



To the Board of Elections:

I, the undersigned, do hereby state that I am a duly enrolled voter of the Democratic Party and entitled to vote at the next primary election of such party, to be held on September 12th, 2017; that my place of residence is truly stated opposite my signature hereto, and I do hereby designate the following named person (or persons) as a candidate (or candidates) for the nomination of such party for public office or for election to a party position of such party.

NAME(S) OF CANDIDATE(S)	PUBLIC OFFICE(S)	PLACE(S) OF RESIDENCE
MARK D. LEVINE	Council Member from the 7th Council District New York County City of New York	86 Fort Washington Avenue, Apt. 1A New York, NY 10032

I DO HEREBY APPOINT - NAMES

NY Prints 646-502-7330 Al Handell/Paul Bader

ADDRESSES
Adriano Espaillat
Scott M. Stringer
Letitia James
Herman D. Farrell, Jr.
Ivelisse Suarez
Adriano Espaillat
Scott M. Stringer
Sco

In witness whereof,	I have hereunto set my hand, the day and	year placed opposite my signature.	
	Name of Signer		
	Signature Required	The state of the s	
Date	(printed name may be added)	Residence	County
1. 6/17 ,2017	Le May	New York DY 10031	New York
Printed Name →	RADUL R. MUNDO	Borough of Manhattan, City of New York	
2. Printed Name	Saul Bos	6 40 Juursvell Borough of Manhattark City of New York	New York
3. (12 .2017	Rosalva Toribis	GYO PWYSIDE DE THIR NY XY Borough of Manhattan, City of New York	New York
4.6/17/17.2017	Lailes & Founds	649 BIVEYS LAP DRIVE APP BOY NY NY 10031 Borough of Manhatian, City of New York	New York
Timper i mine	-IINTO STONIBLE	CYO Niverside DV, 562	
5. 6-17 ,2017	thily sandsly	NY, NY 10031	New York
Printed Name →		Borough of Manhattan, City of New York	
6. 6-19- ,2017	San Brozal	640 Riverside Inve , 10th	New York
Printed Name →	Sean Bronzell	Borough of Manhattan, City of New York	
7.6-19 ,2017	Sife	640 Riverside Drive 1162	New York
Printed Name →	Dianna Rosario	Blood of Manhartan, Kirly ob New York	
8. 6-19, 2017	Offin Ahr	Borough of Manhattan, City of New York	New York
Printed Name →	Citt Milah	640 livet te die 31	
96 CG .2017	By A Palarce	New York, NY 10071 Borough of Manhattan, City of New York	New York
Printed Name →	(MAR DOLLENCE	F / B 11 / /	
10. 6 9 72017	ancilla mote	640 KSD HUF HY BY 10031	New York
Printed Name →	the Awilda Marte,	Borough of Manhattah, City of New York	
	STATEMENT OF	WITNESS	

Printed Name	HWING MUTT	and the state of t
	STATEMEN	T OF WITNESS
1,	(Name of Witness)	state: I am a duly qualified voter of the State of New York
		sheet containing (Fill in Number) signatures, subscribed the same in
my presence on the dates. I understand that this s	above indicated and identified himself or hers	elf to be the individual who signed this sheet. es as the equivalent of an affidavit and, if it contains a material false
Date:	, 2017	Signature of Witness
	Witness Identi	fication Information
The following information		pard of Elections in order for this petition sheet to be valid.
The following information	Town or City	County
	City of New York	New York

SHEET NO. _





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MARK D. LEVINE	Council Member from the 7th Council District New York County City of New York	86 Fort Washington Avenue, Apt. 1A New York, NY 10032

I DO HEREBY APPOINT - NAMES
Adriano Espaillat
Scott M. Stringer

ADDRESSES 62 Park Terrace West, Apt. A87, New York, NY 10034 25 Broad Street, Apt. 125, New York, NY 10004

1	Herman D. Farrell, Jr. 159-0	afayette Avenue, Brooklyn, NY 11238 0 Riverside Drive West, Apt. 7G, New York, NY 10032 rt Washington Avenue, Apt. 1A, New York, NY 10032	
all of whom are enrolled vo	velisse Suarez 86 Fo ters of the Democratic Party as a Committee to fill	vacancies in accordance with the provisions of the Elect	ion Law.
In witness whereof,	I have hereunto set my hand, the day	and year placed opposite my signature.	
	Name of Signer		
Date	Signature Required (printed name may be added)	Residence	County
1 - 1	Blance Busois	640 RIVERSIDE DR # 10H	
16/15 (,2017	0)	New YORK, N. Y. C. 21	New York
Printed Name →	Blancos	Borough of Manhattan, City of New York	
2.6/15 ,2017	Lanea Denma	New York NY 10031	New York
Printed Name →	LAURA TURMA	Borough of Manhattan, City of New York	
1	1. 1. 2021	640 Fiverside Drive 1	
3. 6 1 4 ,2017	2000	New York, 44 10031	New York
Printed Name →	Deboray Slake	Borough of Manhattan, City of New York	
4. 6/16 ,2017	Maria Malaga	640 Elverside Vive	New York
Printed Name →	Wan No.	Borough of Manhattan, City of New York	
1-11-	1 6 100	640 RIVERSIDE Dr. #IM	
5. 0// ,2017	U (4) (1/4/1) (6/4)	110 110 1002	New York
Printed Name →	DAVIO BLAIKE	Borough of Manhattan City of New York	
6.6/17/17,2017	Robert Francisco	3 640 RIVERSIDE DA	New York
Printed Name →	KOPZOL JENNINGS	Thorough of Marisher an May of Melon Coris	
(117	Blooding 4 Knight	640RWARSIDE DROP	-
7.6 1 , 2017	Dividice 11-17197	NROW YORK N.Y. 10.031	New York
Printed Name →	Dionale H. Knigh	Borough of Manhattan/City of New York (40 hives de drive la	
86/17 ,2017	Patricis a. May	1 10/1/01	New York
Printed Name →		Borough of Manhattan, City of New York	
-	- 4	640 Riverside Drive 851	
	Leve Callosden	NEW YORK NY 10031	New York
Printed Name		Borough of Manhattan, City of New York	
10.6/17 ,2017	Maloria Rudius. 8	140 PY 10031	New York
Printed Name →	Adalaise Rosnic	Borough of Manhattan, City of New York	
	STATEMENT	OF WITNESS	
ī		state: I am a duly qualified voter of the	he State of New York
1,	(Name of Witness)	state. I am a duty quanted voter of a	ne suce of fiew fork
and am an enrolled voter	of the Democratic Party. I now reside at	(Residence address, also post office if not identical)	New York, New York.
Each of the individuals v	whose names are subscribed to this petition sh	eet containing signatures, subscribed	the same in
	above indicated and identified himself or herself		
I understand that this	statement will be accepted for all purposes to the same penalties as if I had been duly swo	as the equivalent of an affidavit and, if it cont	ains a material false
Date:	2017		
2 3001 111111111111111111111111111111111		Signature of Witness	

Witness Identification Information

County

New York

SHEET NO.

The following information must be completed prior to filing with the Board of Elections in order for this petition sheet to be valid.

Town or City

City of New York





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NAME(S) OF CANDIDATE(S)	PUBLIC OFFICE(S)	PLACE(S) OF RESIDENCE
MARK D. LEVINE	Council Member from the 7th Council District New York County City of New York	86 Fort Washington Avenue, Apt. 1A New York, NY 10032
I DO HEREBY APPOINT - NAMES	ADDRESSES	

NY Prints 646-502-7330 Al Handell/Paul Bader

ADDRESES
Adriano Espaillat
Scott M. Stringer
Letitia James
Herman D. Farrell, Jr.
Ivelisse Suarez
Adriano Espaillat
Scott M. Stringer
Letitia James
Herman D. Farrell, Jr.
Livelisse Suarez
B6 Fort Washington Avenue, Apt. 17, New York, NY 10032
R6 Fort Washington Avenue, Apt. 17, New York, NY 10032
All of whom are enrolled voters of the Democratic Party as a Committee to fill vacancies in accordance with the provisions of the Election Law.

In witness whereof,	I have hereunto set my hand, the day an	d year placed opposite my signature.	
	Name of Signer		
Date	Signature Required	Desidence.	C
Date	(printed name may be added)	Residence	County
11,2	Mendez	1,100	
1. 6/28 ,2017	THAMA DAYS	640 Ruesale DRATE	New York
Printed Name →	menel	Redrough of Municattan/ City Gravew York	
1/20	000	1-1-0- 87-10	
2.0 (60 ,2017	J. Johnson	644 RSD#4C	New York
Printed Name →		Borough of Manhattan, City of New York	
(172	_	644 RSD #69	
3. 6 (60 , 2017	Maruel & Oronla	NYC (0031	New York
Printed Name →	MANUEL S. OROCHENA	Borough of Manhattan, City of New York	
1128	~	644 RSD #12F	
4. 6/60 ,2017		N, Y, N. Y 10631	New York
Printed Name →	SALVADOR OROCHENA	Borough of Manhattan, City of New York	
1/00	2 1	2011	
5.6/20 ,2017	Natosla 1.	(6004 RST) #41)	New York
Printed Name →		Boll Power and Lity of Mocion	
1100		644 (80) # 161	
6.6/28 ,2017			New York
Printed Name →		Borough of Manhattan, City of New York	THEW TOTAL
. I	WAN CLOPE	410 - 10 11	2.02
16/28 ,2017	An Some Jan	642 FM # 46	Now Voul
Printed Name >	0//	Was fork NT	New York
Frinted Name	ALDANIA Z. SEM	Borough of Manhattan, City of New York	Maria de la companya della companya
E /79 ,2017	(1. P. 1+		NT - N7 - 1
	(m) um	N7 PY (65X)	New York
Printed Name →	APIX CANUSOSIGMODS	Borough of Manhattan, City of New York	
6/22	Olgry. Soliedo.	694 RIVERSI DE DRIVETOF	
0.6/20 ,2017			New York
Printed Name →	DLGAM. SALCEBO -	Borough of Manhattan, City of New York	
1/20	Amolto Warre The	CUI ACC 1150	
10. 6 6 ,2017	Marco VIVIA	499KSN #3	New York
Printed Name →		Borough of Manhattan, City of New York	
	STATEMENT OF	WITNESS	
l,	(Name of Witness)	state: I am a duly qualified voter of the	e State of New York
and am an annallad			
and am an enfoned voter (of the Democratic Party. I now reside at		lew York, New York.

Each of the individuals whose names are subscribed to this petition sheet containing [Fill in Number] signatures, subscribed the same in my presence on the dates above indicated and identified himself or herself to be the individual who signed this sheet. I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn. Signature of Witness Witness Identification Information The following information must be completed prior to filing with the Board of Elections in order for this petition sheet to be valid. Town or City County City of New York New York

SHEET NO.



NAME(S) OF CANDIDATE(S)

Democratic Party Designating Petition - New York County



PLACE(S) OF RESIDENCE

To the Board of Elections:
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PUBLIC OFFICE(S)

MARK D.	LEVINE	Council Member 7th Council I New York Co City of New	District ounty	86 Fort Washington New York, N	
	Adriano Espaillat Scott M. Stringer Letitia James Herman D. Farrell, Jr. Ivelisse Suarez	25 Broad 296 Lafay 159-00 Ri	Cerrace West, Apt. A87 Street, Apt. 125, New vette Avenue, Brooklyn verside Drive West, A Vashington Avenue, Ar	n, NY 11238 pt. 7G, New York, NY 10032	
		et my hand, the day and			LON LAW.
Date	Nam Signat	e of Signer ure Required me may be added)		esidence	County
Printed Name →	Juana	m marte	NY N Borough of Manh	10031 10031 10031	New York
6/21/17, 2017 Printed Name →	Chuz ble	y Ta ==	640 Riv	VA LOCE 1 434 wattan, City of New York	New York
Printed Name	Chall	the state of	640 Rver Na Youk Borough of Manh	side 4C 1007/ lattan, City of New York	New York
V 27 / 1,2017 Printed Name →	Dill	San al	Borough fof Manh	ulsdu 25/ ulsdu 25/ attan, dty of New York	New York
6 28 ,2017 Printed Name →	gleras ALONA	SM M	64020	e / b D N N / saturation of New York	New York
UZ8,2017 Printed Name →	ALSTOA	MANDONNAN	Ce 40Rue Borough of Manh	APTIZE APTIZE ARTICLE ARTICLE APTIZE ARTICLE ARTICLE APTIZE ARTICLE ARTICLE ARTICLE APTIZE ARTICLE ARTICLE APTIZE ARTICLE	New York
6/2€ ,2017 Printed Name →	TANI	ATAGA	640 PST Borough of Manh	11 F) MY NY WOON attan, City of New York	New York
6/28/ ,2017 Printed Name →	Elain (enchi.	Par tak	NESTER TO NY NGM attan, City of New York	New York
6/28/17, 2017 Printed Name →	Lettie b.	Samuels	640 Revers Nav york Borough of Manha	NY 10031 attan, City of New, York	New York
Printed Name →	Carnon	tesecla.	Na Your Borough of Manha	SSICE TO THE PROPERTY OF AUTOMOTION OF THE PROPERTY OF THE PRO	New York
		STATEMENT OF	WITNESS		
nd am an enrolled voter o	(Name of Witness) of the Democratic Party.	I now reside at(Resi		a duly qualified voter of th	
		ribed to this petition sheet co		signatures, subscribed t	
by presence on the dates above indicated and identified himself or herself to be the individual who signed this sheet. Understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.					

Witness Identification Information

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Town or City

City of New York

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County New York

Signature of Witness

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ADDRESSES
Adriano Espaillat
Scott M. Stringer
Letitia James
Herman D. Farrell, Jr.
Ivelisse Suarez

all of whom are enrolled voters of the Democratic Party as a Committee to fill vacancies in accordance with the provisions of the Election Law.

In witness whereof,	I have hereunto set my hand, the day and	l year placed opposite my signature.	
	Name of Signer		
Date	Signature Required (printed name may be added)	Residence	County
1. 6 28 ,2017 Printed Name →	Mariene Reid MARIENE REID	101414 RUSERS1108 10R. Borough of Manhattan, City of New York	New York
2. Dre U , 2017 Printed Name →	Lyste Morrison Hokkins	640 LSP # 1ET NEW YORL N	New York
3. 6/2 8 ,2017 Printed Name →	Clice Fiser	644 Repercede Dreve Schwyrkhod 3/8F Borgago of Manhattan, City of New York	New York
4. 6/28/17, 2017 Printed Name >	Pyna Glasa	644 RIS. S # 12 E Blookingh of Marihaltah, City of Stew 3k/	New York
Alejan S J297	Hand of the second	644 RIVERSIAND IN 12B WENGUSH WY 1003.1. Borough of Manhattan, City of New York	New York
5.6 [28 .2¢17 Printed Name →	in States	644 RSP 9E 10031 Borough of Manhattan, City of New York	New York
7. , 2017 Printed Name →	J	Borough of Manhattan, City of New York	New York
8. , 2017 Printed Name →		Borough of Manhattan, City of New York	New York
9. , 2017 Printed Name →		Borough of Manhattan, City of New York	New York
10. , 2017		Borough of Manhattan, City of New York	New York
Printed Name >	STATEMENT OF		

STATEMENT OF WITNESS state: I am a duly qualified voter of the State of New York and am an enrolled voter of the Democratic Party. I now reside at . signatures, subscribed the same in Each of the individuals whose names are subscribed to this petition sheet containing (Fill in Nu my presence on the dates above indicated and identified himself or herself to be the individual who signed this sheet I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn. Signature of Witness Witness Identification Information The following information must be completed prior to filing with the Board of Elections in order for this petition sheet to be valid.

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MARK D. LEVINE	Council Member from the 7th Council District New York County City of New York	86 Fort Washington Avenue, Apt. 1A New York, NY 10032
I DO HEREBY APPOINT - NAMES Adriano Espaillat	ADDRESSES 62 Park Terrace West, Apt.	

Letitia James

Letitia James

Herman D. Farrell, Jr.

159-00 Riverside Drive West, Apt. 76, New York, NY 10032

lvelisse Suarez

86 Fort Washington Avenue, Apt. 1A, New York, NY 10032

all of whom are enrolled voters of the Democratic Party as a Committee to fill vacancies in accordance with the provisions of the Election Law. In witness whereof, I have hereunto set my hand, the day and year placed opposite my signature Name of Signer Signature Required County (printed name may be added) Residence Date New York New York New York New York New York Printed Name → New York 2017 Printed Name > New York New York New York New York Borough of Manhattan, City of New York Printed Name > STATEMENT OF WITNESS

HOD state: I am a duly qualified voter of the State of New York and am an enrolled voter of the Democratic Party. I now reside at Each of the individuals whose names are subscribed to this petition sheet containing signatures, subscribed the same in my presence on the dates above indicated and identified himself or herself to be the individual who signed this sheet. I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn. Date: Signature of Witness Witness Identification Information The following information must be completed prior to filing with the Board of Elections in order for this petition sheet to be valid. Town or City County New York City of New York

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I DO HEREBY APPOINT - NAMES	ADDRESSES	

Adriano Espaillat Scott M. Stringer Letitia James Herman D. Farrell, Jr. 62 Park Terrace West, Apt. A87, New York, NY 10034
25 Broad Street, Apt. 125, New York, NY 10004
296 Lafayette Avenue, Brooklyn, NY 11238
159-00 Riverside Drive West, Apt. 7G, New York, NY 10032
86 Fort Washington Avenue, Apt. 1A, New York, NY 10032

all of whom are enrolled vo	ters of the Democratic Party as a Committee to fill vacan	ncies in accordance with the provisions of the Elec	ion Law.
In witness whereof,	I have hereunto set my hand, the day and	l year placed opposite my signature.	
Date	Name of Signer Signature Required (printed name may be added)	Residence	County
1. 6/28 ,2017 Printed Name →	Digna DAVS	640 Rwars de DRATE Protografia granifettan (in Orene York	New York
2.6/28 .2017 Printed Name →	S. Johnson SELMA Hyshes Ethnico	644 NSD HUC Borough of Manhattan, City of New York	New York
3.6/28 ,2017 Printed Name →	MANUEL S. OROCHENA	644 RSD #68 NYC 10031 Borough of Manhattan, City of New York	New York
4. 6/28 ,2017 Printed Name →	SALVADOR DROCHENA	(44 RSD #12F N, Y N Y 10 & 31 Borough of Manhattan, City of New York	New York
5.6/28 ,2017 Printed Name →	Natosha Dyco	BANGROWANHAMMACITY OF MONTOS	New York
6.6/28 ,2017 Printed Name →	Jun sul	674 CSO # 161 N.W. York NY Borough of Manhattan, City of New York	New York
7.6/28 .2017 Printed Name →	ALBANIA 2. SEM	644 PM H UB Borough of Manhattan, City of New York	New York
8.6 /27 .2017 Printed Name →	APR CHUSOSCHOO 3	NY NY LOOM Borough of Manhattan, City of New York	New York
9.6/28 .2017 Printed Name →	OLGAN SACIFO -	644 RIVERSI DE DRWE 10 F Borough of Manhattan, City of New York	New York
10. 6/28 ,2017 Printed Name →	Amedorano de	644 RCK) #30	New York
Printed Name → ANNETS WALLEN BOLLING STATEMENT OF WITNESS			

THEO CHIND state: I am a duly qualified voter of the State of New York and am an enrolled voter of the Democratic Party. I now reside at 646 RV 515 05 Dive 105 New York, New York. (Residence address, also post office if not identical) Each of the individuals whose names are subscribed to this petition sheet containing signatures, subscribed the same in my presence on the dates above indicated and identified himself or herself to be the individual who signed this she I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn. Date: JUNE 29, 2017 Signature of Witne Witness Identification Information

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County New York

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