Only

## STATEMENT OF

PAGE 1 / 4

**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Citizens for Brian Deters 1806 Greenfield Dr ADDRESS (number and street) (Check if address is changed) Morton 61550 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS deters6@hotmail.com (Check if address is changed) Optional Second E-Mail Address ilsupan@hotmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) briandetersforcongress.com (Check if address is changed) DATE 2017 C00661348 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. Deters, Joni, , , Type or Print Name of Treasurer Deters, Joni, , , [Electronically Filed] 2017 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

Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>		
TYPE OF C				
v.	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. (Com information below.)	plete the candidate		
Name of Candidate	Deters, Brian, , ,			
Candidate	Office	State		
Party Affiliati	on DEM Sought: X House Senate President	District 18		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	2.00.		
Name of Candidate				
Party Con	nmittee:			
(d)	· · · ·	(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 as			
	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 segregate 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	draising 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			
Com	mittees Participating in Joint Fundraiser			
1.	FEC ID number			
2.	FEC ID number			
3.	FEC ID number			
4.				

FEC Form 1 (Revised 02	2/2009)	Page <b>3</b>
Write or Type Committee Name	· · ·	
Citizens for Bria	n Deters	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in	possession of committee
Deters, Jon Full Name	i, , , , , , , , , , , , , , , , , , ,	
Mailing Address	1806 Greenfield Dr	
	<u> </u>	
	Morton IL 615	50
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
. <b>Treasurer:</b> List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the sistant treasurer).	e name and address of
Full Name Deters, Joni of Treasurer	,,, 	
Mailing Address	1806 Greenfield Dr	
	Morton   IL   6155	50
Title or Position	CITY STATE	ZIP CODE
	Telephone number	.     -

FEC Form 1 (Revis	sed 02/2009)	Page <b>4</b>
Full Name of Designated Agent Sturm, [		
Mailing Address	1410 Fell Ave	
		64704
	Bloomington IL CITY STATE	61701 ZIP CODE
Title or Position		
	Telephone number	
Mailing Address	825 S. Detroit Avenue	61550
	CITY STATE	ZIP CODE
Name of Bank, Depository	y, etc.	
Mailing Address		
Mailing Address		
Mailing Address		