

FORM

1_1

STATEMENT OF ORGANIZATION

PLEASE TYPE OR PRINT IN BLACK INK

Full name and complete mailing address of Political Committee: Citizens for Brendan Kelly

5111 West Main Street Belleville, Illinois 62226

POLITICAL COMMITTEE IDENTIFICATION No.

FOR OFFICE USE ONLY

22425-10

E-MAIL ADDRESS: gph@bphlaw.com

✓ CHECK HERE IF ADDRESS CHANGE

| SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE. | | | | | | | | |
|---|---|---------|-------|------------------------|-------------------|--|--|--|
| 1. | DATE COMMITTEE CREATED: | | 2. | AMOUNT OF FUNDS AVAILA | ABLE 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.) MENDMENT (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 | SUPPORT | OPPOS | OFFICE | PARTY AFFILIATION | | | |
| | | | | | | | | |

| CON | /MITTEE N | AME: Citizens for Brendan Keliy | | POLITICAL COMMITTEE IDENTIFICATION No 22425-10 |): | | |
|----------------|-----------------------------------|---|---|--|--------------|--|--|
| 8. | REQUIR | ED COMMITTEE OFFICERS. | | | | | |
| POSITION NAME | | | MAILING ADDRES | SS, daytime phone number , and e-mail addre | ESS | | |
| CHAIRMAN | | Thomas Holbrook | 230 Summers Trace, | Belleville, Illinois 62220 | | | |
| TREASURER | | Garrett P. Hoerner | 5111 West Main Stree | 5111 West Main Street, Belleville, Illinois 62226 / (618) 235-0020 / gph@bphlaw.com | | | |
| 9. | РОЅІТІО | N, NAME & MAILING ADDRESS (| OF EACH CUSTODIAN (| OF THE COMMITTEE'S BOOKS AND ACCOUNT | TS. | | |
| POSITION | | NAME | MAILING ADDRES | SS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRE | ESS | | |
| Treasurer | | Garrett P. Hoerner | 5111 West Main Stree | et, Belleville, Illinois 62226 / (618) 235-0020 / gph@bphlaw.co | m | | |
| 10 | | F ALL FINANCIAL INSTITUTIONS NDING, LIST ALL AS OF TODAY'S DA | | ORIES OF THE COMMITTEE FUNDS. | | | |
| L | 1 (11 7 114122 | NAME | | NG ADDRESS AND PHONE NUMBER | | | |
| 11 | RET | SITION OF RESIDUAL FUNDS IN URN TO CONTRIBUTORS IN AMOUN NSFER TO ANOTHER POLITICAL CONSFER TO A CHARITABLE ORGANIZ | TS NOT TO EXCEED THE | LUTION OR TERMINATION OF THE COMMITTE IR INDIVIDUAL CONTRIBUTIONS. | E: | | |
| | | | | SE ATTACH ADDITIONAL SHEETS. | | | |
| EXPEN | DITURES OF THE DURCE, PROVIDE | ALLOTINITIATIVE COMMITTEE IS FORMED FOR THE COMMITTEE WILL BE USED FOR THE PURPOSE DES O THAT THIS BALLOT INITIATIVE COMMITTEE DOES N | CRIBED IN THIS STATEMENT OF ORG IOT MAKE CONTRIBUTIONS OR EXPEN | IMITTEES ONLY DSING A QUESTION OF PUBLIC POLICY, ALL CONTRIBUTIONS AND ANIZATION, THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FR NOTIVERS IN SUPPORT OF OR OPPOSITION TO A CANDIDATE OR CANDIDA'S SHALL DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE. (10 ILCS S | TES | | |
| PRI | TED AND | WRITTEN SIGNATURE OF COM | ITTEE CHAIRPERSON | DATE | | | |
| EXPEN FROM: | IDITURES OF THE ANY SOURCE, PR | | SCRIBED IN THE STATEMENT OF OR MMNTEE DOES NOT MAKE CONTRIBI | · IF MAKING INCEPENDENT EXPEN DITURES, (ii) ALL CONTRIBUTIONS AND IGANIZATION, (iii) THE COMMITTEE MAY A CCEPT UNLIMITED CONTRIBUTI UTIONS TO ANY CANDIDATE POLITICAL COMMITTEE, POLITICAL PARTY CO | ONS XMMIT | | |
| PRI | NTED AND | WRITTEN SIGNATURE OF COMM | MITTEE CHAIRPERSON | DATE | | | |
| AND BI | ELIEF, IS A TRUE, | TATEMENT OF ORGANIZATION (INCLUDING ANY ACC | ZATION AS REQUIRED BY ARTICLE 9 (| MMITTEES MENTS) HAS BEEN EXAMINED BY ME AND, TO THE BEST OF MY KNOWLED OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE | GE OR | | |
| DRIN | COARR | WRITTEN SIGNATURE OF TREA | SUPER OR CANDIDATE | July 15, 20 DATE | 013 | | |
| THE IS | LINOIS STATE | BOARD OF ELECTIONS REQUIRES THE OISC JBLIC ACT 78-1183, WILLFUL FAILURE TO FILE NESS OFFENSE SUBJECT TO A FINE OF UP TO | CLOSURE OF INFORMATION THA E OR WILLFUL FILING OF FALSE O \$5DDD. THIS FORM IS IN COMPL | AT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTE OR INCOMPLETE INFORMATION REQUIRED BY THIS ARTICLE SI LIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT. | | | |
| | | STATE BOARD OF ELECTIONS | DLITICAL COMMITTEES RETU | JRN TO: STATE BOARD OF ELECTIONS | <u></u> | | |
| | | 2329 S MACARTHUR BLVD SPRINGFIELD, IL 62704-4503 | | JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100 CHICAGO, IL. 60601-3232 | | | |

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