**FORM** 

## STATEMENT OF ORGANIZATION

PLEASE TYPE OR PRINT IN BLACK INK

FOR OFFICE USE ONLY

413 AUG -7 AM 10: 59

STATE BEEFFE OF ELECTRONS

rull name and complete mailing address of Political Committee:

BRADLEY A. STEPHENS COMMITTEEMAN FUND 9921 W. NORWOOD ST. ROSEMENT, IL GOOIS-442

POLITICAL COMMITTEE IDENTIFICATION No.

7589-10

SEE PAMPHLET "A C	SUIDE TO CAMPAIGN DISCLOSURE" FO
	CHECK HERE IF ADDRESS CHANGE
E-MAIL ADDRESS:	
RUSEMINT, IL	60018-4727

				,, <del>0,1,0,0,</del>				
1.	DATE COMMITTEE CREATED:	2.	AMOUNT OF FUNDS AVAILA CREATION DATE :\$	BLE AS OF				
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 belief 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 SUPPORT	OPPOS	E OFFICE	PARTY AFFILIATION				
GRADLEY A. STEPHENS X COMMITTEENIN REPUBLICAN								

IF MORE SPACE FOR INFORMATION IS REQUIRED, PLEASE ATTACH ADDITIONAL SHEETS.

ROSEMONT, 1C GOOI8

COMN	AITTEE NA BRA		VHANS COM	MISTERMAN RING	IDENTIFICATION No.:
8.	REQUIRE	D COMMITTEE OFF	CERS.		
POSITION NAME		MAILING ADDRESS, DAYTIME PHONE NUMBER	R, AND E-MAIL ADDRESS		
Cl-	IAIRMAN				
TRE	ASURER	***			
9.	POSITION	J NAME & MAILING	ADDRESS OF F	ACU CUSTADIAN OF THE COMMITTEE'S DO	OVE AND ACCOUNTS
	SITION	NAM		ACH CUSTODIAN OF THE COMMITTEE'S BOOKS AND ACCOUNTS, MAILING ADDRESS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRESS	
		, , , , , , , , , , , , , , , , , , , ,		Water Company of the Hallen	A, AND E-MAIL ADDITION
10	LIST OF	ALL FINANCIAL IN	ETITUTIONS AN	D OTHER REPOSITORIES OF THE COMMITTE	E FIINDS
10.	(IF AMEN	IDING, LIST ALL AS OF	TODAY'S DATE.		
		NAME		MAILING ADDRESS AND PHONE NU	JMBER
11.	DISPOS	ITION OF RESIDUAL	FUNDS IN THE	EVENT OF DISSOLUTION OR TERMINATION	OF THE COMMITTEE
11.	1			OT TO EXCEED THEIR INDIVIDUAL CONTRIBUTION	
	1	ISFER TO ANOTHER P		A	10.
	1	ISFER TO A CHARITAE			
		IF MORE SPACE FO	OR INFORMATION	IS REQUIRED, PLEASE ATTACH ADDITIONAL SHE	:ETS
				ALLOT INITIATIVE COMMITTEES ONLY	
EXPENDIT	URES OF THE ( RCE, PROVIDED	COMMITTEE WILL BE USED FOR ' THAT THIS BALLOT INITIATIVE C	FORMED FOR THE PURP THE PURPOSE DESCRIBE OMMITTEE DOES NOT MA	DSE OF SUPPORTING OR OPPOSING A QUESTION OF PUBLIC POLICY, ALL D IN THIS STATEMENT OF ORGANIZATION, THE COMMITTEE MAY ACCEPT INCECONTRIBUTIONS OR EXPENDITURES IN SUPPORT OF OR OPPOSITION IDE BY THESE REQUIREMENTS SHALL DEEM THIS COMMITTEE IN YIOLATK	UNUMITED CONTRIBUTIONS FROM TO A CANDIDATE OR CANDIDATES
PRINT	ED AND I	WRITTEN SIGNATUR			DATE
EXPENDIT FROM ANY	URES OF THE 1 1 SOURCE, PRO	INDEPENDENT EXPENDITURE CO COMMITTEE WILL BE USED FOR MIDED THAT THE INDEPENDENT	MMITTEE IS FORMED FO THE PURPOSE DESCRIB EXPENDITURE COMMIT	ENDENT EXPENDITURE COMMITTEES ONLY  R THE EXCLUSIVE PURPOSE OF MAKING INDEPENDENT EXPENDITURES, IS OF IN THE STATEMENT OF ORGANIZATION, (IIII) THE COMMITTIES MAY ACREE DOES NOT MAKE CONTRIBUTIONS TO ANY CANDIDATE POLITICAL COMMENTS SHALL DEEM THE COMMITTEE IN VIOLATION OF THIS ARTICLE.	CEPT UNLIMITED CONTRIBUTIONS
PRINT	ED AND	WRITTEN SIGNATUR	E OF COMMITT	EE CHAIRPERSON	DATE
			VERIFICATION	ON: ALL POLITICAL COMMITTEES	
AND BELLE	EF, IS A TRUE, C	ATEMENT OF ORGANIZATION (IN CORRECT, AND COMPLETE STAT TIS SUBJECT TO A CIVIL PERAL	EMENT OF ORGANIZATION	YYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND, N AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE, I UNDERSTAND TH ND UP TO \$5000.	TO THE BEST OF MY KNOWLEDGE NAT WILLFULLY FILING A FALSE OR
	/1/	and tyl		MARK R. STEPHENS	8/7/13
THE ILLI	NOIS STATE D UNDER PU	BOARD OF ELECTIONS REC BLIC ACT 78-1183, WILLFUL	UIRES THE DISCLOS FAILURE TO FILE OR A FINE OF UP TO \$50	RER OR CANDIDATE  JRE OF INFORMATION THAT IS NECESSARY IF YOU QUALIFY A WILLFUL FILING OF FALSE OR INCOMPLETE INFORMATION REQ XX. THIS FORM IS IN COMPLIANCE WITH THE FORMS MANAGEME	UIRED BY THIS ARTICLE SHALL
				CAL COMMITTEES RETURN TO: STATE BOARD OF ELEC	TIONS
		STATE BOARD OF ELEC 2329 S MACARTHUR I SPRINGFIELD, IL 62704	BLVD	JAMES R. THOMPSON C 100 W RANDOLPH ST, ST	ENTER E 14-100
	e-mai	fex: 217-557-5630 I: D1@ELECTIONS IL GO		CH/CAGO, IL. 60601-3; fax: 312-814-6485 e-mail: D1@ELECTIONS IL GOV	