

## **FORM**

STATEMENT OF ORGANIZATION THE BOARD OF ELECTIONS

PLEASE TYPE OR PRINT IN BLACK INK

FOR OFFICE USE ONLY

13 FEB 19 PM 3: 88

Full name and complete mailing address of Political Committee:

Friends of Tracy Spesia 1505 West Acres Road **Joliet IL 60435** 

> POLITICAL COMMITTEE IOENTIFICATION No. 25086-4

E-MAIL ADORESS: trspesia@yahoo.com

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IDE.	TO CAMPA	NGN DISC	LUSURE"	FUR G	UIDANCE.	
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CHECK HERE IF ADDRESS CHANGE

SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.						
1.	DATE COMMITTEE CREATED:			AMOUNT OF FUNDS AVAILA CREATION DATE :\$987.37	BLE 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.) ☐ AMENDMENT (MUST BE FILED WITHIN 10 DAYS OF ANY CHANGES. ENTER ONLY THOSE CHANGES FROM LAST D-1 ON FILE.) ☐ REACTIVATING					
4.	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**					
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)  Joliet Township High School District 204  B. POLITICAL PARTY AFFILIATION:  C. NAME AND ADDRESS OF EACH SPONSORING ENTITY:					
6.	PURPOSE OF THE POLITICAL COMMITTEE.  To support the candidacy of Tracy Spesia to the JTHS District 204 Board					
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	
1505	Spesia West Acres Road IL 60435	V		JTHS District 204 Board		

COMMITTEE NAME: Friends of Tracy Spesia				POLITICAL COMMITTEE IDENTIFICATION No.:			
8.	REQUIR	ED COMMITTEE OFFICERS.					
PC	SITION	NAME	MAILING ADDRES	MAILING ADDRESS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRESS			
CHAIRMAN		Teresa (Tracy) Spesia		1505 West Acres Road, Joliet IL 60435 815-740-5656 ** trspesia@yahoo.com			
TREASURER Dav		David Spesia		1505 West Acres Road, Joliet IL 60435 815-834-4001 ** ddspesia@yahoo.com			
9.	POSITIO	N, NAME & MAILING ADDRESS C	F EACH CUSTODIAN	OF THE COMMITTEE'S BOOKS AND ACCOUNTS			
POSITION		NAME	MAILING ADDRE	MAILING ADDRESS, DAYTIME PHONE NUMBER, AND E-MAIL ADDRESS			
Chairman		Teresa (Tracy) Spesia	1505 West Acres Ro	1505 West Acres Road, Joliet IL 60435 815-740-5656 ** trspesia@yahoo.com			
10.		F ALL FINANCIAL INSTITUTIONS NDING, LIST ALL AS OF TODAY'S DA		TORIES OF THE COMMITTEE FUNDS.			
		NAME	MAILI	MAILING ADDRESS AND PHONE NUMBER			
First Co	mmunity Bani		2801 Black Road, Joliet IL 60 315-725-0123				
	TRA	URN TO CONTRIBUTORS IN AMOUNT NSFER TO ANOTHER POLITICAL COINSFER TO A CHARITABLE ORGANIZA	MMITTEE: ATION: Joliet Town	nship High School Foundation			
		IF MORE SPACE FOR INFORMAT	TON IS REQUIRED, PLEA	ASE ATTACH ADDITIONAL SHEETS.			
ANY SO	NTURES OF THE URCE, PROVIDE	ALLOT INITIATIVE COMMITTEE IS FORMED FOR THE F COMMITTEE WILL BE USED FOR THE PURPOSE DESC D THAT THIS BALLOT INITIATIVE COMMITTEE DOES NO	RIBED IN THIS STATEMENT OF ORG OT MAKE CONTRIBUTIONS OR EXPE	MMITTEES ONLY  DISING A QUESTION OF PUBLIC POLICY, ALL CONTRIBUTIONS AND  SANIZATION, THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FRO  BOTTURES IN SUPPORT OF OR OPPOSITION TO A CANDIDATE OR CANDIDATE  S SHALL DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE. (10 ILCS 5/9)			
PRIN	TED AND	WRITTEN SIGNATURE OF COMM	ITTEE CHAIRPERSON	DATE			
		VERIFICATION: IN	DEPENDENT EXPENDITURE	E COMMITTEES ONLY			
EXPEND FROM A	NTURES OF THE MY SOURCE, PR	INDEPENDENT EXPENDITURE COMMITTEE IS FORME COMMITTEE WILL BE USED FOR THE PURPOSE DIES	D FOR THE EXCLUSIVE PURPOSE O CRIBED IN THE STATEMENT OF OR MITTEE DOES NOT MAKE CONTRIB	- DF MAKING INDEPENDENT EXPEN DITURES, (II) ALL CONTRIBUTIONS AND RGANIZATION, (III) THE COMMITTEE MAY A CCEPT UNLIMITED CONTRIBUTION BUTIONS TO ANY CANDIDATE POUTICAL COMMITTEE, POLITICAL PARTY COMI			
PRIN	TED AND	WRITTEN SIGNATURE OF COMM	ITTEE CHAIRPERSON	DATE			
AND BE	LIEF, IS A TRUE,	TATEMENT OF ORGANIZATION (INCLUDING ANY ACCO	ATION AS REQUIRED BY ARTICLE 9 (	MMITTEES  EMENTS) HAS BEEN EXAMINED BY ME AND, TO THE BEST OF MY KNOWLEDGE OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OF			
PRIN	eres	9 (Tracy) Spesion	A Jeus	La Resia 2-19-1 E DATE			
THE ILL	INOIS STATE	BOARD OF ELECTIONS REQUIRES THE DISCI IBLIC ACT 78-1183, WILLPUL FAILURE TO FILE	OSURE OF INFORMATION THAT OR WILLFUL FILING OF FALSE	AT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE. OR INCOMPLETE INFORMATION REQUIRED BY THIS ARTICLE SHA LIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT.			
		ALL PO	LITICAL COMMITTEES RETU				
STATE BOARD OF ELECTIONS 2329 S MACARTHUR BLVD SPRINGFIELD, IL 62704-4503		2329 S MACARTHUR BLVD SPRINGFIELD, IL 62704-4503		STATE BOARD OF ELECTIONS JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100 CHICAGO, IL. 60601-3232			
	e-ma	fax: 217-557-5630 ii: <u>D1@ELECTIONS.IL.GOV(<b>D-1s ONLY</b>)</u>		fax: 312-814-6485			

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