BOADA	FORM		REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (CHECK APPROPRIATE BOXES) (PLEASE TYPE QR PRINT IN BLACK INK)					FOR OFFICE USE ONLY		
			Quarterly Rep	ort: ( <u>circle one</u> )	1 <sup>st</sup> , 2 <sup>nd</sup> ,	3 <sup>rd</sup> , 4 <sup>th</sup>	STATE E	SGARO OF E	LECTION	
	D-2		Final Report							
LINOIS 3		•   _	Amendment of	of the Report Ind	icated Above		11 A	PR -7 AM	10: 05	
Full name and complete mailing address of Political Committee:							POLITICAL	COMMITT	EE	
Illinois Assn of County Officials - PAC							Committee ID: 8316			
Diana Robinson, Auditor							13			
	4 3rd Ave k Island, IL	61201.86	12							
Roci	K ISIAIIU, IL	01201-80	12	CHEC	K IF ADDRES	S CHANGE				
e-mail address:				CHEC	N IF ADDINES	3 CHANGE	IDE	ENTIFICATI	ON No.	
REPORTING PERIOD CASH AVAILABLE AT THE					,	ALL POLITICAL CO	OMMITTEES RET	URN TO:		
		NG OF THE RE		STATE BOARD OF		STATE BOARD OF ELECTIONS JAMES R. THOMPSON CENTER				
1-1-11 3- FROM	PERIOD:	\$ 5675.6	4	PO BOX 4187 1020 S Spring St			100 W RANDOLPH ST, STE 14-100 CHICAGO, IL. 60601-3232			
Repeat this amount in SECTION D line (A).								TICAGO, IL. 606	01-3232	
*****				NS FOR QUA				TUDES		
SECTION A – RECEIPTS  1. Individual Contributions  SECTION  6. Transfers Out							- EXPENU	IUKES		
a. Itemized (from Schedule A): \$				(1a)		d (from Sched	ule B): \$		(6a)	
b. Not-Itemized:						nized:	_ •		— (6b)	
b. Not-Itemized:\$(1b)  2. Transfers In					7. Loans mad		Ψ,			
a. Itemized (from Schedule A): \$				(2a)		d (from Sched	ule B): \$		(7a)	
b. Not-Itemized:\$ (2b)						mized:			(7b)	
3. Loans Received					8. Expenditur	es	,			
a. Itemized (fro	e A):	\$	(3a)	a. Itemize	d (from Sched	ule B): \$		(8a)		
b. Not-Itemize		\$	(3b)	b. Not-Iter	mized:	\$		(8b)		
4. Other Receipts					9. Independe				(0-)	
a. Itemized (from Schedule A):			\$	(4a)		d (from Sched			(9a)	
			\$	68 (4b)		mized:			(9b)	
						NDITURES (6a	thru 9b) 🏓	<u></u>	<u> </u>	
********	******	******	*******	*****		ON C - DEB			<u>NS</u>	
I						sly reported unpaid debts) dule C):     \$           (10a)				
E In Kind Contr	.: h 4: a ma					ea (trom Sched mized:		<del></del>	(10a) (10b)	
<ol><li>In-Kind Contributions</li><li>a. Itemized (from Schedule I):</li></ol>			\$	(5a)		BTS & OBLIG	_			
b. Not-Itemized: \$ (5b)						ECTION D		LANCE		
TOTAL IN-KIND (5a+5b) \$					Cash available			<u></u>		
	- · · · · · · · · · · · · · · · · · · ·	,			Ousir available	_	ng period: \$	5675	64 (A)	
Name & address of person submitting this report <u>if other than</u> the committee's chairman or treasurer:  Total Receipts from S									10 X (B)	
	Committee	5 Chairm	an or treasurer.		Total No	Total Cash (A			32 (C)	
		···			Total Expend	ditures from S			() (D)	
	<del></del>				•	ailable at the cl				
	·-·······				•	ing period (C)		5171. 3	a Д (E)	
						INVESTMENT				
				VERIFICA	•	IIAACO HAICIAT	O TOTAL. W	36/6	<u> </u>	
I DECLARE THAT THIS BEEN EXAMINED BY ELECTION CODE. I U	ME AND TO TH	HE BEST OF	MY KNOWLEDGE AL	BUTIONS AND EXPEN	IDITURES (INCLUDII	OMPLETÉ REPOR	RT AS REQUIRED	BY ARTICLE 9	OF THE	
\$5000.	X		, 1.		,			4/1/11		
SIGNATURE OF	COMMITTE	E'S TREA		<u>ÁLLEZEK</u> NDIDATE ONLY	,			7/6/// DATE		

THIS FORM MAY BE REPRODUCED