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FORM

D-1

STATEMENT OF ORGANIZATION

PLEASE TYPE OR PRINT IN BLACK INK

TATE BUARD OF ELECTIONS

13 AUG -5 AM 8: 05

Full name and complete mailing address of Political Committee:
Elect Bridget Anne Mitchell Judge
P.O. Box 43324
Chicago, IL 60643

POLÍTICAL COMMITTEE IDENTIFICATION No.

E-MAIL ADDRESS:

,	SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.						
1.	DATE COMMITTEE CREATED:			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 e	expend	ditures.				
5.	POLITICAL COMMITTEE'S AREA OF ACTIVITY, SCOPE, AND PARTY AFFILIATION. A. THIS CDMMITTEE 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 SUPPO	RT	OPPOSE	E OFFICE PARTY AFFILIATION			
]			-		

COM	MITTEE N.	AME:	POLITICAL COMMITTEE IDENTIFICATION No.:			
8.	8. REQUIRED COMMITTEE OFFICERS.					
P(OSITION	NAME	MAILING ADDRESS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRESS			
CHAIRMAN		See Attached				
TREASURER						
9.	POSITIO	N, NAME & MAILING ADDRESS OF	EACH CUSTODIAN OF THE COMMITTEE'S BOOKS AND ACCOUNTS.			
P	OSITION	NAME	MAILING ADDRESS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRESS			
10. LIST OF ALL FINANCIAL INSTITUTIONS AND OTHER REPOSITORIES OF THE COMMITTEE FUNDS.						
	I (IF AIVIC	NAME	MAILING ADDRESS AND PHONE NUMBER			

TRANSFER TO A CHARITABLE ORGANIZATION: IF MORE SPACE FOR INFORMATION IS REQUIRED, PLEASE ATTACH ADDITIONAL SHEETS. VERIFICATION- BALLOT INITIATIVE COMMITTEES ONLY I DECLARE THAT THIS BALLOT INITIATIVE COMMITTEE IS FORMED FOR THE PURPOSE DESCRIBED IN THIS STATEMENT OF ORGANIZATION, THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FROM ANY SOURCE, PROVIDED THAT THIS BALLOT INITIATIVE COMMITTEE DOES NOT MAKE CONTRIBUTIONS OR EXPENDITURES IN SUPPORT OF OR OPPOSITION TO A CANDIDATES FOR NOMINATION FOR ELECTION, OR RETENTION, AND FAILURE TO ABIDE BY THESE REQUIREMENTS SHALL DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE. (10 LCS 5/8) PRINTED AND WRITTEN SIGNATURE OF COMMITTEE CHAIRPERSON DATE VERIFICATION: INDEPENDENT EXPENDITURE COMMITTEES ONLY						
I DECLARE THAT (1) THIS INDEPENDENT EXPENDITURE COMMITTEE IS FORMED FOR THE EXCLUSIVE PURPOSE OF MAKING INDEPENDENT EXPENDITURES, (1) ALL CONTRIBUTIONS AND EXPENDITURES OF THE COMMITTEE WILL BE USED FOR THE PURPOSE DESCRIPED IN THE STATEMENT OF ORGANIZATION, (II) THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FROM ANY SOURCE, PROVIDED THAT THE INDEPENDENT EXPENDITURE COMMITTEE DOES NOT MAKE CONTRIBUTIONS TO ANY CANDIDATE POLITICAL COMMITTEE, POLITICAL PARTY COMMITTON OR POLITICAL, ACTION COMMITTEE, AND (M) FAILURE TO ABIDE BY THESE REQUIREMENTS SHALL DEEM THE COMMITTEE IN VIOLATION OF THIS ARTICLE.						
PRINTED AND WRITTEN SIGNATURE OF COMMITTEE CHAIRPERSON DATE						
VERIFICATION: ALL POLITICAL COMMITTEES I DECLARE THAT THIS STATEMENT OF ORGANIZATION (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND. TO THE BEST OF MY KNOWLEDGE AND BELIEF, IS A TRUE, CORRECT, AND COMPLETE STATEMENT OF ORGANIZATION AS REQUIRED BY ARTICLE 8 OF THE ELECTION CODE, I UNDERSTAND THAT WILL FULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.						
	Neugh	Doge Mar	tin D. Joyce 8-2-13			
PRINTED AND WRITTENSIGNATURE OF TREASURER OR CANDIDATE THE ILLINOIS STATE BOARD OF ELECTIONS REQUIRES THE DISCLOSURE OF INFORMATION THAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS OUTLINED UNDER PUBLIC ACT 78-1183. WILLFUL FAILURE TO FILE OR WILLFUL FILING OF FALSE OR INCOMPLETE INFORMATION REQUIRED BY THIS ARTICLE SHALL CONSTITUTE A BUSINESS OFFENSE SUBJECT TO A FINE OF UP TO \$5000. THIS FORM IS IN COMPLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT. ALL POLITICAL COMMITTEES RETURN TO:						
		STATE BOARD OF ELECTIONS 2329 S MACARTHUR BLVD SPRINGFIELD, IL 62704-4503	STATE BOARD OF ELECTIONS JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, ST 14-100			

fax; 217-557-5630 e-mail: <u>D1@ELECTIONS.IL.GOV(</u>D-1s ONLY)

CHICAGO, IL. 60601-3232 fax: 312-814-6485 e-mair: <u>D1@ELECTIONS.IL.GOV(D-19 ONLY)</u>

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Elect Bridget Anne Mitchell Judge P.O. Box 43324 Chicago, IL 60643

Campaign Co-Chairmen:

Karen McNulty Enright McNabola Law Group 55 W. Wacker Dr., 9th Fl. Chicago, IL 60601 (312) 629-2900

John M. Stalmack Ruberry Stalmack & Garvey, LLC Citicorp Center, 500 W. Madison St., Suite 2300 Chicago, IL 60661 (312) 466-7248