FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Casey for Senate 2307 Carrington Way ADDRESS (number and street) (Check if address is changed) Glenview 60026 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS caseychlebek@comcast.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) caseyforsenate.com (Check if address is changed) DATE 05 2019 C00714998 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. Walsh, Ryan, , , Type or Print Name of Treasurer Walsh, Ryan, , , [Electronically Filed] 80 2019 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

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		COMMITTEE e Committee:	
(a)	x	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Name	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.) Chlebek, Casey, , ,	the candidate
Cano	lidate		
	lidate ⁄ Affiliati	ion REP Sought: House X Senate President	State IL District 00
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Part	ty Con	nmittee: (National, State (Den	nocratic,
(d)		· · ·	iblican, etc.) Party
Poli	tical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is
		Corporation Corporation w/o Capital Stock Lal	oor Organization
		Membership Organization Trade Association Co	operative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated 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.)	
Join	t Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number C	
	3.	FEC ID number	
	4.		

Write or Type Comm																		
Casey for	Senate)																
6. Name of Any Co	nnected Orga	anization, Affil	iated Co	nmitt	ee, Jo	oint Fu	ındrai	ising	Repr	ese	ntat	ive,	or L	.eade	rship	PAC	Spons	or
NONE																		
Mailing Address	L																	
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Relationship:	Connected Or	rganization	Affiliated	Comn	nittee		oint F	undra	ising	Rep	orese	enta	tive		_eade	rship	PAC Sp	onsc
Custodian of Rec books and records	-	/ by name, add	ress (pho	ne nu	mber	opt	ional)	and	oositi	on c	of th	е р	ersoi	n in p	osse	ssion	of com	nitte
- " N	Chlebek, Case	sey, , ,																
Full Name	2:	2307 Carrington	Way															
Mailing Address	L																	
		Glenview									L		.6	60026				
	L									L			L			Ш-		
Title or Position			CI	ΓΥ						STA	ATE				ZII	COE	DΕ	
							Telep	ohone	num	ıber]-[
																		of
. Treasurer: List the any designated ag	e name and ad	ddress (phone istant treasurer)	number -	- optic	onal) d	of the	treası	urer o	f the	con	nmit	tee;	and	the	name	and a	address	
. Treasurer: List the any designated ag Full Name of Treasurer	e name and adjent (e.g., assi	istant treasurer)	number	- optio	onal) o	of the	treası	urer o	f the	con	nmit	tee;	and	the	name	and a	address	
any designated ag	yent (e.g., assi	istant treasurer)).	- optio	onal) d	of the	treas	urer o	f the	con	nmit	tee;	and	the	name	and a	address	
any designated ag Full Name of Treasurer	yent (e.g., assi	istant treasurer)).	- optio	onal) (of the	treası	urer o	f the	con	nmit	tee;	and	the	name	and a	address	
any designated ag Full Name of Treasurer	yent (e.g., assignation of the second of the	istant treasurer)	ood Ave.		onal) o	of the	treası	urer o	f the		IL	ttee;		the				
any designated ag Full Name of Treasurer	yent (e.g., assignation of the second of the	istant treasurer) ,, 35 W. Wrightwo).		onal) o	of the	treasi	urer o	f the		IL							

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Full Name of Designated Agent		<u></u>
Mailing Address		
		, _ .
	CITY STATE Z	IP CODE
Title or Position		1 1
	Telephone number	
Banks or Other safety deposit bo Name of Bank, D		accounts, rents
safety deposit bo	chase 2801 Pfingsten Rd. Glenview IL 60026	accounts, rents
safety deposit bo Name of Bank, E	chase 2801 Pfingsten Rd. Glenview IL 60026	
safety deposit bo Name of Bank, E	chase 2801 Pfingsten Rd. Glenview CITY STATE Z	accounts, rents
safety deposit bo Name of Bank, E Mailing Address	chase 2801 Pfingsten Rd. Glenview CITY STATE Z	
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