

Finance Department • 102 N Neil St • Champaign IL 61820 • (217) 403-8940 • fax (217) 403-8980 • www.ci.champaign.il.us

CITY OF CHAMPAIGN RECEIPT FOR FILING CITY COUNCIL DISTRICT COUNCIL MEMBER

To Be Completed By The Potential Candidate:						
Petitioner's Name (Print):	AZARI	KD. Ca	OBBS_			
Petitioner's Address:	1619600	Krave	n west			
Petitioner's Phone No.:	217819-0636	Cell No	SAME			
Fax No.:		•				
E-mail Address:	ACOBBS12	- PAhe	o.com			
Candidate For:	CITY COUNCIL ME	EMBER DISTI	RICT# 1			
Note: The City Clerk, or the Clerk filed for completeness, accurate	-					
(la)	Certify that I have received the document entitled "Notice of Obligation to Candidates." (Potential Candidates Name) (Date)					
I have received notification of the El	ection Lottery. Initial h	ere:	÷			
The following documents were recei	•					
ITEM	CLERK'S INITIALS		TIME			
1. Statement of Candidacy	MB	11-25-20	350 p.m.			
2. Petition (No. of Pages 1)	M43	11-23-20	3:50 p.m.			
3. Receipt for Filing Statement of Economic Interest	MB	11-23-20	3:50 p.m.			
4. Loyalty Oath (Optional)	MB	11-23-20	3:50 pm			

Original: To be retained by the Petitioner

Copy: To be retained by the City Clerk's Office

(first office or position of employment for which this statement is filed) (if necessary, second office or position for which this statement is filed) (if necessary, third office or position for which this statement is filed)	This will be returned to you when statement is flied in the Office of Champaign County Clerk, Aaron Ammons. Receipt is hereby acknowledged of your Statement of Economic Interests, filed pursuant to the Illinois Governmental Ethics Act. The Statement was filed as of this date.
TYPE OR HAND PRINT	Sonna E E Emma Lond
FZHRKD. COBBS	
Name 1019 LOCK RAVEN WEST	NOV 1 9 2020
Cilvampaign FC (1821)	dason chromos
•	CHAMPAIGN COUNTY CLERK
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If required pursuant to 10 ILCS 5/7-10.2, 8-8.1 or 10-5.1, complete the follow	
FORMERLY KNOWN AS UNTIL N. (List all names during last 3 years)	AME CHANGED ON (List date of each name change)
STATE OF ILLINOIS)	
County of Champaign) SS.	
	•
AZARKO. COBBS heing fire	st duly sworn (or affirmed), say that I reside at
1619 LOCK RAVEN West, in the City, Village, Unincor	
	(10)
(if unincorporated, list municipality that provides postal service) Zip Co	ode (Q1821 , in the County of
	voter therein, that I am a candidate for Nomination/
Election to the office of Council Womher District in the	City of Champaign
	(Name of City, Village or Special District)
to be voted upon at the election to be held on 123,262	date of election) and that I am legally qualified
to hold such office and that I have filed (or I will file before the close of t	he petition filing period) a Statement of Economic Interests
as required by the Illinois Governmental Ethics Act and I hereby req	uest that my name be printed upon the official ballot for
Nomination/Election to such office.	α
	Ch Ch
	(Signature of Candidate)
Signed and sworn to (or affirmed) by Azark Cobbs (Name of Candidate)	before me, on <u>November 19,</u> 2020 (insert month, day, year)
*************************************	Eth Sch Hach
(SEAL) Official Seal Ethan John Harsha Notary Public State of Illinois	(Notary Public's Signature)

ATTACH TO	PETITION
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Suggested Revised March 2020 SBE No. P-1A

STATEMENT OF CANDIDACY

NONPARTISAN

NAME: AZRAK D.COBBS	OFFICE: City of Champaign City Council Member District I A Full Term is sought, unless an unexpired term is stated here:year unexpired term
ADDRESS-ZIP CODE: 1619 COCK RAUEN WEST	City of Champaiosn, Illikoi
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 UN (List all names during last 3 years)	TIL NAME CHANGED ON (List date of each name change)
STATE OF ILLINOIS County of Champaign) SS.	
69 COCK RAVEN WEST, in the City, Village, Un	· 16 0:
if unincorporated, list municipality that provides postal service) a concept of the concept of t	ified voter therein, that I am a candidate for Nomination/
be voted upon at the election to be held on Feb 23, 20	52 (date of election) and that I am legally qualified
o hold such office and that I have filed (or I will file before the clos	e of the petition filing period) a Statement of Economic Interests
s required by the Illinois Governmental Ethics Act and I hereb	y request that my name be printed upon the official ballot for
Iomination/Election to such office.	(Signature of Candidate)
Signed and sworn to (or affirmed) by Azark Cobbs (Name of Candidate	before me, on <u>November 19,</u> 2020 (insert month, day, year)
(SEAL) Conficial Seal Ethan John Harsha Notary Public State of Illinois My Commission Expires 05/13/2024	(Notary Public's Signature)

ATTA	ICH TO	PETITION	

10 ILCS 5/7-10.1

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

LOYALTY OATH (OPTIONAL)

United States of America)) SS.	•
State of Illinois)	
1. AZRKI	D. COBBS, do	swear (or affirm) that I am a citizen of the
United States and the State of Illin	ois, that I am not affiliated	directly or indirectly with any communist
organization or any communist fron	nt organization, or any forei	ign political agency, party, organization or
government which advocates the o	overthrow of constitutional	government by force or other means not
permitted under the Constitution of the	ne United States or the Cons	stitution of this State; that I do not directly or
indirectly teach or advocate the ove	rthrow of the government o	of the United States or of this State or any
unlawful change in the form of the go	_	
	•	
		40
		(Signature of Candidate)
Signed and sworn to (or affir	med) by Azar K (Name	of Candidate)
on November 19, 2020.		
on <u>November 19, 2020.</u> (insert month, day, year)		
		Gh Sch Han
		(Notary Public's Signature)
(SEAL)		(1) 전환 1일 전환 기계 분들이 가능하는 기계 하는 것 일본 기계 등을 들어가 하고 기관을 받는 것이 되었다.

Official Seal Ethan John Harsha Notary Public State of Illinois My Commission Expires 05/13/2024

SBE No. F

ŧ.		CONSOLIDATED PRIM	ARY PETITION HER THAN COMMISSION	FORM)
	(NONPARTISA	Order Ol	Compargn in the Cour	nty of Way who resides
	the undersigned, qualified voters in the term of lilinois, do hereby petition	that the hame of	AZMOKIJ COID-	Zip Code ((182
ວເອ	11019 COK 12Avenue	in the City, rown or villag		ete for nomination for the office
Ço	unty of Maupaign	7 -	The bold on the Time!	
ل	ection); provided that if no primary election	n is required, the candidate's na	ame will appear on the ballot at the	Consolidated Election for election
	a to a and torro	1 }		
sa A	Full Term is sought, unless an unexpir If required pursuant to 10 ILCS 5/10	ed term is stated here: -5.1, complete the following (this info	year unexpired term ormation will appear on the ballot)	
	If required pursuant to 10 1200	UNT		f each name change)
	FORMERLY KNOWN AS(List	all names during last 3 years) VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR COUNTY
	NAME (VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE COUNTY
	WOIER'S SIGNATURE	James Pedlare	200 Nelson Ct	Changer Chang
	32 - 1 Postinos O	Binds J. Petro	308 Metan G	Champing Champs
	3. Charles	SAMES A WILSON	371 E WAS Wingford	CHAMPEIGE CHAMPE
	4. Alinoria Allano	Vincient Hinas	205 I WERINGON	Changaign Barana
***************************************	5. A del bush	Comara M. Vouide	r 11015 hockraven Rd	Champa: Mans
	6 De De Wed	Darrell Wesley	1615Lock Ravensk	a Charleson hamp
	They from Ley	KAPton LEE	1616 FOOKERUSE K	allang Dum
	o parni Differ	NAOMI DIXON	1618 LOCKRAVEN	THE OWNER
	9. attrice Chan	ATTRICE DISON		Observano " Changa
	10. Maurie Str	Maurice Jake	1617 hockRoven Rd	(gangagai
9	State of Illinois	-) -) . SS.		
		s) · · · · · · · · · · · · · · · · · ·	1/0191	mok RAHEN in
I	, AZARK D. COBB	(Circulator's Name) do hereby	certify that I reside at 100	that provides postal service) (
	City/Village/Unincorporated Area of	chaupany	(if unincorporated, list mullicipa	and provider for 17 Vi
	Code) [[82], County of	State of	tes, and that the signatures on this	18 years of age or older (or 17 yes sheet were signed in my present
	Code) [[2], County of	y of filing of the petitions and ar	e genuine and that to the best of n	date is seeking elective office, an
ı	signing were at the time of signing the p respective residences are correctly state	etition registered voters of the lad, as above set forth.	political division	4
	respective residences and asset ,	MZARKE COBBS		(-de Signatura)
			-	tor's Signature)
				//- 23 - Zo2 O Insert month, day, year)
	Signed and sworn to (or affinyled) by	(Name of Circulator)		moertmone, ody jest
	(SEAL) CODY L DIVAN	1	(Notary	Public's Signature)
	Official Seal Notary Public - State of Illinois	SHEET NO.	1	
	My Commission Expires Aug 1, 2023	SHELT NO.		

Acres 11-1-1-1

(NONPARTIS	AN - MUNICIPALITY O	HER I HAM COMMISSION		
of Changer in the Country of Changer in the Country of Changer				
We, the undersigned, qualified voters in the State of Illinois, do hereby petition	n that the name of	HZARK D. CO.	SSS, who resides	
State of Illinois, do hereby petition U	in the City. Town or Villa	ige of Colored	gr Zip Code (OK)ZI	
	S.V out of Windia ha n	laced upon the ballot as a candid	ate for nomination for the office	
County of Charles of the Share	Last the Consolidated Prima	ary election to be held on) <u> </u>	
election); provided that if no primary election	on is required, the candidate's r	name will appear on the ballot at the	Consolidated Election for election	
	. 1			
said office and term. A Full Term is sought, unless an unexpi	red term is stated here:	year unexpired term		
A Full Term is sought, unless an unexpi if required pursuant to 10 ILCS 5/10	0-5.1, complete the following (this in	formation will appear on the ballot)		
FORMERLY KNOWN AS:		TIL NAME CHANGED ON	each name change)	
(List	all names during last 3 years)	STREET ADDRESS OR	CITY, TOWN OR	
NAME	VOTER'S PRINTED NAME (optional)	RR NUMBER	VILLAGE COUNTY	
(VOTER'S SIGNATURE)	NAME (Optional)		n/ , , L o/	
Dames E. Fanklinger	Dumes truitiff	202 NELSON CT	Mangi	
7 Sunday	RAM RAFOR	402 € Callub 14	Champaga harrif	
3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	- Carlotta-	or 605 Yzwestbeadk	webran Paton / Chamitatan	
Jands Agreatish J	Sames Frankline	1 2 0 0 0 000 Miles	10 0 1 1 10 h h n n 0	
1) anece Will	JENECE HILL	LOL VELDON CO	Millan V Motory	
5-6 mmi JACKSon	Emmis Jackson	411 E. Church	Chap chesons	
6. Kin The March	Eprestive March	12/ Barfen Helly	Champ along	
7. CARA DAY VIS	Chrina	401 E. Columbiat	re champ chaire	
8. Lan Tours	John Tours	11	Chaup " Chang	
9.11 00.10	10111	1409 Sonat Rida	Champ " Cham	
Willetier	William heath	1.3. 1	anaun " Disan	
10.	HCARLED, COBS>	1619 COEKPONEN	Court	
State of TCCINO, 5)			
County of Chaupang	n) ss.		v. West	
AZARK D. COBS	(Circulator's Name) do hereby	certify that I reside at 1019 (actorna, in the	
City/Village/Unincorporated Area of	laugersur	(if unincorporated, list municipalit	y that provides postal service) (Zip	
<u> </u>	~ (31) State of	TULI KOI Sthat I am 1	8 years of age or older (or 17 year	
age and qualified to vote in Illinois), that I	am & citizen of the United Stat	es, and that the signatures on this s	heet were signed in my presence, knowledge and belief the persons	
age and qualified to vote in Illinois), that I more than 90 days preceding the last designing were at the time of signing the last designing were at the time of signing the personal to a significant to the design of the significant to the si	of filing of the petitions and are	e genuine and that to the best of my political division in whick the candida	te is seeking elective office, and the	
signing were at the time of signing the per respective residences are correctly stated	SULIDIT TOGICION OF TOTAL			
respective residences are consumy states	102AVX10.CO	HAS /		
		(Circulato	r's Signature)	
/	X		~2020	
all and awarn to (or affirmed) by		nome me on	sert month, day, year)	
Signed and sworn to (or affirmed) by	(Name of Circulator)	Un	SOFT HILVIIII, day, year)	
KEAL	[(Mat 1)	ublic's Signature)	
(SEAL) CODY L DIVAN Official Seal	<u>, </u>	(Notary P	ublic a Signaturo/	
Notary Public - State of Illinois My Commission Expires Aug 1, 2023	SHEET NO	Loon		

(NONPARTISA	AN - WUNTUPALITY O		01/100	4-2-2
/ We, the undersigned, qualified voters in the	, City of Cl	in the Coul	nty of Char	1
State of Illinois, do hereby petition	n that the name of	HZAKK D. COBS	<u> </u>	
11019 Cock Pavan W	in the City. Town or Villa: اتعاداً	ge of Charper		de (416-21
County of Champaign	State of Illinois, be pl	aced upon the ballot as a candid	ate for nomination f	date of prim
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	at the Consolidated Prima	ry election to be held on	Cara-lidated Floatio	-
election); provided that if no primary election	on is required, the candidate's n	ame will appear on the ballot at the	Consolidated Electic	III IOI GIECUOII
said office and term.	<i>i</i> t			
A Full Term is sought, unless an unexpi	red term is stated here:	year unexpired term formation will appear on the ballot)		
		TIL NAME CHANGED ON		
FORMERLY KNOWN AS(List	all names during last 3 years)	(List date of	each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR VILLAGE	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	,lL	
1. Pour D'Carter	Raymond Carter	-613 VItelips Or	Champ "	Chap
2. Longland Carter	Constance Carter	10 0	alango	Chony
3.0001	Clen GratA	611 Philhppp	Champ"	Ce 11
4. 1. 8	Lygade	h . n	norange	Charx
5. D.S.	Soft	CONT Buly Kon	o hans	allonge
6. J. M. J. O.	L. Mlauri A	Goe Phillips	Charp.	- topo a
7. No ma Cillian	CATE COLLINS	606 Phippis de	Many ,IL	gran (
8.	Port Young	301 N/2rd Steha	hamp,"	Charry
9. Pat gain)	144	310 E HIN ST	Champ "	ISIA
MAQWOLA CARR	MARIOLIA COOK	210 E Min ST	Champ !!	I Chan
a look	COWIN N COO	JIO E MICO.	10117	<u>, </u>
State of IUI NOT 5)) · SS.			
County of Warpaign)	11010	I col Pion	<u>(Jest</u> 26
, AZIARKO, COLEBS	(Circulator's Name) do hereby	certify that I reside at 109	<u> Centro</u>	, in tr
to the second se	1/ de un pour gr	(if unincorporated, list municipalit	y that provides posta	i service) (Zip
	which state of	I (LEUE) S that I am 1	8 years of age or old	er (or 17 year
and and qualitied to vote in illinois), ulau i	divi a ciuzon di una cima a -i		liga and always	er the bersons
age and qualified to vote in Illinois), that I more than 90 days preceding the last day signing were at the time of signing the personal to the control of the signing the personal to the significant terms are controlled to the significant terms and the significant terms are controlled to the significant terms	of filing of the petitions and are attion registered voters of the p	olitical division in which the candida	ite is seeking elective	e office, and t
respective residences are correctly stated	, an above our recent	/ X1 /	(r)	_
\wedge	AZAKLO.COB			
/ \		(Circulato	r's Signature)	
1,	hlah	/	1/-23-20:	20
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on(in:	sert month, day, year)	
V	(Name of Orionistor)	lec_		
(SEAL)		(Notary P	ublic's Signature)	
Official Seal Notary Public - State of Illinois	SHEET NO	3		
My Commission Expires Aug 1, 2023	SUEET NO			

		CONSOLIDATED PRIM	MARY PETITION	N FORM)	SBE No. F
1	(NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)				
1	le, the undersigned, qualified voters in the late of Illinois, , do hereby petition	on that the name of	AZMEK D. COBE	≶, wh	o resides
ິຣ		in the City, Town or Villa	ge of Chawpayi		de (0(821
 C	ounty of Champing n	State of Illinois, be pl	aced upon the ballot as a candid	ate for nomination f	for the office
	ly Councitnember Distri	tat the Consolidated Prima	ry election to be held on	\ \	•
	ection); provided that if no primary election	on is required, the candidate's n	lame will appear on the ballot at the	00,,00,,00,,00	
	id office and term. Full Term is sought, unless an unexp	ired term is stated here:	year unexpired term formation will appear on the ballot)		
			II NAME CHANGED ON		
	FORMERLY KNOWN AS(List	all names during last 3 years)	(List date of	each name change) CITY, TOWN OR	
	NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	VILLAGE	COUNTY
	1. A. I. 7. 1.		1 - n 111 n -	Champangh !L	C. Lange
	2. Alfred Washington	Alfred Washington	Comment of the second of the s	Clampey n	C Va m fai
	Thenework & Who hater &	TRENTON IL WISH HEAVE		Oh ,IL	d pr
	Banhna Washington	Barbara Washington	n ' ' .	Champaign ,IL	al .
	4. Samula Mashington	Sandra Washington	603 Phillips Dr	Champaign	Champaig
	- Thorughill	Jerry RIL MY	4036 HICESI	,IL	0.10
	degna for	Kogina thur	210E CHurch &	Change	Minis
	1. Worothy King	Novothy Kucah	1207 Jalis De	Chang !!	Mary
	8. Mand Bui	Mascus Brown	208 = Church	Charp "	Olaway
	9. 2/ Jul Kene	2007 Chyls	2007/02-12	Jany"	70
	10.) Rita COBBS	RHU COBBS	1619 LUCKRAUEN	Chamb	(Nonto
S	tate of <u>TUINDIS</u>)	•	,	
С	ounty of Champaign	j SS.)		1 1/2 0	Wost
I,	AZARK D. COBBS	(Circulator's Name) do hereby o	certify that I reside at(Q 1 4	Lock: Bur	en_, in the
C	city/Village/Unincorporated Area of	lampagin	(if unincorporated, list municipality	y that provides postal	service) (Zip
C	ode)(01821, County of Cha	Jaig L State of I	- Likors that I am 18	years of age or olde	er (or 17 years
a	ge and qualified to vote in Illinois), that I	am alcitizen of the United State	s, and that the signatures on this sr	knowledge and belie	f the persons
ci	ore than 90 days preceding the last day gning were at the time of signing the pe spective residences are correctly stated,	tition registered voters of the pu	plitical division in which the candidat	e is seeking elective	office, and the
re	spective residences are correctly states,	AZANKO COB	BBS A	V	<u>ر</u>
			(Circulator	's Signature)	
		1	before me, on	23-2020	>
S	igned and sworn to (or affirmed) by	(Name of Circulator)	(Ins	ert month, day, year)	
	(SEAL) CODY L DIVAN		(Notary Di	blic's Signature)	
	Official Seal Notary Public - State of Illinois Ay Commission Expires Aug 1, 2023	SHEET NO.	(Notaly Pu	ono o Cigiradio)	

Suggested Revised March 2019 SBE No. P-5

(NONPARTIS	SAN - MUNICIPALITY (OTHER THAN COMMISSIO	N FORM)	•
we, the undersigned, qualified voters in the	ne City of C	Jawpa 1011 in the Cou	unty of Chair	paign and
we, the dildersigned, qualified state of Illinois, do hereby petiti		AZARK D. COBE	-	ho resides at
1/019 Lockraven We		age of Champaton	Zip Co	ode 6182
county of Champaign	State of Illinois, be p	placed upon the ballot as a candic		
City Council District	1_at the Consolidated Prima	ary election to be held on	orwary23=2	date of primary
election); provided that if no primary elect	tion is required, the candidate's	name will appear on the ballot at the	Consolidated Electi	on for election to
said office and term.		<u> </u>		
A Full Term is sought, unless an unexp If required pursuant to 10 iLCS 5/1	Dired term is stated here:	year unexpired term iformation will appear on the ballot)		
FORMERLY KNOWN AS	UN	TIL NAME CHANGED ON		
(List	t all names during last 3 years)	T	each name change)	T
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
funde Charling	winter Coraging	Fort Noll 3081	II.	Champagh
Anthony Tayles	Millong Took	603 East Bradley Ave	Champaka	Champer's
Chusane More	Christine Moore	603 Eas FB rad ley Aus	Champaigner	Champaisn
4. A. markine Till	a-MARUARINETR	LE COZE-BRIADIES	Chang "	400
5. Missi Hemmuno	Chrissie Flemmings	763 Hedly Crest #3	Champ ,IL	Champ
6. Thuon M. PICKERS	Traves Trakes	Leoy Fureka	Chans "	Chemo
ADA Bighan	TO A. Bighan	905 N5th St	Man O	Chamn
Thullas Bajan	Phullis Richa	2463 & Runka	Thank	Chama
of Liky Frazier	Colorados	VI. E. Boadley Ale	menn III	Champ.
10. JM	SHI - B	19 FAMIL	Charp"	Chang
State of FWINDS	50/		ĺ	
Dounty of Champaign) SS.	•		
DONOLD DOOR	(Circulator's Name) do hereby co	ertify that I reside at 1019 C	ocKrave	1 West
,	1	ertily that i reside at 1 G2 ()	<u> </u>	<u>`</u> , m uie
City/Village/Unincorporated Area of	haw paign	_ (if unincorporated, list municipality	that provides postal s	service) (Zip
/505/ <u>12/12</u> , 556///	augh, State of I		years of age or older	
ige and qualified to vote in Illinois), that I a nore than 90 days preceding the last day c				
igning were at the time of signing the petit	tion registered voters of the poli			
espective residences are correctly stated, a	as above set forth.			
0	- 110 days	(Circulator's	· ,	
igned and sworn to (or affirmed) by	ZARLD.COBB	before me, on	3-2020	
	(Name of Circulator)	tinser	tmonth, day, year)	
(SEAL) CODY L DIVAN Official Seal			-1-0:	
Notary Public - State of Illinois My Commission Expires Aug 1, 2023	SHEET NO	(Notary Publi	ic's Signature)	
	**************************************			,

(NONPARTIS	AN - MUNICIPALITY O	THER THAN COMMISSION		
/ We, the undersigned, qualified voters in the	City of Ch		nty of Chairy	
State of Illinois do hereby petition	n that the name of	AZATZK D. COBE		o resides de (9 (82)
1619 COCK RAVEN WE	in the City, Town or Villa	ge of		
County of Charpera	State of Illinois, be pi	ary election to be held on	23,2021	date of prim
election); provided that if no primary election	rat the Consolidated Fisher on is required, the candidate's r	name will appear on the ballot at the	Consolidated Electic	n for election
said office and term.	on to roduined the comme			
	red term is stated here:	year unexpired term		
If required pursuant to 10 ILCS 5/10	J-5.1, complete the following (this in			
FORMERLY KNOWN AS(List	all names during last 3 years)		each name change)	
NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR VILLAGE	COUNTY
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	,IL	
i sieno Estulo.	AlbertLewis	402 E. Bradley Ave	Champ	(Mary
2. I ha leure	Ginger Lewis	407 E. Bradley Ave	Chanp	olamo
Manicante	MORRIS CAMPS=(303 Foxwell C	Champ "	quarix
4. Pount le Drunder	Kon Johnson	206 FlowWEll Ct	Chinp "	Mano
5. Charles Alperan	Shire Johnson	206 FOR WER CT	charp "	gravip
6.	Ste Polls	202 Somme	Chango "	ways
7. Janes Bourney	1 em Bouto	201 forwell	Charo	champ
8 AV BY	AJOWNS+LATTISED	205 Forwell	Champ	dance
9. h. a Chair	BO ITALDA HADRIS	700-11	Champ. IL	doup
10. Para () XUMAN	DEUTON MARKET	1000 1 0000000	Manip	CAMME
lord Munne	BREA /1/12/08	THE CONTRACTOR		
State of TUINOIS)) · SS.	·		11 hat
County of Champaigh) .	1/019	Lockron	2/L in the
1. HZARKO COBBS	(Circulator's Name) do hereby	•		, 11 111
City/Village/Unincorporated Area of	Mempaigh	(if unincorporated, list municipalit		
Code) (1821, County of Cha	Malgn, State of	TUNIS that I am 1	8 years of age or old	mv presence, r
age and qualified to vote in Illinois), that I	am a citizen of the United State	es, and that the oignment	knowledge and belie	ef the persons
- alaning ware of the time (II Signilly life be	filloff regional receive and re-	olitical division in which the candida	seeking elective	· ·
respective residences are correctly stated	, as above set form.		*	Management of the State of the
		(Circulator	's Signature)	
4 /	TZARKD. COBK	35 //-	23-2020	
Signed and sworn to (or affirmed) by	(Name of Circulator)	before me, on	ert-month, day, year)	
· ·	(1400110 01 01 01 01 01 01	h		
(SEAL) CODY L DIVAN Official Seal		(Notary Po	ıblic's Signature)	
Notary Public - State of Illinois My Commission Expires Aug 1, 2023	SHEET NO			

SBE No. F

(NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)					
We, the undersigned, qualified voters in the	of Co	Manyangn in the Cou	enty of Ulau	Marian	
obets of Illiania de haraby petition that the name of IAZAZKO COBBS who resides					
169 Lockravenace		- e		de <u>(0</u> 1821	
County of Champanay		laced upon the ballot as a candid	ate for nomination	for the office (date of prim	
City Council District:	1_at the Consolidated Prima			•	
election); provided that if no primary election	on is required, the candidates i	lattle will appear of the pallot at the	Components a micros		
said office and term. A Full Term is sought, unless an unexpl	red term is stated here:	year unexpired term			
If required pursuant to 10 ILCS 5/10	0-5.1, complete the following (this in	formation will appear on the ballot)			
FORMERLY KNOWN AS	all names during last 3 years)	TIL NAME CHANGED ON(List date of	each name change)		
NAME (List	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	COUNTY	
(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COOMIT	
Creopart Vetticen	Creggin Johnson	-1108 D Hickory	Clamp "	Claren	
2/2/2010	arm Cotherwa	1187 UTION	Mayo	Mar	
3	Tony Brown	1608 Willember	changet	Openo	
4. Day Brown	Rose Prat	1513 Hedgero	Caux O"	O Jours	
5. (MAT) DO	CAVUL ROBERS	1402 Williamsburg	Crown	Potento	
.6.	50 /s	(1)	Charp, IL	Quanto	
- Charach weedly	(1880) 10 gall	17001/1	Mayo "	Olono	
Got Ane	130/ Ha	1508 11800	CACO	DI.	
Thurst	Diane Pge	1208 NOTH (WORLD BY	wit Creey.	Charles	
Lavel that	LAVEILYRATT	1210 Nuethward Pho Sam	Chemp	porte	
Belorgh fatt	Deborah KATT	4 1 1 /	Oh Muf.	Charp	
State of IUINOIS)					
SS.					
I, MZARKO, COBS (Circulator's Name) do hereby certify that I reside at 109 (oxokrave in the					
City/Village/Unincorporated Area of Character (if unincorporated, list municipality that provides postal service) (Zip					
1 (Am) The that I am 18 years of age or older (or 17 years					
age and qualified to vote in Illinois), that I	am a citizen of the United State	s, and that the signatures on this sh genuine and that to the best of my	ieet were signed in n knowledge and belie	ny presence, r If the persons	
signing were at the time of signing the pet	illiou Ledizietea voierz or me ba	plitical division in Which the candidat	e is seeking elective	office, and the	
respective residences are correctly stated,	as above set form.	((
(Circulator's Signature)					
Visit in the Color					
Signed and sworn to (or affirmed) by					
(Name of Oriodiator)					
(SEAL) CODY L DIVAN Official Seal Notary Public - State of Illinois Notary Public - State of Illinois Notary Public - State Aug 1, 2023					
Notary Public - State of Infloor My Commission Expires Aug 1, 2023 SHEET NO.					

X...BIND HERE...X £5/10-3.1, 10-4, 10-5.1 Revised March 20 SBE No. F CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM) We, the undersigned, qualified voters in the who resides do hereby petition that the name of Zip Code (1921 1291 Pu Wain the City, Town or Village of ___ State of Illinois, be placed upon the ballot as a candidate for nomination for the office Lat the Consolidated Primary election to be held on FCD 23, 2621 (date of prim County of election); provided that if no primary election is required, the candidate's name will appear on the ballot at the Consolidated Election for election said office and term. A Full Term is sought, unless an unexpired term is stated here: year unexpired term If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot) UNTIL NAME CHANGED ON FORMERLY KNOWN AS (List date of each name change) (List all names during last 3 years) CITY, TOWN OR STREET ADDRESS OR VOTER'S PRINTED COUNTY NAME VILLAGE RR NUMBER NAME (optional) (VOTER'S SIGNATURE) 8. State of SS. (Circulator's Name) do hereby certify that I reside at 1619 Lockraven (if unincorporated, list municipality that provides postal service) (Zip City/Village/Unincorporated Area of

1 MU1 5 that I am 18 years of age or older (or 17 years 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, r more than 90 days preceding the last day of filing of the petitions and are genuine and that to the best of my knowledge and belief the persons signing were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and the respective residences are correctly stated, as above set forth.

(Circulator's Signature)

Signed and sworn to (or affirmed) by

11-23-2020 Insert month, day, year)

(Name of Circulator)

(SEAL) CODY L DIVAN Official Seal Notary Public - State of Illinois My Commission Expires Aug 1, 2023

SHEET NO

(Notary Public's Signature)

Revised March 20 SBE No. F

(NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)					
We, the undersigned, qualified voters in the County of Champagn					
	State of Illinois, do hereby petiti	on that the name of	AZARK D. COBR	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	ho resides
_	1419 Lock RAVENW		age of <u>Champar</u>	Zip Co	ode (<u>() (&21</u>
9	County of Champaigi		placed upon the ballot as a candid	- 7	
7	. ,	•	ary election to be held on	•	
	election); provided that if no primary elect	tion is required, the candidate's i	name will appear on the ballot at the	Consolidated Election	on tor election
	aid office and term. A Full Term is sought, unless an unexp	pired term is stated here:	year unexpired term		
•		0-5.1, complete the following (this in			
	FORMERLY KNOWN AS	UN ⁻ t all names during last 3 years)	TIL NAME CHANGED ON	each name change)	
	NAME	VOTER'S PRINTED	STREET ADDRESS OR	CITY, TOWN OR	
	(VOTER'S SIGNATURE)	NAME (optional)	RR NUMBER	VILLAGE	COUNTY
	1. Quento / bex	Teamth flows	303 ENLI/	Claryp,"	Clamo
	2 France Hobardsk	Jaro Hallook	408 N. Second	change	Clap
	2 mmle	KILA MALER	301 NELSON	Charge ,IL	Chan
	4 hilly Horizan	Whitho Hower	1305 Suprie leber ed	Almont III	Proses.
Q	Chair Harres	Theila Horrias	m ac	al "L	allow
	6. 10 ling Sortin	John Caraffor	1309 Summit KilgeR	Champ. IL	Chery
	Mireldin Carta	Cerality Merker	1600 Eumoral Ridge	Chargo ,IL	Mont
	Bibart Carter	Robert Carter	1602 Sumit Rilge	Clamp "	Chang
	"Shaletu Whight	Shaleta Wmahr	1607 Sunnit Royeld	Champ "	Champ
	10 Randshia Foy	Ranshia Foy	160 Summit Redge Pol	Champ"	Chang
State of <u>TUINOIS</u>					
County of Champaign) SS.					
Ι,	ACARK D. COBES	(Circulator's Name) do hereby co	ertify that I reside at 1019 (ockrave	in the
City/Village/Unincorporated Area of (if unincorporated, list municipality that provides postal service) (Zip					
Code) [0] 62], County of [1] C					
(Circulator's Signature)					
	V) •	DIAMILYO MARA	1/ 2	3- 2020	
Sig	gned and sworn to (or affirmed) by	(Name of Circulator)	before me, on	tmonth, day, year)	<u> </u>
	(OTAL)- a -	(Manie di Onodiator)	1	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	CODY L DIYAN	. ,	(Notary Pub	lic's Signature)	
	Official Seal Notary Public - State of Illinois My Commission Expires Aug 1, 2023	SHEET NO.	1		

Suggest Revised March 20

SBE No. F

(NUNPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)					
We, the undersigned, qualified voters in the County of Changerian in the County of Changerian .					
State of Illinois, do hereby petition that the name of HOARK DOBBS , who resides					
(A) . A	in the City, Town or Villa	· · · · · · · · · · · · · · · · · · ·		ode (Q1 <u>82.1</u>	
County of Champang		laced upon the ballot as a candid			
election); provided that if no primary elect		ary election to be held on		(date of prim	
said office and term.	ion io required, the editaldate or	tatio vill apposi on the ballet at the	COMBONIQUES ENGLIS		
A Full Term is sought, unless an unexp					
If required pursuant to 10 ILCS 5/1	0-5.1, complete the following (this in	formation will appear on the ballot)			
(List	all names during last 3 years)	(List date of	each name change)	·	
NAME	VOTER'S PRINTED	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY	
(VOTER'S SIGNATURE)	NAME (optional)	- 1	.1L		
Ronda Jones	Kanala It	1316 Williamsburg	ChampasgnI	ChampA	
2. 7-R	DORIAN ROBINSON	1501 hedge Rd	Champ "	Champ	
3. Bar h	Belondasnith	1207 Williamsburg	charif	Chan	
Destroy Crown	Deauna Carr	1207 Williamsbure	, Chanp IL	Chang	
Thante an	Shante Carr	1207 Williamsbur	5 Changill	Charg	
Ellerie Com	Demetras (av	1207 Willianson	(hamp"	change	
7. open Daven	Issur Dougts	1206 williamshurg	Charp "	chang	
8. Gloria Stone	Glarie Stone	1206 Williamshra	Champ "	Chanp	
9. Gennifer Bishop	Jennifer Bishop	1603 Mongolden	Changaign	Champ.	
Marin Burn	HERMAN BESTAP	1503 MARIGOLD	CHAIMP ,IL	CHAND	
State of TUNOIS)					
County of Champarin) ss.					
1. AZARKD. COBBS	(Circulator's Name) do hereby ce	ertify that I reside at <u>l(QlQ (</u>	ock Rav	e, in the	
City/Village/Unincorporated Area of	chaupaign	_ (if unincorporated, list municipality		service) (Zip	
Code) (21821, County of Champasan, State of TCLINGS that I am 18 years of age or older (or 17 years 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, r					
more than 90 days preceding the last day of filing of the petitions and are genuine and that to the best of my knowledge and belief the persons signing were at the time of signing the petition registered voters of the political division in which the candidate is seeking elective office, and the					
respective residences are correctly stated, a	as above set form.		17		
		(0)-1-1-1-1	Cimelant	<u> </u>	
	11 - 1110 Ann	(Circulator's			
Signed and sworn to (or affirmed) by	HLHRKD, COB	before me, on	Z3-Z020		
	(Name of Circulator)	Inser	rtmonth, day, year)		
(SEAL) CODY L DIVAN Official Seal		(Notary Pub	lic's Signature)		
Notary Public - State of Illinois My Commission Expires Aug 1, 2023	SHEET NO.	[O	o Oignatule)	and the second s	

My Commission Expires Aug 1, 2023

SBE No. F

Revised March 20

We, the undersigned, qualified voters in th	e City of C	Mampaign in the Co	ounty of Man	paqu.
State of Illinois, do hereby petition		AZARK D. COBE	35°, w	no resides
1019 COKRAVEN W	in the City, Town or Vill			ode 61821
County of Mainpaigr		placed upon the ballot as a candi	/	
		ary election to be held on		
election); provided that if no primary elect				
said office and term.	A 1			
A Full Term is sought, unless an unexp If required pursuant to 10 ILCS 5/1	ired term is stated here:	year unexpired term formation will appear on the ballot)		
FORMERLY KNOWN AS		TIL NAME CHANGED ON		-
	all names during last 3 years)	(List date of STREET ADDRESS OR	of each name change) CITY, TOWN OR	
NAME (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	RR NUMBER	VILLAGE	COUNTY
1-Tamika Anteron	Tanika Andrisan	1506 marigald. Liv	Champ "	Champ
2. Lavarun Walker	Kavarion Walker	1504 Manigold hu	Cham "	Change
Epstek Joedown 2 -	JoHN H. THE 1500 SV	141 SAULADR	Chara, "L	May O
4.			,ÎL	
5.			,IL	
6.			,iL	
7.			,IL	
8.			,IL	,
9.			,11.	· ····
10.			,IL	
State of FUINDIS)		· · · · · · · · · · · · · · · · · · ·	
County of Champaign) SS.			المنتسد به
1, AZANKO COBBS	(Circulator's Name) do hereby c	certify that I reside at 11019 (ock RAV	<u>en</u> , in the
City/Village/Unincorporated Area of		(if unincorporated, list municipality		
Oliva	- 1	LUNOIS that I am 18		
Code)(0182), County of age and qualified to vote in Illinois), that I a	m a citizen of the United States	s, and that the signatures on this sh	eet were signed in m	y presence, r
more than 90 days preceding the last day signing were at the time of signing the peti	of filing of the petitions and are	genuine and that to the best of my	knowledge and beliet e is seeking elective	the persons office, and the
respective residences are correctly stated,		And division in the dance of		,
•		(Circulator)	s Signature)	
Dismod and automate for officer - 1) his	AZANKO DOF	B before me, on	-23-2020	٠ -
Signed and sworn to (or affirmed) by	(Name of Circulator)		ert-month, day, year)	
(SEAL)		<u></u>		
CODY L DIVAN Official Seal	1 6	(Notary Pul	blic's Signature)	1 37 1 37 1 38 1 38
Notary Public - State of Illinois	SHEET NO. 🚺			