STATEMENT OF

FORM 1	ORGANIZ (See instruction			24
1. NAME OF	(Check if name	Example: If typying, type	10554M5	Office use only
COMMITTEE (in t	full) is changed)	over the lines	12FE4M5	
UNITED FOR F	PROGRESS LEADERSHIP COMM	NITTEE		
ADDRESS (number and s	street) PO BOX 285			
(Check if address				
is changed)	MASCOUTAH			62258 -
		CITY▲	STATE	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e			
(Check if address is changed)	Unitedforprogres@a	aol.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address	; <u> </u>		<u> </u>	
is changed)				
2. DATE 0.3	28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00429787		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A	N)	
Land'S that the constant			ant and a smallet	
r certify that i have exami	ned this Statement and to the best of my kno	owieage and belief it is true, corr	ect and complete	
Type or Print Name of	Treasurer Mr. David Wagn	er		
Signature of Treasurer	Electronically Filed by Mr. David	l Wagner	Date 03	28 Y 2009
NOTE: Submission of fall	se, erroneous, or incomplete information ma	ay subject the person signing this		-
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-9	mmission 530	FEC FORM 1 (Revised 02/2009)

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5.		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 th information below.)	e candidate				
	Name of Candidate						
	Candidate Party Affilia		State District				
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate						
	Party Con	(Nethernal Otels					
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Political A	ction 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 Lab	or Organization				
		Membership Organization Trade Association Co	pperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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 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.					
	Co	mmittees Participating in Joint Fundraiser					
		1. FEC ID number					
		2. FEC ID number					
		3. Hilling FEC ID number C					
		EEC ID number C					

Treasurer

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W	rite or Type Committee Name			. ago c	
	UNITED FOR PROGRES	S LEADERSHIP COMMITTEE			
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundrais	ing Representative, or Leader	ship PAC Sponsor	
	Mailing Address	2608 Protour Drive			
	Mailing Address				
		Belleville		62220 _	
		CITY▲	STATE ▲	ZIP CODE 🛕	
	Relationship: Connected Organization	Affiliated Committee Joint Fur	ndraising Representative X	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 P O Box 285				
		Mascoutah		62258 _ 0285	
	Title or Position ▼ Chairman	CITY A Treasurer	STATE Selephone number 618 -	ZIP CODE 14 - 409 - 6620	
8.		and address (phone number optional) of to designated agent (e.g., assistant treasurer)		ee; and the	
	Full Name of Treasurer Mr. Da	vid Wagner			
	Mailing Address	P O Box 285			
		Mascoutah		62258 _ 0285	
	Title or Position ♥	CITY	STATE A	ZIP CODE A	

409

6220

618

Telephone number

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	Full Name of Designated Agent	Mr. David Wagner				
	Mailing Address	P O Box 285				
		Mascoutah	IL	62258 – 0285		
	Title or Position ▼	CITY A	STATE A	ZIP CODE A		
		Tele	phone number			
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.					
	The	Bank of Edwardsville				
	Mailing Address	1177 N. Greenmount Road				
		O'Fallon		62269		
		CITY 🗖	STATE⊿	ZIP CODE 🛕		
	Name of Bank, Depository, e	etc.				
	Mailing Address					
				717 0005		
		CITY 🙇	STATE. △	ZIP CODE 🛕		