

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED

2013 JUL -3 PM 12:00
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12 FEB 4 2013
FEC MAIL CENTER

PROGRESSIVE DEMOCRATS OF ILLINOIS CONGRESSIONAL DISTRICT THIRTEEN

ADDRESS (number and street)

618 NORTH GUERNSEY STREET

(Check if address is changed)

COLLINSVILLE

CITY ▲

IL

STATE ▲

62234

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

X (Check if address is changed)

treasurer@pac13.com

Optional Second E-Mail Address

chair@pac13.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.pac13.com

2. DATE 06 28 2013

3. FEC IDENTIFICATION NUMBER C 00545095

4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CLAY MICHAEL AWSUMB

Signature of Treasurer

Date 06 28 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

13031081712

5. TYPE OF COMMITTEE

Candidate 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 the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation _____ Office Sought: House Senate President State _____ District _____

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation Corporation w/o Capital Stock Labor Organization
 Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) 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 Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (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.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number
2. _____ FEC ID number
3. _____ FEC ID number
4. _____ FEC ID number

13031081713

Write or Type Committee Name

Progressive Democrats of Illinois Congressional District Thirteen

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

[Empty address fields]

CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name MICHAEL LEE HURST, JR.

Mailing Address 618 NORTH GUERNSEY STREET

COLLINSVILLE IL 62234

Title or Position CITY STATE ZIP CODE

ASSISTANT TREASURER Telephone number 618-345-7947

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer CLAY MICHAEL AWSUMB

Mailing Address 2113 EAST COUNTRY SQUIRE DRIVE

URBANA IL 61802

CITY STATE ZIP CODE

Title or Position TREASURER Telephone number 618-570-3360

13031081714

Full Name of Designated Agent

MICHAEL LEE HURST, JR.

Mailing Address

618 NORTH GUERNSEY STREET

COLLINSVILLE

CITY

IL

STATE

62234

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

618

345

7947

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

COMMERCE BANK

Mailing Address

1015 WINDSOR ROAD

CHAMPAIGN

CITY

IL

STATE

61821

ZIP CODE

Name of Bank, Depository, etc.

COMMERCE BANK

Mailing Address

2496 TROY ROAD

EDWARDSVILLE

CITY

IL

STATE

62025

ZIP CODE

13031081715

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Amis
 PREPARER
 (3/2005)

7/5/13
 DATE PREPARED

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