

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2013 JAN -4 AM 7:29  
Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

FEC MAIL CENTER

BEALE FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 286404

(Check if address is changed)

CHICAGO

CITY ▲

IL

STATE ▲

60628

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

BEALEFORCONGRESS@BEALEFORCONGRESS.COM

Optional Second E-Mail Address

ALDERMANIS@NETSCAPE.NET

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

BEALEFORCONGRESS.COM

2. DATE

12 17 2012

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT

N

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.

Type or Print Name of Treasurer

STEVEN R. BURRIS

Signature of Treasurer

Steven R. Burris

Date

12 17 2012

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 Use Only

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

FEC FORM 1  
(Revised 06/2012)

13030994778

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 ANTHONY A. BEALE

Candidate Party Affiliation DEN Office Sought:  House  Senate  President State IL District 02

- (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 C
- 2. \_\_\_\_\_ FEC ID number C
- 3. \_\_\_\_\_ FEC ID number C
- 4. \_\_\_\_\_ FEC ID number C

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Write or Type Committee Name

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

NONE

Mailing Address

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

STEVEN R. BURRIS

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

708-372-0176

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

STEVEN R. BURRIS

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

708-372-0176

13030994780

Full Name of Designated Agent

VANESSA BROWN

Mailing Address

12423 S WABASH

CHSD

CITY

IL

STATE

60628

ZIP CODE

Title or Position

ASST TREASURER

Telephone number

312-213-8436

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.

US BANK

Mailing Address

1000 EAST WILTH STREET

CHICAGO

CITY

IL

STATE

60628

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13030994781

Federal Election Commission  
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The FEC added this page to the end of this filing to indicate how it was received.

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No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

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Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JmD*  
PREPARER  
(3/2005)

*1/4/13*  
DATE PREPARED

13030994782