)					
}		FORM D-1	STATEMENT OF ORGANIZ PLEASE TYPE OR PRINT IN BLACK IN		
	'Full r	_	mailing address of Political Committee: for Wis Aperogo Jr.		
	E-MA	IL ADDRESS.	CHECK HERE IF ADDRESS	المتراكي المتراكب المتركب المتراكب المتركب المتركب المتركب المتراكب المتراكب المتراك	
	1.		PHLET "A GUIDE TO CAMPAIGN DISCLOS	OF FUNDS AVAILABLE AS OF	
1. DATE COMMITTEE CREATED: 9-25-2013 2. CREATION DATE: \$					
	4.	CANDIDATE POLI "For pur poses of of multiple offices ele POLITICAL ACTIO POLITICAL PARTY BALLOT INITIATIV INDEPENDENT-EX	ontribution I limits and rileporting rilequirements a Ciliandidate cted at different elections must designate an election cycle between the committee of Committe	P olitical C ommittee supporting a c andidate fo	
	5.	POLITICAL COMMIT A. THIS COMMITTEE V	TEE'S AREA OF ACTIVITY, SCOPE, AND PARTY A ILL PRIMARILY OPERATE IN THE FOLLOWING COUNTY ing statewide or supporting/opposing statewide candidates or ballet	(IES) OR DISTRICT(S):	
		B. POLITICAL PARTY	FFILIATION: DEMOCRAFIC		

	C. NAME AND ADDRESS OF EACH SPONSORING ENTITY:	
6.	PURPOSE OF THE POLITICAL COMMITTEE. SUPPORT THE CANDIDACY OF LUIS PARCYO JR	
7.	CANDIDATE(S) THE COMMITTEE IS SUPPORTING OR OPPOSING. (IF AMENDING, LIST ALL AS OF TODAY'S DATE.)

NAM	E AND ADDRESS	SUPPORT	OPPOSE		OFFICE	PARTY AFFILIATION
Luis BRADY 2723 N CA Chicago I		Ø		1 - 1	e County of Commission	DEMOCRATIC
<i></i>					EL ALL ASSISTIONIAL	*1.FFT0

IF MORE SPACE FOR INFORMATION IS REQUIRED, PLEASE ATTACH ADDITIONAL SHEETS.
THIS FORM MAY BE REPRODUCED PAGE 1 OF 2

Revised 7/9/12

COMMITTEE NAME:	PO		LITICAL COMMITTEE IDENTIFICATION No.: 25589
8. REQUIRED COMMIT	TEE OFFICERS.		
POSITION	NAME	MAILING ADDRESS, D	AYTIME PHONE NUMBER, AND E-MAIL ADDRESS
CHAIRMAN RAY	1139053	3434 N. Nondi Majorgo Il 660	4 312 -636-9500 RV216 8 8 8 9 mail. Co
TREASURER ARSENI	Pomales	1819 N 75th AVE	Elmuno PARK IL 60707 ORSENIO FORMINS Y
9. POSITION, NAME &	MAILING ADDRESS OF EAC	CH CUSTODIAN OF T	HE COMMITTEE'S BOOKS AND ACCOUNTS.
POSITION	NAME		AYTIME PHONE NUMBER, AND E-MAIL ADDRESS
TREAS. ADSENDO	Pomales	1819 Al 75 TO DUR. Blowners Dr St 61	773-569-5249 1707 ARSENIO. DOMALES E YALOR COM
10. LIST OF ALL FINA	NCIAL INSTITUTIONS AND (OTHER REPOSITORIE	S OF THE COMMITTEE FUNDS.
NAME	ACE AS OF TODAY'S DATE.)	MAILING A	DDRESS AND PHONE NUMBER
Chase Ban	L	2001 N M	Nwarker Ave
Chase ban		Chicago	PC 60647
TRANSFER TO A IF MORE IDECLARE THAT THIS GALLOT INITIATIVE EXPENDITURES OF THE COMMITTEE WILL ANY SOURCE, PROVIDED THAT THIS BALLSOR NOMINATION FOR ELECTION, ELECTION OF THE COMMITTEE WILL FOR ANY SOURCE, PROVIDED THAT THE EXPENDITURES OF THE COMMITTEE WILL FROM ANY SOURCE, PROVIDED THAT THE CR POLYMORAL ACTION COMMITTEE AND OF THE COMMITTEE WILL FROM ANY SOURCE, PROVIDED THAT THE CR POLYMORAL ACTION COMMITTEE.	COMMITTEE IS FORMED FOR THE PURPOSE BE USED FOR THE PURPOSE DESCRIBED IN OT INITIATIVE COMMITTEE DOES NOT MAKE ON OR RETENTION AND FAILURE TO ABJUE IGNATURE OF COMMITTEE VERIFICATION: INDEPEN EXPEN DITURE COMMITTEE IS FORMED FOR LIBE USED FOR THE PURPOSE DESCRIBED ENDEPENDENT EXPENDITURE COMMITTEE IN OFFICIAL FOR ABIDE BY THESE REDURE YOU FAILURE TO ABIDE BY THESE REDURE YOU FAILURE TO ABIDE BY THESE REDURE YOU	REQUÍRED, PLEASE A LOT INITIATIVE COMMITTE OF SUPPERTING OR DPPOSING A THIS STATEMENT OF ORGANIZAT CONTRIBUTIONS OR EXPENDITUR BY THESE REQUIREMENTS SHALL CHAMPERSON DENT EXPENDITURE COM R THE EXCLUSIVE FURPOSE OF IN THE STATEMENT OF ORGANIZ DOES NOT MAKE CONTRIBUTIONS ITS SHALL DEM THE COMMITTEE	TTACH ADDITIONAL SHEETS. ES ONLY QUESTION OF PUBLIC POUCY, ALL CONTRIBUTIONS AND ON THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FROM SIS IN SUPPORT OF DR OPPOSITION TO A CANDIDATE OR CANDIDATES DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE (19 LCS 249). MITTEES ONLY MAKING I NDEPENDENT ISSPEN DITURES, (4) ALLIC ONTRIBUTIONS AND ACTION, (4) THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS IN TO ANY CANDIDATE POLITICAL PASTY COMMITTEE.
THINTED AND WITH TEN		ALL POLITICAL COMMITT	
FOECLARÉ THAT THIS STATEMENT OF OR AND BELIEF, IS A TRUE, CORRECT, AND C INCOMPLETE STATEMENT IS SUBJECT T	BANIZATION (INCLUDING ANY ACCOMPANYIN DMPLETE STATEMENT OF ORGANIZATION AS DIA CIVIL PENALTY OF AT LEAST \$1001 AND L	IG SCHEDULES AND STATEMENTS REQUIRED BY ARTICLE 9 OF THE IP TO \$5000.	HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR
Arseniu Poma	IGNATURE OF TREASURE	POP CANDIDATE	/0/4/13 DATE
THE ILLINOIS STATE BOARD OF EL OUTLINED UNDER PUBLIC ACT 78-1	CTIONS REQUIRES THE DISCLOSURE 183. WILLFUL FAILURE TO FILE OR WIL SUBJECT TO A FINE OF UP TO \$5000.	OF INFORMATION THAT IS N LEUL FILING OF FALSE OR IN	ECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS COMPLETE INFORMATION REQUIRED BY THIS ARTICLE SHALL WITH THE FORMS MANAGEMENT PROGRAM ACT.
2329 S MA SPRINGFIE fax: 2	RD OF ELECTIONS CARTHUR BLVD LD, IL 62704-4503 17-557-5630 IONS,IL GOV(D-ts ONLY)		STATE BOARD OF ELECTIONS JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100 CHICAGO, IL. 60601-3232 fax: 312-814-6485
`www.elections.il.gov		e-m	air <u>D1@ELECTIONS.IL.GOV</u> (0-1 s ONLY)