Image# 29992027571

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM	1	ORGA	NIZAI	IOI	l				
		(See	instructions)				Office	use only	
1. NAME OF COMMITTE	E (in full)	(Check if is change		Examp over th	le: If typying, type e lines	12FE4	M5		
GRANT TH	IORNTON	LLP POLITICAL A	тіри сом	MITT	EE LLC				لبيا
				ш					لــــــا
ADDRESS (numbe	er and street)	1900 M Stree	t NW	ш		1111			لـــــــا
(Check if ad	ldress	Suite 300		ш					لــــــا
is changed)		Washington		ш		DC	لبنا	20036 _	3531
			CI	TY▲		STATE		ZIP CODI	E 📥
COMMITTEE'S E	-MAIL ADDF	RESS (Please provide o	nly one e-mail	addres	s)				
(Check if ad is changed)				ш					
				ш		1111			لحصا
(Check if ac is changed)	ldress	ADDRESS (URL)				1 1 1 1			
2. DATE	M M / 0 4	2 3 / Y Y Y Y Y 2 0 0 8	Y						
3. FEC IDENTI	FICATION N	UMBER	С	C004	08260				
4. IS THIS STA	ATEMENT	NEW (N)	OR	X	AMENDED (A)				
I certify that I have	examined this	Statement and to the bes	of my knowled	dge and I	pelief it is true, correct	and complete			
Type or Print Nam	ne of Treasure	er John R. 2	Ziegelbauei	r					
Signature of Treas	surer El <u>ec</u>	tronically Filed by Jo	hn R. Ziege	elbaue	er	Date	0 4 /	23	2008
NOTE: Submission	of false, erron	eous, or incomplete infor						2 U.S.C. S43	7g.
Office Use Only				F	or further informatio ederal Election Comm oll Free 800-424-9530 ocal 202-694-1100	nission		EC FOR (Revised 02/2	

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	COMMITTEE (Check One) Committee:							
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)							
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate						
Name of Candidate								
Candidate Party Affilia	Office Sought: House Senate President	State District						
(c)	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name of Candidate								
Party Com	Party Committee:							
(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.						
Political A	Political Action Committee (PAC):							
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:						
	Corporation Corporation w/o Capital Stock La	bor Organization						
	Membership Organization Trade Association Co	ooperative						
	In addition, this committee is a Lobbyist/Registrant PAC.							
(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)							
	In addition, this committee is a Lobbyist/Registrant PAC.							
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)							
Joint Fund	Joint Fundraising Representative:							
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.							
Cor	mmittees Participating in Joint Fundraiser							
	1. FEC ID number							
	2. FEC ID number C							
	3. FEC ID number							
	4 FEC ID number C	0 0 0						

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W	rite or Type Committee Name						
	GRANT THORNTON LLF	POLITICAL ACTION COMMITTEE LLC					
6.	Name of Any Connected Org	panization, Affiliated Committee, Joint Fundraising Repre	sentative, or Lead	ership PAC Sponsor			
Ш	none						
I							
	Mailing Address						
		CITY	STATE A	ZIP CODE			
	Relationship:			1			
	Connected Organization	Affiliated Committee Joint Fundraising F	Representative	Leadership PAC Sponsor			
	Full Name Mailing Address	1901 S. Meyers Road Suite 455					
		Oakbrook Terrace	IL	60181 _ 5243			
	Title or Position ▼	CITY A	STATE	ZIP CODE A			
	Assitant T			- <u>873</u> - <u>2542</u>			
_		·					
8.		and address (phone number optional) of the treasudesignated agent (e.g., assistant treasurer).	urer of the commi	ittee; and the			
	Full Name of Treasurer John R. Ziegelbauer						
	Mailing Address	Grant Thornton LLP					
		1900 M Street NW, Suite 300					
		Washington	DC	20036 3531			

202

Telephone number

861

4119

Managing Partner

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	Full Name of Designated Agent	Allison Moran		
	Mailing Address	1901 S. Meyers Road		
		Suite 455		
		Oakbrook Terrace	<u>IL</u> _	60181 – 5243
	Title or Position ▼	CITY A	STATE A	ZIP CODE A
	Assistant T	reasurer	Telephone number	873
9.	Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, etc.	ins funds.	hich the committee deposits funds, ho	ulds accounts, rents
		One North Franklin		
	Mailing Address			
		Suite 100		
		Chicago		60606
		CITY 🗻	STATE 4	ZIP CODE 🛕
	Name of Bank, Depository, etc			
	Mailing Address			
		CITY 🛕	STATE. ▲	ZIP CODE 🛕

Image# 29992027575 Form/Schedule: F1A Amended Statement of Organization adding 'none' to line six. Transaction ID: