		FOR OFFICE USE ONLY
SCHEDULE A-1		FOR OFFICE USE ONLY
REPORT OF CAMPAIGN CONTRIBUTIONS OF \$1000 (	OR MORE	2013 DEC 27 PM 3: 33
Full name and complete mailing address of Political Committee:	<u> </u>	STATE BOARD OF ELECTIONS
44th Ward GOP		31014 -
Scott Davis, Committeeman 1439 W. Addison #3		POLITICAL COMMITTEE
Chicago, Illinois 60613		IDENTIFICATION No.
J. J		24717-9
SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.		
Note: Schedule A-1 reporting requirements now a  This form must be filed within 5 business days after receipt of any c days if that receipt was within 30 days or less before the date of an opposes a candidate or public question on the ballot at that election of or in opposition to a candidate(s), or a public question(s), on the  1. HAND DELIVERY - to a State Board of Elections off 2. FACSIMILE - to (217)-557-5630 or (312)-814-6485. records, 3. ELECTRONIC TRANSMISSION - If this political com the Schedule A-1 must also be filed electronically. Postal service or other mail services may be used. C AUTION; such received by our office prior to the deadline. A POSTI MARK IS NOT L HAS BEEN TIMELY FILED. THESE CONTRIBUTIONS MUST ALSO BE REPORTED OF THE NEXT REGISCHEDULE A OR SCHEDULE I.  RECEIVED FROM:	ontribution of some election and or makes expended that that expended expen	the political committee supports or nditures in excess of \$500 on behalf election by either: n of form for addresses), a confirmation transmission for your ired to file its reports electronically, t guarantee that the A-1 form will be ERMINE WHETHER AN A-1 FORM ULED FORM D-2 QUARTERLY REPORT
FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE	AMOUNT
Mr. Jack Roeser 522 Lake Shore Dr. N. Sarrington, IL	2/26/2013	\$ 3000
		\$
		\$
		\$
		\$
Lett. 7 2/27/2013		
Name and address of person submitting this report if other than the committee's chairman or treasurer:		
THE RUNORS STATE BOARD OF ELECTIONS IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS QUITAVED UNDER PUBLIC ACT 78-1183, DISCLOSURE OF THIS IMPORMATION IS REQUIRED. FAILURE TO PROVIDE ANY INFORMATION DRING THE FORM IS IN COMPLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT		
STATE BOARD OF ELECTIONS 2329 S. MacArthur Bivd. SPRINGFIELD, IL 62708-4187  OR	TURN ŦŌ:	STATE BOARD OF ELECTIONS JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100 CHICAGO, IL. 80601-3232