STATE BOAR FOR OFFICE USE ONLY

SCHEDULE A-1

REPORT OF CAMPAIGN CONTRIBUTIONS

10 00T 12 AM 8: 12

OF MORE THAN \$500

Full name and complete mailing address of Political Committee:

Citizens Sor Tina Hill 13234 Hickoryla. Woodstock, IL60098

POLITICAL COMMITTEE IDENTIFICATION NO.

8055 14

SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.

This form must be on file within <u>TWO</u> business days of receipt of a contribution in an aggregate of more than \$500 received: a) in the period from January 1st up through and including the day before a General Primary Election or b) in the 30 day period preceding any other election, (up through and including the day before any election) by either:

- 1. HAND DELIVERY to a State Board of Elections office (see bottom of form for addresses),
- 2. FACSIMILE to (217)-557-5630 or (217)-782-5959. Please retain a confirmation transmission for your records, or
- 3. ELECTRONIC TRANSMISSION

Postal service or other mail services may be used. <u>CAUTION</u>; such services do not guarantee that the A-1 form will be received by our office prior to the deadline. <u>A POSTMARK IS NOT USED TO DETERMINE WHETHER AN A-1</u> FORM HAS BEEN TIMELY FILED.

This form must be on file with the State Board of Elections within two business days of receipt of a contribution of more than \$500 or penalties will be levied for late filings. Report may be hand delivered or faxed to (217)-557-5630 or (217)-782-5959.

THÈSE CONTRIBUTIONS MUST ALSO BE REPORTED ON THE NEXT REGULARLY SCHEDULED FORM D-2 REPORT, SCHEDULE A or SCHEDULE | IF AN IN-KIND CONTRIBUTION.

RECEIVED FROM: FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE	AMOUNT
Realter Political Action Committee 8.8. Bot 19451 Spring Sield, I L 62794	10/9/10	
Spring Sield, I L 62794		\$ 500,00
		\$
		\$
		\$
		\$
100000		

THE ILLINOIS STATE BOARD OF ELECTIONS IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS QUILINED UNDER PUBLIC ACT 78-1185, DISCLOSURE OF THIS INFORMATION IS REQUIRED. FAILURE TO PROVIDE ANY INFORMATION COULD RESULT IN A FINE UP TO \$5,000. THIS FORM IS IN COMPLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT

| STATE POLITICAL COMMITTEES RETURN TO:
| STATE BOARD OF ELECTIONS | OR | ST
| 1020 S SPRING ST | 100
| PO BOX 4187 | 100
| PRINGFIELD, IL 62708-4187 | CH

SIGNATURE OF TREASURER OR CANDIDATE

STATE BOARD OF ELECTIONS JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100 CHICAGO, IL. 60601-3232 LOCAL POLITICAL COMMITTEES AND STATE AND LOCAL POLITICAL COMMITTEES SHALL FILE WITH THE STATE BOARD OF ELECTIONS AND EACH APPROPRIATE COUNTY CLERK.

(217) 557-5630 FAX, (217) 782-5859 FAX (THIS FORM MAY BE REPRODUCED)