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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic Citizens of Berwyn 2140 S. Oak Park ADDRESS (number and street) (Check if address is changed) Berwyn 60402 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@dcob.org (Check if address is changed) Optional Second E-Mail Address |berwyn222@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 29 2020 C00743138 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR 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. Fellows, Michael, W,, Type or Print Name of Treasurer Fellows, Michael, W,, [Electronically Filed] 03 29 2020 Signature of Treasurer Date 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 4go 2
Cano	didate	Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
Name Candi			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	J T
Democratic Citizens of Berwyn	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
NONE	
Mailing Address	
CITY STATE ZI	P CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leader	ership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in posse books and records.	ssion of committee
Fellows, Michael, W, ,	1
18W025 Holly Ave.	
Mailing Address	
Darien IL 60561	1 1
Title or Position CITY STATE ZIF	P CODE
Treasurer Telephone number Telephone number	2 2898
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	and address of
Full Name Fellows, Michael, W, ,	
of Treasurer	
Mailing Address	
Darien IL 60561	
	CODE
Title or Position Treasurer Telephone number Telephone number	

	1 (Revised 02/2009)	
Full Name of Designated Agent	Lovero, Robert, J, ,	
Mailing Address	1824 S. Wenonah	
	Berwyn CITY STATE ZIP	CODE
Title or Position Committeemen		
	Depositories: List all banks or other depositories in which the committee deposits funds, holds ac	ccounts, rents
	oxes or maintains funds. Depository, etc.	
safety deposit bo Name of Bank, D	exes or maintains funds.	
safety deposit bo	Depository, etc. Byline Bank	
safety deposit bo Name of Bank, D	Depository, etc. Byline Bank 3322 S. Oak Park	
safety deposit bo Name of Bank, D	Depository, etc. Byline Bank	
safety deposit bo Name of Bank, D	Berwyn Berwyn	P CODE
safety deposit bo Name of Bank, D	Berwyn CITY STATE ZIF	
safety deposit bo Name of Bank, E Mailing Address	Berwyn CITY STATE ZIF	
safety deposit bo Name of Bank, E Mailing Address	Berwyn CITY STATE ZIF	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Berwyn CITY STATE ZIF	
safety deposit bo Name of Bank, E Mailing Address Name of Bank, E	Berwyn CITY STATE ZIF	