



City of
CHAMPAIGN

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

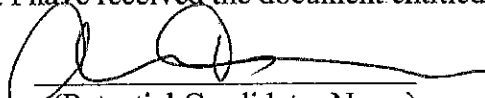
**CITY OF CHAMPAIGN
RECEIPT FOR FILING
CITY COUNCIL DISTRICT COUNCIL MEMBER**

To Be Completed By The Potential Candidate:

Petitioner's Name (Print): AZARK D. COBBBS
 Petitioner's Address: 1619 Lockraven West
 Petitioner's Phone No.: 217819-0036 Cell No. SAMS
 Fax No.: _____
 E-mail Address: ACOBBS12-Yahoo.COM
 Candidate For: CITY COUNCIL MEMBER DISTRICT # 1

Note: The City Clerk, or the Clerk's Representative, does not review the documents filed for completeness, accuracy, or timeliness on behalf of the Candidate.

I certify that I have received the document entitled "Notice of Obligation to Candidates."


 (Potential Candidates Name)

11-23-20
 (Date)

I have received notification of the Election Lottery. Initial here: _____

The following documents were received by the City Clerk's Office:

ITEM	CLERK'S INITIALS	DATE	TIME
1. Statement of Candidacy	<u>MLB</u>	<u>11-23-20</u>	<u>3:50 p.m.</u>
2. Petition (No. of Pages <u>11</u>)	<u>MLB</u>	<u>11-23-20</u>	<u>3:50 p.m.</u>
3. Receipt for Filing Statement of Economic Interest	<u>MLB</u>	<u>11-23-20</u>	<u>3:50 p.m.</u>
4. Loyalty Oath (Optional)	<u>MLB</u>	<u>11-23-20</u>	<u>3:50 p.m.</u>

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

City Council District 1
(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)

TYPE OR HAND PRINT

AZARK D. COBBS
Name
1619 LOCK RAVEN WEST
Address
Champaign IL 61821
City State Zip Code

FILED
NOV 19 2020
Aaron Ammons
CHAMPAIGN COUNTY CLERK

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 _____ UNTIL NAME CHANGED ON _____
(List all names during last 3 years) (List date of each name change)

STATE OF ILLINOIS)
County of Champaign) SS.

I, AZARK D. COBBS being first duly sworn (or affirmed), say that I reside at 1619 LOCK RAVEN WEST, in the City, Village, Unincorporated Area of Champaign

(if unincorporated, list municipality that provides postal service) Zip Code 61821, in the County of Champaign, State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/

Election to the office of City of Champaign City 1 Council Member District 1 in the City of Champaign
(Name of City, Village or Special District)

to be voted upon at the election to be held on Feb 23, 2021 (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 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 ballot for Nomination/Election to such office.

Azark Cobbs
(Signature of Candidate)

Signed and sworn to (or affirmed) by Azark Cobbs before me, on November 19, 2020
(Name of Candidate) (insert month, day, year)

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

Ethan John Harsha
(Notary Public's Signature)

STATEMENT OF CANDIDACY

NONPARTISAN

NAME: AZARK D. COBBS	OFFICE: City of Champaign City Council member District I <small>A Full Term Is sought, unless an unexpired term is stated here: ___ year unexpired term</small>
ADDRESS - ZIP CODE: 1619 LOCK RAVEN WEST	CITY, VILLAGE OR SPECIAL DISTRICT: City of Champaign, Illinois

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 _____ UNTIL NAME CHANGED ON _____
(List all names during last 3 years) (List date of each name change)

STATE OF ILLINOIS)
County of Champaign) SS.

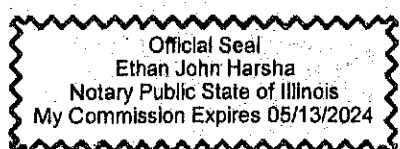
I, AZARK D. COBBS being first duly sworn (or affirmed), say that I reside at 1619 Lock Raven West, in the City, Village, Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) Zip Code 61821, in the County of Champaign, State of Illinois; that I am a qualified voter therein, that I am a candidate for Nomination/Election to the office of City of Champaign City Council Member District 1 in the City of Champaign (Name of City, Village or Special District)

to be voted upon at the election to be held on Feb 23, 2021 (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 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 ballot for Nomination/Election to such office.

[Signature]
(Signature of Candidate)

Signed and sworn to (or affirmed) by Azark Cobbs before me, on November 19, 2020
(Name of Candidate) (insert month, day, year)

(SEAL)



[Signature]
(Notary Public's Signature)

ATTACH TO PETITION

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, AZARK D. COBBS, 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.

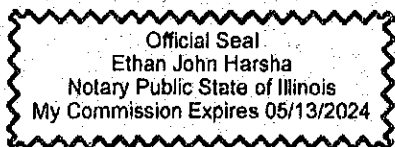
[Signature]
(Signature of Candidate)

Signed and sworn to (or affirmed) by Azark Cobbs before me,
(Name of Candidate)

on November 19, 2020
(insert month, day, year)

[Signature]
(Notary Public's Signature)

(SEAL)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign, State of Illinois, do hereby petition that the name of AZARK D. COBBS, who resides at 1619 Lock Raven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office of City Council District 1 at the Consolidated Primary election to be held on Feb 23, 2021 (date of primary 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: 4 year unexpired term
 If required pursuant to 10 ILCS 5/10-5.1, 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 (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>James Pettigrew</u>	<u>James Pettigrew</u>	<u>205 Nelson Ct</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Quinn Pettigrew</u>	<u>Bonnie J. Pettigrew</u>	<u>205 Nelson Ct</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>James A. Wilson</u>	<u>JAMES A WILSON</u>	<u>371 E Washington</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Vincent Higgs</u>	<u>Vincent Higgs</u>	<u>205 E Washington</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Tamara M. Davidson</u>	<u>Tamara M. Davidson</u>	<u>1615 Lock Raven Rd</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Darrell Wesley</u>	<u>Darrell Wesley</u>	<u>1615 Lock Raven Rd</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Artina Lee</u>	<u>Artina Lee</u>	<u>1616 Lock Raven Rd</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Naomi Dixon</u>	<u>NAOMI DIXON</u>	<u>1618 LOCKRAVEN</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Attrice Dixon</u>	<u>ATTRICE DIXON</u>	<u>1618 LOCKRAVEN</u>	<u>Champaign, IL</u>	<u>Champaign</u>
<u>Maurice Jake</u>	<u>Maurice Jake</u>	<u>1617 Lock Raven Rd</u>	<u>Champaign, IL</u>	<u>Champaign</u>

State of ILLINOIS)
 County of Champaign) SS.

I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lock Raven in City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821 County of Champaign State of ILLINOIS

that 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 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 their respective residences are correctly stated, as above set forth.

AZARK D. COBBS
 (Name of Circulator)

[Signature]
 (Circulator's Signature)

Signed and sworn to (or affirmed) by _____ before me, on 11-23-2020
 (Insert month, day, year)

[Signature]
 (Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign State of Illinois, do hereby petition that the name of AZARK D. COBBS who resides 1619 Lockrauer West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council District at the Consolidated Primary election to be held on Feb 23, 2021 (date of prim 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.

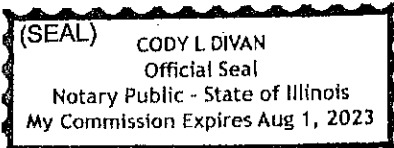
A Full Term is sought, unless an unexpired term is stated here: 4 year unexpired term If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot)

FORMERLY KNOWN AS UNTIL NAME CHANGED ON (List all names during last 3 years) (List date of each name change)

Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of Illinois County of Champaign I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lockrauer West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of Illinois that I am 18 years of age or older (or 17 year 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, 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 their respective residences are correctly stated, as above set forth.

Signatures of Azark D. Cobbs and Notary Public, along with the date 11-23-2020.



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign State of Illinois, do hereby petition that the name of AZARK D. COBBS who resides 1619 Look Raven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council District 4 at the Consolidated Primary election to be held on Feb 23, 2021 (date of prim 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: 4 year unexpired term If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot)

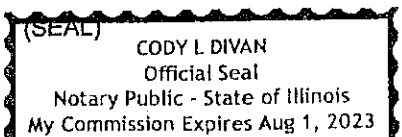
FORMERLY KNOWN AS UNTIL NAME CHANGED ON (List all names during last 3 years) (List date of each name change)

Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of ILLINOIS County of Champaign I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Look Raven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of ILLINOIS 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, I 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 their respective residences are correctly stated, as above set forth.

Signed and sworn to (or affirmed) by AZARK D. COBBS before me, on 11-23-2020 (Name of Circulator) (Insert month, day, year)

(Circulator's Signature) (Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign State of Illinois, do hereby petition that the name of AZARK D. COBBS, who resides 1619 Lock Raven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council member District 1 the Consolidated Primary election to be held on Feb 23, 2021 (date of prim 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: 4 year unexpired term If required pursuant to 10 ILCS 5/10-5.1, 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)

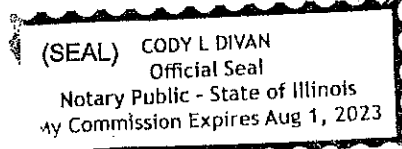
Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of ILLINOIS County of Champaign I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lock Raven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of ILLINOIS

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 th respective residences are correctly stated, as above set forth.

AZARK D. COBBS (Circulator's Signature)

Signed and sworn to (or affirmed) by before me, on 11-23-2020 (Name of Circulator) (Insert month, day, year)



(Notary Public's Signature)

CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign and State of Illinois, do hereby petition that the name of AZARK D. COBBS, who resides at 1619 Lockraven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office of City Council District 1 at the Consolidated Primary election to be held on February 23, 2020 (date of primary election); provided that if no primary election is required, the candidate's name will appear on the ballot at the Consolidated Election for election to said office and term.

A Full Term is sought, unless an unexpired term is stated here: 4 year unexpired term If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot)

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State of Illinois County of Champaign

AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lockraven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of Illinois

that 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 of 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 registered voters of the political division in which the candidate is seeking elective office, and their respective residences are correctly stated, as above set forth.

(Circulator's Signature)

signed and sworn to (or affirmed) by AZARK D. COBBS before me, on 11-23-2020 (Name of Circulator) (insert month, day, year)

(Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign, State of Illinois, do hereby petition that the name of AZARK D. COBBS who resides 1619 Lock Raven West in the City, Town or Village of Champaign Zip Code 61821

County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council District 1 at the Consolidated Primary election to be held on Feb 23, 2021 (date of primary 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: 4 year unexpired term If required pursuant to 10 ILCS 5/10-5.1, complete the following (this information will appear on the ballot)

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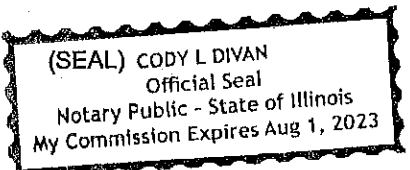
State of ILLINOIS County of Champaign I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lock Raven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of ILLINOIS 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, 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 their respective residences are correctly stated, as above set forth.

(Circulator's Signature)

Signed and sworn to (or affirmed) by AZARK D. COBBS before me, on 11-23-2020 (Name of Circulator) (insert month, day, year)

(Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign State of Illinois, do hereby petition that the name of AZARK D. COBBS who resides 1609 Lockraven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council District 1 at the Consolidated Primary election to be held on Feb 23, 2021 (date of prim 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.

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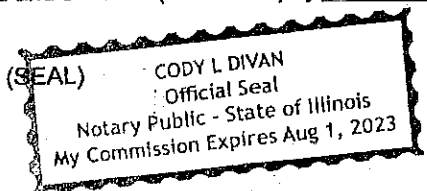
Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of Illinois County of Champaign I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1609 Lockraven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821 County of Champaign State of Illinois 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 th respective residences are correctly stated, as above set forth.

(Circulator's Signature)

Signed and sworn to (or affirmed) by AZARK D. COBBS before me, on 11-23-2020 (Name of Circulator) (Insert month, day, year)

(Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign, State of Illinois, do hereby petition that the name of AZARK D. COBBS, who resides at 1619 Lock Raven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office of City Council District 1 at the Consolidated Primary election to be held on Feb 23, 2021 (date of primary 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: 4 year unexpired term
 If required pursuant to 10 ILCS 5/10-5.1, 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 (VOTER'S SIGNATURE)	VOTER'S PRINTED NAME (optional)	STREET ADDRESS OR RR NUMBER	CITY, TOWN OR VILLAGE	COUNTY
<u>Billy Molk</u>	<u>Billy Molk</u>	<u>1201 N Willis</u>	<u>CHAMPAIGN IL</u>	<u>Champ</u>
<u>Audrey Molk</u>	<u>Audrey Molk</u>	<u>1201 N Willis</u>	<u>Champaign IL</u>	<u>Champ</u>
<u>JF EYUKE</u>	<u>JF EYUKE</u>	<u>1613 W Lock Raven</u>	<u>Champaign IL</u>	<u>Champaign</u>
<u>Rodney Howard</u>	<u>Rodney Howard</u>	<u>700 E Main St</u>	<u>Urbana IL</u>	<u>Champ</u>
<u>Willie Claiborne</u>	<u>Willie Claiborne</u>	<u>410 S 4th</u>	<u>Champ IL</u>	<u>Champ</u>
<u>Rodney Claiborne</u>	<u>Rodney Claiborne</u>	<u>410 E Hall St</u>	<u>Champ IL</u>	<u>Champ</u>
<u>Earlene Smith</u>	<u>Earlene Smith</u>	<u>402 E Church</u>	<u>Champ IL</u>	<u>Champ</u>
<u>Antoinette Taylor</u>	<u>Antoinette Taylor</u>	<u>403 N 3rd St</u>	<u>Champ IL</u>	<u>Champ</u>
<u>Bonnie Ware</u>	<u>Bonnie Ware</u>	<u>408 N Church</u>	<u>Champ IL</u>	<u>Champ</u>
<u>Stephen Clark</u>	<u>Stephen Clark</u>	<u>428 N Church</u>	<u>Champ IL</u>	<u>Champ</u>

State of ILLINOIS)
 County of Champaign) SS.

I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lock Raven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of ILLINOIS

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 th respective residences are correctly stated, as above set forth.

[Signature]
 (Circulator's Signature)

Signed and sworn to (or affirmed) by AZARK D. COBBS before me, on 11-23-2020
 (Name of Circulator) (Insert month, day, year)

[Signature]
 (Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign State of Illinois, do hereby petition that the name of AZARK D. COBBS, who resides 1619 Lock Raven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council District at the Consolidated Primary election to be held on Feb 23, 2021 (date of prim 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: 4 year unexpired term If required pursuant to 10 ILCS 5/10-5.1, 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)

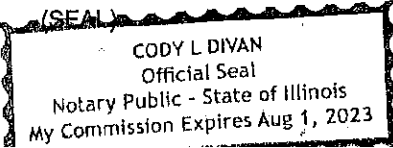
Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Contains 10 rows of voter information.

State of Illinois County of Champaign I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lock Raven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of Illinois 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 th respective residences are correctly stated, as above set forth.

(Circulator's Signature)

Signed and sworn to (or affirmed) by AZARK D. COBBS before me, on 11-23-2020 (Name of Circulator) (Insert month, day, year)

(Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign State of Illinois, do hereby petition that the name of AZARK D COBBS who resides 1619 Lock Raven West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council District I at the Consolidated Primary election to be held on Feb 23, 2021 (date of prim 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: 4 year unexpired term
If required pursuant to 10 ILCS 5/10-5.1, 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)

Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Rows include voters like Ronda Jones, DORIAN ROBINSON, Belinda Smith, Deanna Carr, Shante Carr, Demetrius Carr, Isziah Dougls, Gloriz Stone, Jennifer Bishop, HERMAN BISHOP.

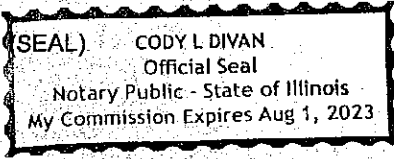
State of ILLINOIS
County of Champaign } SS.

I, AZARK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lock Raven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of ILLINOIS 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 th respective residences are correctly stated, as above set forth.

(Circulator's Signature)

Signed and sworn to (or affirmed) by AZARK D. COBBS before me, on 11-23-2020 (Name of Circulator) (Insert month, day, year)

(Notary Public's Signature)



CONSOLIDATED PRIMARY PETITION (NONPARTISAN - MUNICIPALITY OTHER THAN COMMISSION FORM)

We, the undersigned, qualified voters in the City of Champaign in the County of Champaign State of Illinois, do hereby petition that the name of AZARIK D. COBBS who resides 1619 LOCKRAVEN West in the City, Town or Village of Champaign Zip Code 61821 County of Champaign State of Illinois, be placed upon the ballot as a candidate for nomination for the office City Council District 1 at the Consolidated Primary election to be held on Feb 23, 2021 (date of prim 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: 4 year unexpired term If required pursuant to 10 ILCS 5/10-5.1, 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)

Table with 5 columns: NAME (VOTER'S SIGNATURE), VOTER'S PRINTED NAME (optional), STREET ADDRESS OR RR NUMBER, CITY, TOWN OR VILLAGE, COUNTY. Rows include Tamika Anderson, Karavion Walker, and John H. Jackson Sr.

State of Illinois County of Champaign I, AZARIK D. COBBS (Circulator's Name) do hereby certify that I reside at 1619 Lock Raven West in the City/Village/Unincorporated Area of Champaign (if unincorporated, list municipality that provides postal service) (Zip Code) 61821, County of Champaign, State of Illinois 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 AZARIK D. COBBS before me, on 11-23-2020 (Name of Circulator) (Insert month, day, year)

(Notary Public's Signature)

