# KANE COUNTY ELECTION AUTHORITY RECEIPT FOR NOMINATING PETITION

CANDIDATE NAME:	MARJAN	YA FERJUS	) J	
CANDIDATE ADDRESS:	: 794 Fo	YA FRAJONS		
CITY:	AURURA	20 605	04	
DATE FILED: 12/	4/13	OFFICE: WARD 3	PCT (	(PCP)
TIME FILED: 9:	18	PARTY: DEM	R	EP
The following have been	en received:			
1	Statement of Candidac	у		
_	Loyalty Oath  Petition pages 1 to	3		
	Receipt for Statement			
<del></del>				
Received from:	CANDIDATE	AGENT		
1	Bles	XI.		
	Signa Signa	ture		
V.	1 CSSV Y	Hicko	<u>,</u>	
	Print Name C	andidate Agent		
	1 an	MO		
	Deputy	y Clefk		

Suggested Revised August, 2017 SBE No. P-1

#### STATEMENT OF CANDIDACY

	NAME	ADDRESS-ZIP CODE	OFFICE.	DISTRICT	PARTY
	Margarita Ferguson	794 YOUR Seasons	Precinet	Augora 3-6	Devenosto.
	V 3 .	60504	trecinet Committemen	3-6	TOWNSON NO.
	(for unexpired terms, specify "2 year unex	nied term" or "A year unavoired ter	m" along with the office in th	o "OFFICE" space pro-	ided above)
1	f required pursuant to 10 ILCS 5/7-10.2	-	_		•
٠	•	·		,,	•
	FORMERLY KNOWN AS (List all nam	nes during last 3 years)		(List date of each	name change)
ST	ATE OF ILLINOIS	)			
Co	ounty of <u>Kane</u>	) SS. )			
	V -	ſ		•	•
Ι,		Name of Car			ed), say that l
re	^	Seasons, in			^
_	(if unit	ncorporated, list municipality	that provides postal s	ervice) Zip Code 🤇	00504 , 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 Combiteenan in the 3-4 District, to be voted upon at the primary election to be held					
on	March 20-2017 (da	ite of election) and that I am le	egally qualified (includi	ng being the holde	r of any license
tha	at may be an eligibility requirement	for the office to which I seek	the nomination) to hole	d such office and t	hat I have filed
(o	(or I will file before the close of the petition filing period) a Statement of Economic Interests as required by the Illinois				
G	overnmental Ethics Act and I hereby	y request that my name be p	orinted upon the officia	1 Democrat	70
(Name of Party) Primary ballot for Nomination/Election for such office.					
				+	
		H	Warret.	Degison	J
(Signature of Cardidate)					
Signed and sworn to (or affirmed) by War 99erta + Progression before me, on 12-3-2017.  (Name of Candidate) before me, on 12-3-2017.					
	** * * * * * * * *	·	/ John !		). 1 a .
	(SEAL) (SEAL)	fficial Seal Y Garcia Alanis	(Notaly	Public's Signature	)
	Notary Pul	blic State of Illinois on Expires 08/02/2020	NED	IEOSK.	
	2000000	***************************************		, t.	

## PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an	d affiliated with the Dem	crafte Party and	qualified primary	electors of the	
Descratic Party, in Autora 3-6 (township name and precinct number) in the County of					
		Margaetta Fergu		no resides at	
municipality that provides postal service) Z		porated Area of Aurora		ncorporated, list	
Democratic Party for election	*	<del></del>	of Illinois, shall be a	candidate of the(township	
name and precinct number), to be voted for		· · · · · · · · · · · · · · · · · · ·		(tomisinp	
f required pursuant to 10 ILCS 5/7-10.2, comple			•		
FORMERLY KNOWN AS		TIL NAME CHANGED ON			
(List	all names during last 3 years)		each name change)		
NAME	VOTER'S PRINTED	STREET ADDRESS OR .	CITY, TOWN OR	COUNTY	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY	
Tra Delevere	Tina Delatorne	785 Seventipity DE		Kare	
- Abi tothe	Obi DelaTorre	785 Screwdoothy	Aunora "	Kane	
3.71///	Parid Chandler	1752 Rebreco Lone	Acron ,IL	Kane	
4.12	Rainita Gupte	1758 Robecoaln	AUNDO!"	Handy	
5. R. Gubts.	Rakesh Gusta	1758 Rebecca Ln	Aurora "	King (	
6. Math	Martin Shaw	1765 matther	Ayrona ,IL	Kane	
7. Currinalle	Carrie Polk	1715 Ravine Pack	Λ 11	Kane	
8. Eurola Ma Dru	Barla Martine	15. 0 5	Aurora"	Kan	
10K117402H		11083 ROVIDE POIK	Chan "	KUVE	
10. Hill Reform	Wil Roberson	1779 Shan (n	Arvira II	Kal	
State of TLLINDIS	)		<u> </u>		
County of Kane	) SS.				
Margaeita Forguer	(Circulator's Name) do hereby	certify that I reside at 794	Four Seaso	Als in the	
in the Marganita forgus (Circulator's Name) do hereby certify that I reside at 794 FOUT JEASONS, in the Thy Village/Unincorporated Area of Area of (If unincorporated, list municipality that provides postal service) (Zip Code (2017))					
County of HAVE, State of Illand Sthat I am 18 years of age or older (or 17 years of age and qualified to vote in Illinois), 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 Denicoration Party in the political division in which the candidates is seeking nomination/elective office, and					
that their respective residences are correctly stated, as above set forth.					
(Circutator's Signature)					
Signed and sworn to (or affirmed) by <u></u>	C. G. P. H. Hergeson  (Name of Circulator)	kefore me, on 12-03	o - 2017.		
(054)	• (Name of Officiality)		Monar, day, year)		
(SEAL) Official Se		(Notary Ru	blic's Signature)	سسنا	
Karina Y Garci	te of Illinois	1	$\mathcal{J}$ .		
My Commission Expir	es va/vz/zuzu (	<del></del>			

# PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an	· · · · · · · · · · · · · · · · · · ·	corafic Party and	qualified primary	electors of the
	Hursta 3-6	(township name and pr	ecinct number) in	the County of
194 Four Seasons	do hereby petition that	Margarita Fer	3	no resides at
	^	porated Area of Aurora		ncorporated, list
municipality that provides postal service) Z  Democratic Party for election		COMMITTEEMAN, for AUCOT	of Illinois, shall be a	
name and precinct number), to be voted for				(township
If required pursuant to 10 ILCS 5/7-10.2, comple	te the following (this information wil	l appear on the ballot)		
FORMERLY KNOWN AS		TIL NAME CHANGED ON		
(List	all names during last 3 years)		each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1 Ednying Os-ei		1757 Resección	Aust !!	KINERIS
2 CAMOMINATURA		1775 20 becalo	AT YOYOL "L	BOOKIAL
3. Mulli-Non.		176 Malther In	Awara "	Conl
4. 12.00		1715 TCAVIME	AUZCIA	KAN
5.		MIR CONSTRUCTION	LUIDVA IL	Kane
6. AND		661 Com di V	Acrem II	1/
7.	ha - 18 1	bul sevendiroy	1/1 .IL	Tollar.
8. Jungot Herron	Manageita tergusal	794 four sealons	Hursta	KANC.
9			· · · · · · · · · · · · · · · · · · ·	
			,lL	
10.			,IL	
State of T//INFOIS	)			<u> </u>
County of Kasse	) SS. )			
1. Chastother A Rodinal	(Circulator's Name) do hereby	certify that I reside at 317 1	Main st	in the
City/Village/Unincorporated Area of Noval		porated, list municipality that provides		in the
<u> </u>		age or older (or 17 years of age and		
a citizen of the United States, and that the				
filing of the petitions and are genuine and the				
qualified voters of the Denne which		ivision in which the candidates is se		
that their respective residences are correctly	y stated, as above set forth.	L. Rali		•
6	_	(Circulators	s \$ignature)	<del></del>
Signed and sworn to (or affirmed) by	1320lus A Kodril	Wefore me, on 12-0	3-2017	
	(Name of Circulator)	(Insert n	onth, day, year)	<del></del>
(SEAL) Official Seal Karina Y Garcia Alanis (Notary Rublic's Signature)				
Notary Public Sta My Commission Expl	te of Illinois 🦿 🥤	2	J 5.3/14(0)	

### PRECINCT COMMITTEEMAN PRIMARY PETITION

We, the undersigned, members of an		OCVIGATE Party and	qualified primary	electors of the
	Hurora 3-6	(township name and pro	ecinct number) in	the County of
		Margarita tergus	Г	no resides at
794 tour Seasons		porated Area of Aurora	(if uni	ncorporated, list
municipality that provides postal service) Z			of Illinois, shall be a	candidate of the
Democratic Party for election	to the office of PRECINCT C	COMMITTEEMAN, for Auror	a 3-6	(township
name and precinct number), to be voted for	r at the primary election to be h	neld on <u>March 20 -2019</u> (da	te of election).	
If required pursuant to 10 ILCS 5/7-10.2, comple	te the following (this information will	appear on the ballot)		
FORMERLY KNOWN AS		TIL NAME CHANGED ON		
(List	all names during last 3 years)	(List date of	each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COLINERY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1 Mital D. Juz-	Chris Ferguson	794 Four Season SPS/UL	Aurora ,IL	Kone
2 POMM ASIPHAT	Povsheu Tinotell	KD2 FDW FRAMBL	1 aurora."	Kare
3 Dechual Thus	MILABEL BLASHA	784) FOUR SCHOOLS	BURNES IL	LANG.
4. In McDonald	JOE MCDNALD	767 Sevendinity Dr.	A. JL	ICANE
5. Almale Banashik	Jennifor Benesser	746 Fow Sevensi	11	Kane
6.0 Jan hu	James Wilson	, ,	Aurora	Kane
7. /			,lL	0 14/10
8.			,lL	
9.			,IL	_
10.			3 // ,IL	
		<u></u>	77 77	7
State of	) · ) SS.		30 m	<b>5</b> 5:
County of	<b>5</b>		1	頑
1. Mistopher Ferruson	(Circulator's Name) do hereby i	certify that I reside at 794 For	<b>N N</b>	B/D in the
(City/Village/Unincorporated Area of Aug		porated, list municipality that provides		
		age or older (or 17 years of age and	T- 1/4 F	( ,———
a citizen of the United States, and that the			~··	
filing of the petitions and are genuine and t				-
qualified voters of the RINDCOCTE Party in the political division in which the candidates is seeking nomination/elective office, and				
that their respective residences are correctly stated, as above set forth.				
		1/15/1 D	1/1/10	
	, –	(Circulator's	s Sjgnature)	
Signed and swom to (or affirmed) by Ch		before me, on	3-2017	<del> </del>
	(Name of Circulator)	(Insert	<del>no</del> nth, day, year)	
(SEAL) OFFICIAL SEAL MARGARITA FERGUSON	,	N prest of	Fereson	
Notary Public - State of Illinois My Commission Expires Aug 21, 2018		(Notary Pu	blic's Signature)	
in outside Education	SHEET NO.	<u>) (</u>		