter of the  Party; that I am a candidate for Election to the office of Precinct Committeeman in the  County of Kane, to be voted upon at the primary election to be held on February 2, 2010 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  (Name of Party) Primary ballot for Election for such office.						
Signed and sworn to (or affirmed) b	(Name of Candidate)	h 1 1500	ature of Candidate ore me, on <u>\lambda 00 (insert r</u>	·		
(SEAL) OFFICIAL DONNA L HAN Notary Public -S My Commission Exp	ARTIGAN	(Note	n Public's Signatu	re)		

## PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of and affilia Republican Party, in Au	rora Township Prec 9 (township	name and precinct number)	in the County of				
Kane,State of Illinois, do hereby petition that _lennifer Nevins who resides at							
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 į ((VOTER'S SIGNATURE)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY				
1 Word"	1001 Vinerader	annora IL	Kanl				
& Dry Dren	1070 SONOMA LN	Aurora ILIL	12ave				
3	1070 SONOMA LN	AURORA, ILIL	KANS				
4 Smith	1057 Sonome Cn	Aurop IL	Kane				
5 Gori Shoma	1030NapaLN	Avrora 1	KANE				
6 Jahr aprebardo	1000 NAPA LN	AURORA IL	LANK				
7/10	994 (Zneygon)	ALVONDA IL	Krine				
8 Thonala Wilsonenyniski	904Kineyard An	auna 11	Karl				
9 Relle	1001 Villeyard Ca	AUNIA IL	Kon				
10 / SU ON O 10071	1048 Vinegardh	1 est Gres IL	La he				
11 = 0		IL					
12 -		IL					
State of							
County of							
I, Jenni Fer Vevin S(Circulator's Name) do hereby certify that I reside at 1001 Vine yard							
in the City/Village/Unincorporated Area (circle one) of							
postal service) Zip Code County of County of State of 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 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.							
decising discurve office, and that their respective residences are correctly stated, as above set form.							
(Circulator's Signature)							
Signed and sworn to (or affirmed) by							
OFFICIAL SEAL							
Notary Public - State of Illinois (Notary Public's Signature)							
My Commission Expires May 1, 2019	SHEET NO						