Image# 202301319575471730				PAGE 1 / 4
FEC FORM 1	STATEME ORGANIZ	_		
				Office Use Only
. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Restoration PA	С			
	1901 Butterfield Road			
DDRESS (number and street)	Ste. 920			
is changed)				
	Downers Grove CITY ▲		LL STATE ▲	60515 − ZIP CODE ▲
OMMITTEE'S E-MAIL ADD	RESS			
(Check if address is changed)	sg@restorationpac.co	m 		
	Optional Second E-Mail Ac			
COMMITTEE'S WEB PAGE (Check if address is changed)	ADDRESS (URL)			
. DATE 01 /	31 / Y Y Y Y 32023			
. FEC IDENTIFICATION	NUMBER ► C C	00571588		
. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	t of my knowledge and belief it	t is true, correct a	and complete.
ype or Print Name of Treas	urer Gaskill, Sherry, , ,			
Signature of Treasurer	ıskill, Sherry, , ,	[Electronically Filed]	Date 01	/ D D / Y Y Y Y 31 2023
IOTE: Submission of false, eri	oneous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signing TION SHOULD BE REPORTED		
Office Use		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

Local 202-694-1100

Only

01/31/2023 15 : 05

Candidate 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 Office State Party Affiliation Sought: House Senate President	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (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 organizatio	n 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 par committee. (i.e., nonconnected committee)	ty
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) X This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

Joint Fundraising Representative:

(i) 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.
 (j) 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.
 (j) Committees Committees 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
 2.

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Write or Type Committee Name	

Restoration PAC

6.	Name of Any NONE	Con	nec	ted	0	rga	niz	atio	on,	Af	filia	ateo	4 C	on	nmi	itte	e, .	Joi	int	Fι	Ind	Irai	sir	ng	Re	pre	se	nta	tiv	e, (or	Lea	ade	ers	hip	P	AC	S	роі	nso	or	
	Mailing Addres	SS				L																																				
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	Relationship:	(Conr	nect	ed	Orę	gani	izat	ion	C	/	Affili	ate	ed C	Drga	aniz	zatio	on	[Jo	oint	Fu	ndr	ais	ing	Re	epre	ese	ntat	ive			l	_ea	dei	rshi	ip F	PAC	s	por	nsoi

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

Gewont, Ja	nina, , ,
Full Name	
Mailing Address	1901 Butterfield Road
	Ste. 920
	Downers Grove IL 60515 - - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 630 - 601 - 1504

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	Gaskill, Sherry, , ,
of Treasurer	
Mailing Address	1901 Butterfield Road
	Ste. 920
	Downers Grove IL 60515 I I I I
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

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Full Name of Designated Agent	Truax, Doug, , ,	
Mailing Address	1901 Butterfield Road, Suite 920	
	Downers Grove IL 60515	
Title or Position	CITY A STATE A ZIP CODE A	
Chairman	Telephone number 630 - 601 - 1504	

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.

	Chain Bridge Bank		1
Mailing Address	1445-A Laughlin Avenue		
	McLean	VA 22101	
		STATE A	ZIP CODE
Name of Bank, [
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE