

FORM

STATEMENT OF ORGANIZATION STATE BOARD OF ELECTIONS

FOR OFFICE USE ONLY

3 APR 30 PM 1:21

Full name and complete mailing address of Political Committee:

Friends of Deborah Conroy 500 Ovaltine Ct. #534 Villa Park, IL 60181

THIS FORM MAY BE REPRODUCED

POLITICAL COMMITTEE IDENTIFICATION No.

32-8

Revised 7/9/12

E-MAIL ADDRESS:

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)						
	D. DOUTION DAGTY AFFER INTION						
	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 SUPPORT	OPPO	SE OFFICE PARTY AFFILIATION				
	IF MORE SPACE FOR INFORMATION IS REQUIRED, PLEASE ATTACH ADDITIONAL SHEETS.						

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COM	MITTEE N	AME:		POLITICAL COMMITTEE IDENTIFICATION No.:		
8.	REQUIRE	IRED COMMITTEE OFFICERS.				
POSITION		NAME	MAILING ADDR	ESS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRESS		
CHAIRMAN						
TREASURER						
9.	POSITIO	N, NAME & MAILING ADDRESS O	F EACH CUSTODIA	N OF THE COMMITTEE'S BOOKS AND ACCOUNTS.		
POSITION		NAME		MAILING ADDRESS, DAYTIME PHONE NUMBER , AND E-MAIL ADDRESS		
10.	LIST OF	F ALL FINANCIAL INSTITUTIONS NDING, LIST ALL AS OF TODAY'S DA	AND OTHER REPOS	ITORIES OF THE COMMITTEE FUNDS.		
· — · · ·		NAME	MA	ILING ADDRESS AND PHONE NUMBER		
PRINT DECLAI EXPEND	RE THAT THIS BUTTURES OF THE URCE, PROVIDED MINATION FOR E	VERIFICATIO ALLOT INITIATIVE COMMITTEE IS FORMED FOR THE P COMMITTEE WILL BE USED FOR THE PURPOSE DES NO JECTION, ELECTION, OR RETENTION, AND FAILURE T WRITTEN SIGNATURE OF COMM VERIFICATION: INI INDEPENDENT EXPENDITURE COMMITTEE IS FORME COMMITTEE WILL BE USED FOR THE PURPOSE DES	MMITTEE: ATION: TON IS REQUIRED, PLI N-BALLOT INITIATIVE CO PURPOSE OF SUPPORTING DR OF PURPOSE OF THE EXCLUSIVE PURPOSE CRIBED IN THE STATEMENT OF MITTEE DOES NOT MAKE CONT	EASE ATTACH ADDITIONAL SHEETS. DMMITTEES ONLY PPOSING A QUESTION OF PUBLIC POLICY, ALL CONTRIBUTIONS AND REGANIZATION, THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FROM PENDITURES IN SUPPORT OF DR OPPOSITION TO A CANDIDATE OR CANDIDATES STALL DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE. (10 JLCS 5/9) DN DATE RE COMMITTEES ONLY E OF MAKING INDEPENDENT EXPEN DITURES, (ii) ALL CONTRIBUTIONS AND ORGANIZATION, (iii) THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS RIBUTIONS TO ANY CANDIDATE POLITICAL COMMITTEE, POLITICAL PARTY COMMITTEE.		
PRINTED AND WRITTEN SIGNATURE OF COMMITTEE CHAIRPERSON						
AND BEL	JEF, IS A TRUE, (ATEMENT OF ORGANIZATION (INCLUDING ANY ACCO	ATION AS REQUIRED BY ARTICLE	COMMITTEES ATEMENTS) HAS BEEN EXAMINED BY ME AND, TO THE BEST OF MY KNOWLEDGE 19 OF THE ELECTION CODE, I UNDERSTAND THAT WILLFULLY FILING A FALSE OR		
PRINTED AND WRITTEN SIGNATURE OF TREAS			n Conto	4.25-13 DATE		
THE ILL OUTLIN	LINOIS STATE IED UNDER PU	BOARD OF ELECTIONS REQUIRES THE DISC IBLIC ACT 78-1183. WILLFUŁ FAILURE TO FILE IESS OFFENSE SUBJECT TO A FINE OF UP TO	LOSURE OF INFORMATION / OR WILLFUL FILING OF FAL \$5000. THIS FORM IS IN COM	HAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS SE OR INCOMPLETE INFORMATION REQUIREO BY THIS ARTICLE SHALL APLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT.		
		ALL PO STATE BOARD OF ELECTIONS	LITICAL COMMITTEES RE	STATE BOARD OF ELECTIONS		
		2329 S MACARTHUR BLVD SPRINGFIELD, IL 62704-4503		JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100		
	e-mai	fax: 217-557-5630 b: D1@ELECTIONS.IL.GOV(D-1s ONLY)		CHICAGO, IL. 60601-3232 fax: 312-814-6485		
ww ele	ections.il.gov		PAGE 2 OF 2	e-mail: D1@ELECTIONS.IL.GOV(D-1s ONLY)		