### **COUNTY OF KANE**

John A. Cunningham KANE COUNTY CLERK

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

### Receipt for Nominating Petition March 17, 2020 - 2020 General Primary.

Receipt For: Marcus E. Banner 709 Grace St

	Receipt for Notice of Obligation D-5  nowledge receipt of the Notice of Obligation which outlines obligations and responsibilities nois Campaign Discolsure Act.
Printed: 11/27/2019	
	Name and Title of Local Clerk/Secretary
	John A. Cunningham - Kane County Clerk
	Deputy Clerk
	By: Dool Richt.
Received fro	OM: BRENDA ROCKERS
	Receipt for Economic Interest Statement (EIS)
_ <	Petition Pages ( - 2
_ <	Loyalty Oath
	Statement of Candidacy
The following	g have been received:
Office: FOR F	PRECINCT COMMITTEEPERSON, Elgin 22 Party: Democratic
Filed: Novem	ber 27, 2019 at 12:51:00 PM.
	709 Grace St Elgin, IL 60120

Date: 11-27-/9

Signature of Candidate of Agent

Suggested Revised March, 2019 SBE No. P-1

#### STATEMENT OF CANDIDACY

NAME	ADDRESS-ZIP CODE	OFFICE	DISTRICT	PARTY
			DIOTRIOT	TAKIT
Marz45	109 91960	Precinct committeeferson	F122	De MOCYATIC
E		Committed		Der section
Banner	60120	A Full Term is sought, unless		
P-same t	60120	an unexpired term is stated here: year unexpired term		
If required pursuant to 10 ILCS 5/7-	-10.2, 8-8.1 or 10-5.1, complet	e the following (this informatio	n will appear on the ba	illot)
FORMERLY KNOWN AS	I names during last 3 years)	INTIL NAME CHANGED ON	18 8	2019
(List ai	rames during last 3 years)		(List date of each	
STATE OF ILLINOIS	)		= %0	27 E
county of Kane	) SS		3/3	ECEIVED
**************************************			H H	1.0
Marcus & Bai	ner (Name	of Candidate) being first d	uly sworn (or affirme	ed), say that I
reside at 109 graze	5T	in the City, Villag	e, Unincorporate	d Area of
E/g;n (ii	f unincorporated, list munic	ipality that provides postal	service) Zip Code 🤆	0120 in
the County of Kane				
voter of the Democratic				
precinct Committee				
on March 17th 2020	(data of election) and that	Lam legally qualified (inclus	ding being the holder	of any license
that may be an eligibility requirem				
(or I will file before the close of				
Governmental Ethics Act and I he	ereby request that my name	e be printed upon the offic	ial Demozia	1, 2
(Name of Party) Primary ballot for	Nomination/Election for suc	ch office.		
		2.		
		Marcis E (Signa	Bann	
		(Signa	ture of Candidate)	
Signed and sworn to (or affirmed) I	Dy Marzus E	Banner before	e me, on	6-2019
	(Name of Candida	te)	(insert mo	nth, day, year)

(SEAL)

"OFFICIAL SEAL" BRENDA RODGERS

Notary Public, State of Illinois My Commission Expires 11/24/2022 (Notary Public's Signature)

			Annual State of the Committee of the Com	
ATT	ACH	TO	PETITIO	N.I
AII	MUH	10	PETITIO	V

10 ILCS 5/7-10.1

"OFFICEAL" SEAL"
BRENDA RODGERS

Notary Public State of Illinois My Commission Expires 11/24/2022 Suggested Revised July, 2004 SBE No. P-1C

### LOYALTY OATH (OPTIONAL)

United States of America ) State of Illinois )
I, Marcus E. Banner , 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.
Marcis & Barry (Signature of Candidate)
Signed and sworn to (or affirmed) by Marcy E Banner before me, (Name of Candidate)
on

# PRECINCT COMMITTEEPERSON PRIMARY PETITION

unicipality that provides postal service) Zip Code 61/20 County of Kane and State of Illinois, shall be a candidate in the Illinois of PRECINCT COMMITTEEPERSON, for Light Trans. Shall be a candidate in the Illinois of Precinct number), to be voted for at the primary election to be held on Illinois on the Date of Precinct Committee Presson, for Light Trans. Shall be a candidate in the primary election to be held on Illinois on the ballot)  FORMERLY KNOWN AS  (List all names during last 3 years)  NAME  VOTER'S PRINTED  NAME (optional)  RR NUMBER  VILLAGE  OUTITL NAME CHANGED ON  RR NUMBER  VILLAGE  OUTITL NAME CHANGED ON  RR NUMBER  VILLAGE  OUTITL NAME CHANGED ON  RR NUMBER  OUTITL NAME CHANGED ON  RR NUMBER	KANE State of Illino	is, do hereby petition that in the City, Village, Unincom	Marcus E. Band porated Area of Elgin	nec wh	o resides a corporated, lis
PATY for election to the office of PRECINCT COMMITTEEPERSON, for CLIGAT ALLOSSING TECHNICAL AND	: : !! !! - !	Zin Code 6 012 0 County of	Kane and State	of Illinois, shall be a c	candidate of th
Interest and precinct number), to be voted for at the primary election to be held on \( \frac{MOLRENT (NOWN AS (List all names during last 3 years)\) \( \text{UNTIL NAME CHANGED ON (List date of each name change)}\) \( \text{UIST (List all names during last 3 years)}\) \( \text{UNTIL NAME CHANGED ON (List date of each name change)}\) \( \text{UIST (List all names during last 3 years)}\) \( \text{UNTIL NAME CHANGED ON (List date of each name change)}\) \( \text{UIST (List all names during last 3 years)}\) \( \text{UNTIL NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (List all names during last 3 years)}\) \( \text{UNTIL NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( \text{UIST (NAME CHANGED ON (LIST date of each name change)}\) \( UIST (NAME CHANGED ON	C	on to the office of PRECINCT CO	MMITTEEPERSON, for [410]	ownship PCT,	(townsn
required pursuant to 10 ILCS 9/7-10.2, complete the following (this information will appear on the ballot)  FORMERLY KNOWN AS  (List all names during last 3 years)  (List date of each name change)  NAME  (NOTER'S PRINTED  NAME (optional)  NAME (optional)  RR NUMBER  CITY, TOWN OR  VILLAGE  COULT  NAME (optional)  RR NUMBER  CITY, TOWN OR  VILLAGE  CITY,	me and precinct number), to be voted	for at the primary election to be t	held on <u>MaRch 11, 2620</u> (da	te of election).	
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NAME (OPTIONAL PROPERTY OF GRANDERS OR COUNTY TOWN OR VILLAGE COUNTY OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF THE SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF THE SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF THE SIGNATURE)  NAME (OPTIONAL PROPERTY OF GRANDERS OR RESIDENCE OF THE SIGNATURE)  NAME (OPTIONAL PROPERTY OF THE SIGNATURE			THE NAME CHANGED ON		
NAME (NOTER'S SIGNATURE)  NAME (OPTIONAL INCIDENCE SIGNATURE)  NOTIONAL INCIDENCE SI	FORMERLY KNOWN AS(L)		(List date of	each name change)	
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ANTHORY BANDAR COLOR SET TO STATE OF THE STA	Krew/	Jeponan Terez	1010 grace of	C S IL	/w/s
4. ANHANY BYVALLS 448 94 49 54 17 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 Ruperto Dicerco	of uset acound	707 G19ce St	Elgini	KANT
And Andrews Andrews (18 grace of the control of the United States, and that the signatures on this sheet were signed in my presence, not more than 90 days preceding the lefting 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 that their respective residences are correctly stated, as above set forth.  Signed and sworn to (or affirmed) by BRENDA KAGERS before me, on Navaber 3 (Insert mont) began ture)  (SEAL) GUILLERMO ZANALA Official Seal	3. C. Various VIII	Clarissa Richa	367 Hastnas Hot#2	Elain	Kano
State of Things (Circulator's Name) do hereby certify that I reside at the persons of age and qualified to vote in Illinois 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 latest that their respective residences are correctly stated, as above set forth.  Signed and sworn to (or affirmed) by TRENDA RAGERS (Name of Circulator')  Separation of the person of the per	4. 4.	AIA H P	(162) 946 LE ST	8111h	Kane
8. Many Burn Marcus Dringer Tog glace 31 Light Kra  8. County of Kanal State of Illines (Circulator's Name) do hereby certify that I reside at Interpretate the provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that provides postal service) (Zip Code) (If unincorporated, list municipality that I reside at [In In I	5.			Ela: D.IL	KANE
8. Many Burn Marcy Banner 70 9 9/acc 51  10. State of Illino; 5  County of Kould States of Illino; that I reside at 10 6 Hilling 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 that their respective residences are correctly stated, as above set forth.  Signed and sworn to (or affirmed) by BRENDA RAGEBS before me, on National Ray, year)  (SEAL)  GUILLERMO ZANALA Official Seal	Hand anderso	DARYL ANDRESO	200 THAC/ NES 31	E FLOR IL	kous
State of Things and the signatures on this sheet were signed in my presence, not more than 90 days preceding the lifting 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 that their respective residences are correctly stated, as above set forth.  Signed and sworn to (or affirmed) by TRENDA RAGERS before me, on NALLARY (Inser month day, year)  (SEAL)  GUILLERMO ZAVALA Official Seal	6. 150	Gigele Danner	33 JOO MOUNT NO	D 6911	Make
State of III NO 15  SS.  County of KONDA KONDANS (Circulator's Name) do hereby certify that I reside at OI ON	7/1/20	Port- rectal OPT	2X) NOrman Nelso	189M	Kans
9.  10.  State of III 10 5  County of Kond Kond Kond Kond Kond Kond Kond Kond	8. M - B - 20	Martis Bound	709 9/ace 91	E15:10	Kine
State of III 10.5  SS.  County of Kount SS.  County of Kount SS.  City/Village/Unincorporated Area of GIN (if unincorporated, list municipality that provides postal service)(Zip Code)  County of Same State of The	- was pro	riarcy sunner	10 10100	,iL	
State of III 10 5  County of Kond Kond Care (Circulator's Name) do hereby certify that I reside at Cold Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Kond Care (If unincorporated, list municipality that provides postal service) (Zip Code).  County of Kond Kond Kond Kond Kond Kond Kond Kond				,IL	
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County of Kond Area of Circulator's Name) do hereby certify that I reside at 1016 Hill Circulator's Name) do hereby certify that I reside at 1016 Hill Circulator's Circulator's Name) do hereby certify that I reside at 1016 Hill Circulator's County of County of State of This that I am 18 years of age or older (or 17 years of age and qualified to vote in Illinois) 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 later 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 to qualified voters of the Democratic Party in the political division in which the candidates is seeking nomination elective of that their respective residences are correctly stated, as above set forth.  Signed and sworn to (or affirmed) by PREAD A ROJERS before me, on November 23 2019 (Insect month day, year)  (SEAL)  GUILLERMO ZAVALA Official Seal	. 71/100 6	``			
City/Village/Unincorporated Area of		— ) ss.			
City/Village/Unincorporated Area of		_ )	/// /// ac	11'11 0	10
City/Village/Unincorporated Area of	BRENDA KodgER	(Circulator's Name) do hereb	y certify that I reside at /0/6		
County of	A fillege // Injecomorated Area of		orporated, list municipality that provid	es postal service)(Zif	Code)(.0/
Signed and sworn to (or affirmed) by BRENDA RAGERS  (Name of Circulator)  Signature)  GUILLERMO ZAVALA  Official Seal	Sounds of Manage States	of That's that I am 18 years	of age or older (or 17 years of age ar	nd qualified to vote in	illinois), that
Signed and sworn to (or affirmed) by RENDA ROLES before me, on November 23, 2019  (Name of Circulator)  GUILLERMO ZAVALA  Official Seal	a citizen of the United States, and that	the signatures on this sheet wer	e signed in my presence, not more t	han 90 days precedi	ng the last of
Signed and sworn to (or affirmed) by BRENDA RAGERS  (Name of Circulator)  (SEAL)  GUILLERMO ZAVALA  Official Seal	ling of the potitions and are genuine a	and that to the best of my knowled	ige and belief the persons so signing	were at the time of s	agining the pe
Signed and sworn to (or affirmed) by BRENDA ROSERS before me, on November 23, 2019  (Name of Circulator)  (SEAL)  GUILLERMO ZAVALA  Official Seal			I division in which the candidates is	seekinginominatione	siective onice
Signed and sworn to (or affirmed) by BRENDA ROSERS before me, on November: 23, 2019  (Name of Circulator)  (SEAL)  GUILLERMO ZAVALA  Official Seal	that their respective residences are co	rrectly stated, as above set forth.	Date Ja	Kolgers	
(SEAL)  GUILLERMO ZAVALA Official Seal  (Insert month day, year)  (Insert month day, year)  (Notary Public's Signature)			(Circulate	or's Signature)	
Official Seal	Signed and sworn to (or affirmed) by	BRENDA RodgER. (Name of Circulator)			79
Official Seal	(SEAL)	-	Duther &	la	
A MAN DAVE COLLEGE	GOILLE		(Notary	Public's Signature)	
Notary Public – State of Illanors My Commission Expires Sep 20, 2021  SHEET NO.	Notary Public	- State of Itlanois SHEET NO.			

## PRECINCT COMMITTEEPERSON PRIMARY PETITION

e, the undersigned, members of and	Flain Township Pet	22 (township name and pre	cinct number) in t	the County of o resides at
Kane State of Illinois	, do hereby petition that	Marcus E. Ban	ilei wii	
109 GRACE St.	_ in the City, Village, Unincom	porated Area of 1-191N		corporated, list
unicipality that provides postal service) Z	ip Code 60120 County of		of Illinois, shall be a	
C	to the office of PRECINCT COM	MMITTEEPERSON, for Clary	ownship reti	CZ (townsm
me and precinct number), to be voted for	or at the primary election to be h	neld on <u>Mo.RCh 11, 2826</u> (da	te of election).	
required pursuant to 10 ILCS 5/7-10.2, comple	ate the following (this information was	Tapped on the services ON		
FORMERLY KNOWN AS	all names during last 3 years)	TIL NAME CHANGED ON(List date of	each name change)	
(Liot			CITY, TOWN OR	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	VILLAGE	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER		,
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Savier Santillan	Sall of Sall lian	1 1111	TCI, IL	Kano
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State ofS	ss.			
County of TIKE HEAVY	_ )			
Ann II war is	(Classificado Namo) do horoh	y certify that I reside at 1018 P	UP ST FOX RIP.	GOD in
CSWEER HE MENCES	CIFCULATOR'S Name) do nereo	orporated, list municipality that provide	les postal service)(Zip	Code Code
City Village Unincorporated Area of	T(()	of age or older (or 17 years of age a	nd qualified to vote in	lllinois), that
County of MC Nenn, State of	100 Softhat I am 18 years	or age of older (or 17 years or age a	han 90 davs precedi	ng the last day
a citizen of the United States, and that	he signatures on this sheet wer	e signed in my presence, not more	were at the time of :	sianina the pet
filing of the petitions and are genuine an	d that to the best of my knowled	ige and belief the persons so signing	seeking nomination/s	elective office.
qualified voters of the Democra		division in which the candidates is	seeking norminations	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
that their respective residences are corr	ectly stated, as above set forth.	( All W		5
EW	Smarella maca	(Circulat	or's Signature)	
Ł	small mar	,	11-22-2019	
Signed and sworn to (or affirmed) by	emochatic		rt month, day, year)	
	(Name of Circulator)	(1) - 1R1	0 1	
(SEAL)		(Notary	Public's Signature)	
"OFFICIAL SEAL"		(Hotal)		
B DANIEL R. RUMENTZAS B	SHEET NO.			
NOTARY PUBLIC, STATE OF ILLINOIS				
MY COMMISSION EXPIRES 01/03/23				

#### CERTIFICATION OF DELETIONS

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			).	(date of election		on
10.	Line I	Page No.	Line No.	Page No.	Line No.	Page No.
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201	De					
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Only the person circulating the petition, or the candidate on whose behalf the petition is circulated, may strike any signature from the petition. If deletions are made, this CERTIFICATION OF DELETIONS shall be filed as part of the petition.