COUNTY OF KANE

John A. Cunningham

KANE COUNTY CLERK 719 S. Batavia Ave., Bldg. B Geneva, IL 60134



Election Department Phone: (630) 232-5990

Fax: (630) 232-5870 www.kanecountyelections.org

Signature of Candidate or Agen

Receipt for Nominating Petition March 15, 2016 - 2016 General Primary.

| Receipt For: | Mark Davoust 36W885 Crane Rd St Charles, IL 60175 | |
|---------------------|--|--|
| Filed: Novemb | per 23, 2015 at 8:30:00 AM. | |
| Office: FOR P | RECINCT COMMITTEEMAN, St. Charles 8 Party: Republican | |
| The following | have been received: | |
| ✓ _ | Statement of Candidacy | |
| √ | Loyalty Oath | |
| √ | Petition Pages /- 3 | |
| | Receipt for Economic Interest Statement (EIS) | |
| Received fro | Mark Davoust | |
| | By: Deputy Clerk | |
| | ν | |
| | John A. Cunningham - Kane County Clerk | |
| | Name and Title of Local Clerk/Secretary | |
| Printed: 11/23/2015 | 5 9:45:55AM | |
| | Receipt for Notice of Obligation D-5 | |
| | nowledge receipt of the Notice of Obligation which outlines obligations and responsibilities | |

STATEMENT OF CANDIDACY

| NAME | ADDRESS-ZIP CODE | OFFICE | DISTRICT | PARTY |
|--------------|---|---|----------|------------|
| Mark Davoust | 36W885 Crane Rd St. Charles, IL 60175 | 57. ८५ARLES Precinct Committeeman | 8 | Republican |

| If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10 |)-5.1, complete the fo | ollowing (this information | | |
|--|-------------------------|----------------------------|----------------------------|---------------|
| FORMERLY KNOWN AS | UNTIL I | NAME CHANGED ON _ | PM 123 2 | 50 |
| (List all names during I | ast 3 years) | | (List date of each nam | e change) |
| | | | | 181 |
| STATE OF ILLINOIS) | | | P 495 | |
| County of Kane | SS. | | | |
| , | | | 10 0 0 T 1 11 | M. W. |
| ı, Mark Davoust | (Name of Cand | idate) being first duly sv | vorn (or affirmed), say t | hat I reside |
| at 36W885 Crane Road | , in the City, | Village, Unincorpo | orated Area (circle | one) of |
| St. Charles (if unincorporate | d, list municipality th | nat provides postal sen | vice) Zip Code 60175 | in the |
| I/a.a. | | | and am a qualified Prima | |
| . Danublican | | | nation/Election to the | |
| Precinct Committeeman in the | Qth ` | | | |
| March 45, 0040 | leDist | • | t the primary election to | |
| (\ | | | eing the holder of any l | |
| may be an eligibility requirement for the office to | which I seek the no | mination) to hold such | office and that I have fil | ed (or I will |
| file before the close of the petition filing period) a | Statement of Ecor | nomic Interests as req | uired by the Illinois Gov | vernmental |
| Ethics Act and I hereby request that my name b | e printed upon the | official Republi | can _{(Nam} | e of Party) |
| Primary ballot for Nomination/Election for such o | | | | |
| | | t . | | |
| | | Mk | Doman | \mathcal{J} |
| | _ | (Signate | ure of Candidate) | |
| | EK DAVOU | STbefore | eme, on 11/22 | <u> 1</u> 日 |
| (Nam | e or Carididate) | | (insert month, | uay, year) |
| MELODY B DAVOUST | | halody B. | Durous | |
| (NUTATE OF ILLINOIS | | /(Notary | Public's Signature) | |

10 ILCS 5/7-10.1

Suggested Revised July, 2004 SBE No. P-1C

LOYALTY OATH (OPTIONAL)

| United States of America) |
|--|
| State of Illinois) SS. |
| I, Mark Davoust , do swear (or affirm) that I am a citizen of the |
| United States and the State of Illinois, that I am not affiliated directly or indirectly with any communist |
| organization or any communist front organization, or any foreign political agency, party, organization or |
| government which advocates the overthrow of constitutional government by force or other means not |
| permitted under the Constitution of the United States or the Constitution of this State; that I do not directly or |
| indirectly teach or advocate the overthrow of the government of the United States or of this State or any |
| unlawful change in the form of the governments thereof by force or any unlawful means. |
| |
| (Signature of Candidate) |
| Signed and sworn to (or affirmed) by MARK DAVOUST before me, (Name of Candidate) |
| on 11/22/15 (insert month, day, year) Mulody B Davores V |
| (SEFACIAL SEAL MELODY B DAVOUST NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:05/01/17 |

PRECINCT COMMITTEEMAN PRIMARY PETITION

| unincorporated, list municipality that provides postal service) Zip Code 60175 , County of Kane and State shall be a candidate of the Republican Party for election to the office of PRECINCT COMMITTEEMAST. Charles 8 (township name and precinct number), to be voted for at the primary election to be March 15,2016 (date of election). If required pursuant to 10 ILCS 5/7-10.2, complete the following (this information will appear on the ballot) | of Illinois, N , for theld on | | | |
|--|--|--|--|--|
| FORMERLY KNOWN AS UNTIL NAME CHANGED ON | | | | |
| (List all names during last 3 years) (List date of each name cl | iange) | | | |
| NAME STREET ADDRESS OR CITY, TOWN OR (VOTER'S SIGNATURE) RR NUMBER VILLAGE CO | YTNU | | | |
| Mulody B. Davorest 36 W885 Orang Rd. St. Charles 1 Ka | Al | | | |
| | n© | | | |
| 3 Jun Halle 37 4517 MANGEL SICHARE IL U | 11/19 | | | |
| 4 DM grand 37 W551 Envel Creek Dave St Charle IL Ko | nj | | | |
| 5 NEWWARD CESSWING GN639 KNOW Cuch By St Charles IL K | ani | | | |
| a flall - 4N609 Knoll Creeker St Charles IL K | ane | | | |
| 7 Club B. Orland 4N435 Knoll Crack St. Charles IL Ka | ne | | | |
| 8 Charles IL Kar | <u>e</u> | | | |
| 9 faith 1/1 1 1888 Knoll and Dn. 5+ Chanles 12 Ka | ne | | | |
| 10 hu Ophief 1 3N84/Basson In SE. Charles IL Ka | ne | | | |
| | ene | | | |
| 12 CUS LILLE BARBON LANK ST. CHARLES IL KAN | <u></u> | | | |
| State of <u>TLLINOIS</u> | | | | |
| County of <u>LANE</u>) SS. | | | | |
| I, MAIZL DAVOUST (Circulator's Name) do hereby certify that I reside at 36W 885 CRANE ZD. | | | | |
| in the City/Village/Unincorporated Area (circle one) of ST. CHARLES (if unincorporated, list municipality that provides | | | | |
| postal service) Zip Code 60175, County of KANE, State of ILLINOIS that I am18 years of age or older, 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 Persons 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. | | | | |
| Mk Daman | <u> </u> | | | |
| (Circulator's Signature) Signed and sworn to (or affirmed) by MAZK DAVOUST before me, on 11/22/15 | | | | |
| (Name of Circulator) / (insert month, day | , year) | | | |
| OFFICIAL SEAL (SELODY B DAVOUST) ANOTABLY PUBLIC SIGNATURE) | | | | |
| NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:05/01/17 SHEET NO | | | | |

Suggested Revised May, 2009 SBE No. P-27

PRECINCT COMMITTEEMAN PRIMARY PETITION

| We, the undersigned, members of and affiliated with the Republican Party, in St. Charles 8 (township name and precinct number) in the County of Mark Davoust Who resides at 36W885 Crane Road in the City, Village, Unincorporated Area (circle one) of St. Charles (if unincorporated, list municipality that provides postal service) Zip Code 60175 St. Charles 9 (township name and precinct number), County of Kane and State of Illinois, for St. Charles 8 (township name and precinct number), to be voted for at the primary election to be held on March 15,2016 (date of election). 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 Zisa Watts | 3 N978 Babson Ln. | St. Charles IL | KANE | |
| 2 Jasa Sumisur | 4NON BABSON LANCE | St. Charles IL | KNVE | |
| 3 William Genetic | 4NOIL BABSON. LANE | St. Comeles IL | KHNE | |
| 4 Shilling | 4N039 Babson Lake | Steharles 11 | Kan | |
| 5 Willard Demret | 4×118 Babsonlane | STR/IBRIES IL | KANE | |
| 6 Jusien a. Kacher | 4N121 Balean Lane | St. Charles IL | KANE | |
| 7 That I can | 923 DAK CROST CA | 1 St. Chare IL | Kare | |
| 8 Rasemany Hood | 910 Pak hest fin | St Chas I | Nane | |
| 9 Jal Har | 910 Och Crest Lu | St Ch, L | 1soul | |
| 10 Joyn Slam | 917 Oak Crest Sm | St. Chan IL | Kann | |
| 11 Ganda Q Glaser | 9 11 Oak Crest Lane | St Charles " | Kane | |
| 12 Jung K towall | GIV Osh Crest Lane | St Charles | Kinc | |
| State of ILLINOIS) | | | | |
| County of KANE) | SS. | | | |
| 1. MARK DAVOUST | (Circulator's Name) do hereby certify that I re | eside at 36W885 CZ | ANE RD. | |
| in the City/Village/Unincorporated Area (circle | one) of ST. CHARLES (if | unincorporated, list municipal | ity that provides | |
| postal service) Zip Code 60175, County of 12015 , State of 11015 that I am18 years of age or older, 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 12203LICAN 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. | | | | |
| | (Circula | tor's Signature) | | |
| Signed and sworn to (or affirmed) by | | before me, on 11/22 (insert mo | /15 hth, day, year) | |
| (SEAF)CIAL SEAL MELODY B DAVOUST | " modely B | (Notary Public's Signature) | <u></u> | |
| NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:05/01/17 | SHEET NO2 | | | |

PRECINCT COMMITTEEMAN PRIMARY PETITION

| We, the undersigned, members of and affiliated with the Republican Party and qualified primary electors of the Republican Party, in St. Charles 8 (township name and precinct number) in the County of Kane ,State of Illinois, do hereby petition that Mark Davoust who resides at 36W885 Crane Road in the City, Village, Unincorporated Area (circle one) of St. Charles (if unincorporated, list municipality that provides postal service) Zip Code 60175 , County of Kane and State of Illinois, shall be a candidate of the Republican Party for election to the office of PRECINCT COMMITTEEMAN , for St. Charles 8 (township name and precinct number), to be voted for at the primary election to be held on March 15,2016 (date of election). 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 DAVID HOOTSALLELL | 909 OAK EREST LN STOR | So St Charles 1 | KAN | |
| 2 | | IL. | : | |
| 3 | | 1L | | |
| 4 | | IL. | | |
| 5 | | 1L | | |
| 6 | | | . | |
| 7 | | 323456 IL | | |
| 8 | | IL | 181 | |
| 9 | | IL I | - F1- | |
| 10 | | F. IL | | |
| 11 | | IL. | | |
| 12 | | IL. | <u>-</u> | |
| State of TLLINOIS) | · · | | | |
| County of KANE | SS. | | | |
| , | (Circulator's Name) do hereby certify that I r | | NE 20 | |
| | | | | |
| in the City/Village Unincorporated Area (circle one) of ST. CHARLES (if unincorporated, list municipality that provides | | | | |
| postal service) Zip Code 60175, County of KANE, State of ILLINOIS that I am 18 years of age or older, 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 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 | | | | |
| | (Circula | ator's Signature) |) | |
| OFFICIAL-SEAL OFFICI | Name of Circulatory SHEET NO | before me, on | /15 hith, day, year) | |