Image# 202201259475163822			-	
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4
			Office Use Only	
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	281 Tower Hill Drive			
(Check if address is changed)				1
lis changed)	ST CHARLES		IL 60175	
	CITY ▲		STATE ZIP	CODE A
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	n90atc@gmail.com			
<u> </u>	Optional Second E-Mail Ad	dress OM		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 05 / 0				
3. FEC IDENTIFICATION N	JMBER ► C c	00677641		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined the	nis Statement and to the best	of my knowledge and belief it	is true, correct and complete.	
Type or Print Name of Treasure	r Bachman, William, , , 			
Signature of Treasurer	nan, William, , ,	[Electronically Filed]	Date 01 / 25	Y Y Y Y 2022
NOTE: Submission of false, erron		may subject the person signing t ON SHOULD BE REPORTED W		2 U.S.C. §437g.
Office Use Only		For further information constrained Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	EEL. EL	

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FEC	C Form 1 (Revised 02/2009)	Page 2
TYPE C	DF COMMITTEE	
Candi	date 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. (Comp information below.)	plete the candidate
Name o Candida		
Candida Party Af		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	
(d)	(National, State	Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
	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 seg 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 F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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
(Committees Participating in Joint Fundraiser	
	1 FEC ID number C	
	2 FEC ID number C	
3	3 FEC ID number C	
2	4 FEC ID number C	

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Write or Type Committee Name

ILLINOIS 14 ALLIANCE

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

Mailing Address				
		CITY	STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee		ed Committee	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.				

Bachman,	William, , ,
Full Name	
	281 Tower Hill Drive
Mailing Address	
	Saint Charles IL 60175 IL IL IL IL
Title or Position	CITY STATE ZIP CODE
	Telephone number

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	Bachman, William, , ,
of Treasurer	
Mailing Address	281 Tower Hill Drive
	Saint Charles
	CITY STATE ZIP CODE
Title or Position	630 577 7074 Telephone number - -

Full Name of Designated Agent	ВАСНМАN, WILLIAM, К, ,
Mailing Address	281 TOWER HILL DRIVE
	ST CHARLES
	CITY STATE ZIP CODE
Title or Position	Telephone number 630 - 577 - 7074

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.

Ν	ame	of	Bank,	Depository,	etc.
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KANE	COUNTY TEACHERS CREDIT UNION	
Mailing Address		
	ELGIN	L IL 60123
	CITY	STATE ZIP CODE
Name of Bank, Depository	etc.	
Mailing Address		
	CITY	STATE ZIP CODE