

## **FORM**

**D-1** 

## STATEMENT OF ORGANIZATION

PLEASE TYPE OR PRINT IN BLACK INK

FOR OFFICE USE ONLY
STATE BOARD OF ELECTIONS

13 MAR -7 AM 8: 02

Full name and complete mailing address of Political Committee:

YOUR VILLAGE YOUR VOICE PARTY 9701 W. GRAND AVE. FRANKLIN PARK, IL 60131

POLITICAL COMMITTEE IDENTIFICATION No.

24942 - 니

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	CHECK HERE IF ADDRESS CHANGE						
	SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.						
1.	DATE COMMITTEE CREATED:			2. AMOUNT OF FUNDS AVAILABLE AS OF CREATION DATE :\$			
3.	■ NEW COMMITTEE (MUST BE FILED WITHIN 10 DAYS OF CREATION OR WITHIN 2 DAYS IF CREATED WITHIN 30 DAYS  BEFORE AN ELECTION.)  AMENDMENT (MUST BE FILED WITHIN 10 DAYS OF ANY CHANGES. ENTER ONLY THOSE CHANGES FROM LAST D-1  ON FILE.)  REACTIVATING						
4.	POLITICAL COMMITTEE'S DESIGNATION: ALL COMMITTEES CHOOSE ONLY ONE:  CANDIDATE POLITICAL COMMITTEE'  *For purposes of contribution limits and reporting requirements a Candidate Political Committee supporting a candidate for multiple offices elected at different elections must designate an election cycle by listing the appropriate office. This office is:  POLITICAL ACTION COMMITTEE  POLITICAL PARTY COMMITTEE  BALLOT INITIATIVE COMMITTEE  INDEPENDENT-EXPENDITURE-ONLY PAC**  ** May not make direct contributions or coordinated expenditures.						
5.	POLITICAL COMMITTEE'S AREA OF ACTIVITY, SCOPE, AND PARTY AFFILIATION.  A. THIS COMMITTEE WILL PRIMARILY OPERATE IN THE FOLLOWING COUNTY(IES) OR DISTRICT(S): (not applicable if operating statewide or supporting/opposing statewide candidates or ballot initiatives)  B. POLITICAL PARTY AFFILIATION:						
	C. NAME AND ADDRESS OF EACH SPONSORING ENTITY:						
6.	PURPOSE OF THE POLITICAL COMMITTEE.						
7.	CANDIDATE(S) THE COMMITTEE IS SUPPORTING OR OPPOSING. (IF AMENDING, LIST ALL AS OF TODAY'S DATE.)						
	NAME AND ADDRESS SI	UPPORT	OPPOSE	OFFICE	PARTY AFFILIATION		

COMMITTEE NAME: YOUR VILLAGE YOUR VOICE PARTY				POLITICAL COMMITTEE IDENTIFICATION No.: 24942		
8.	REQUIRE	D COMMITTEE OFFICERS.	-			
POSITION NAME		MAILING ADDI	RESS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRESS			
(	CHAIRMAN					
TR	EASURER					
9.	POSITION	N, NAME & MAILING ADDRESS	OF EACH CUSTODIA	N OF THE COMMITTEE'S BOOKS AND ACCOUNTS.		
POSITION NAME		NAME	MAILING ADD	RESS, <b>DAYTIME PHONE NUMBE</b> R, AND E-MAIL ADDRESS		
10.	LIST OF	ALL FINANCIAL INSTITUTIONS IDING, LIST ALL AS OF TODAY'S DA	AND OTHER REPOS	SITORIES OF THE COMMITTEE FUNDS.		
		NAME	MA	ILING ADDRESS AND PHONE NUMBER		
CHARTER ONE		10035 W. GRAND AVE. FRANKLIN PARK IL. 60131 847-455-4300				
ANY SO FOR NO	RE THAT THIS BAI STURES OF THE C URCE, PROVIDED MINATION FOR EL	VERIFICATION  LLOT INITIATIVE COMMITTEE IS FORMED FOR THE  OMMITTEE WILL BE USED FOR THE PURPOSE DES  THAT THIS BALLOT INITIATIVE COMMITTEE DOES NO  ECTION, ELECTION, OR RETENTION, AND FAILURE	TION IS REQUIRED, PL DN-BALLOT INITIATIVE C PURPOSE OF SUPPORTING OR O CRIBED IN THIS STATEMENT OF C OT MAKE CONTRIBUTIONS OR EX TO ABIDE BY THESE REQUIREME	PPOSING A QUESTION OF PUBLIC POLICY, ALL CONTRIBUTIONS AND DRGANIZATION, THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FROM PENDITURES IN SUPPORT OF OR OPPOSITION TO A CANDIDATE OR CANDIDATES NTS SHALL DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE. (10 ILCS 5/9)		
PRIN	TED AND V	VRITTEN SIGNATURE OF COMM	MITTEE CHAIRPERSO	DN DATE		
FROM A	NY SOURCE, PRO	NDEPENDENT EXPENDITURE COMMITTEE IS FORM COMMITTEE WILL BE USED FOR THE PURPOSE OF	SCRIBED IN THE STATEMENT OF MMITTEE ODES NOT MAKE CONT	THE OF MAKING INDEPENDENT EXPENDITURES, (II) ALL CONTRIBUTIONS AND ORGANIZATION, (III) THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS RIBUTIONS TO ANY CANDIDATE POLITICAL COMMITTEE POLITICAL PARTY COMMITTEE		
PRIN	TED <u>AND</u> V	VRITTEN SIGNATURE OF COMM	IITTEE CHAIRPERSO	DATE DATE		
AND RE	LIE⊁, ISA TRUE, C	ATEMENT OF DRIGANIZATION (INC.) HOUNG ANY ACC.	ZATION AS REQUIRED BY ARTICLI	COMMITTEES  ATEMENTS; HAS BEEN EXAMINED BY ME AND, TO THE BEST OF MY KNOWLEDGE  BY OF THE ELECTION CODE, I UNDERSTAND THAT WILLFULLY FILING A FALSE OR		
<u>_/. '                                    </u>			200	3/6/13		
THE ILI	LINOIS STATE E	BLIC ACT 78-1183. WILLFUL FAILURE TO FILE ESS OFFENSE SUBJECT TO A FINE OF UP TO	LOSURE OF INFORMATION FOR WILLFUL FILING OF FAL \$5000, THIS FORM IS IN CO	THAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS SE OR INCOMPLETE INFORMATION REQUIRED BY THIS ARTICLE SHALL MPLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT.		
		STATE BOARD OF ELECTIONS 2329 S MACARTHUR BLVD SPRINGFIELD, IL 62704-4503 fax: 217-557-5630  D1@ELECTIONS.IL.GOV(D-1s ONLY)	DLITICAL COMMITTEES RE	STATE BDARD OF ELECTIONS JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100 CHICAGO, IL. 60601-3232 fax: 312-814-6485		