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05/08/2023 10 : 57

STATEMENT OF
ORGANIZATION

FEC FORM 1	STATEMENT ORGANIZATI	-		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)		ample: If typing, type er the lines.	12FE4M5	
Quigley for Cong	ress			
ADDRESS (number and street)	1025 W. Addison Street			
 (Check if address is changed) 	Apt. 515			
	Chicago └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └		LL STATE ▲	2613 – ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ISS			
(Check if address is changed)	fec@cfoconsults.com			
	Optional Second E-Mail Address			
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
2. DATE 05 / 0	B / Y Y Y Y 2023			
3. FEC IDENTIFICATION N	UMBER ► C C00457	556		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined the	nis Statement and to the best of my	v knowledge and belief it i	s true, correct an	d complete.
Type or Print Name of Treasure	r Kelly, Erica, , ,			
Signature of Treasurer	Erica, , ,	[Electronically Filed]	Date 05	/ D D / Y Y Y Y Y 08 2023
NOTE: Submission of false, erron	eous, or incomplete information may s ANY CHANGE IN INFORMATION			e penalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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5. TYPE	OF COMMITTEE:	
Cand	didate 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 information below.)	ne candidate
	ne of Quigley, Mike, , , ndidate	
	ndidate Office Sought: K House Senate President	State IL
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 05
	ame of andidate	
(d)	y Committee: This committee is a (National, State (Democration or subordinate) committee of the Republicar	ic, n, etc.) Party
	ical Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:
	Corporation Corporation w/o Capital Stock Labor (Organization
	Membership Organization Trade Association Cooper	ative
	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)	ed 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.)	
(g)	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 F	AC).

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.
 Committees Participating in Joint Fundraiser
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

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Write or Type Committee Name

Quigley for Congress

М	lailing Address																								
																L							- L		
							С	ЯT	Y							ST	ATE			Z	ΊP	со	DE		

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

Kelly, Erica	a, , ,	
Full Name		
Mailing Address	1830 W. Fletcher Street	
	Chicago	IL 60657
	CITY A	STATE ▲ ZIP CODE ▲
Title or Position ▼		
Treasurer	Telephone n	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	Kelly, Erica, , ,							
of Treasurer								
Mailing Address	1830 W. Fletcher Street							
	Chicago							
	CITY ▲ STATE ▲ ZIP CODE ▲							
Title or Position ▼								
Treasurer	Image:							

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Full Name of Designated Agent	Galvin, Brendan, , ,	
Mailing Address	One Park Row, 5th Floor	
	Providence RI 02903	
	CITY A STATE A Z	
Title or Position		
Accountant	Telephone number	.54

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.

Byline	Bank		
Mailing Address	1401 W Belmont		
	Chicago	□ IL 60657	
		STATE A	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE ▲