

# SCHEDULE A-1

## REPORT OF CAMPAIGN CONTRIBUTIONS OF \$1000 OR MORE

STATE OF ILLINOIS <b>FOR OFFICE USE ONLY</b> 15 MAR -4 PM 3:35
POLITICAL COMMITTEE IDENTIFICATION No. <b>29472-3</b>

Full name and complete mailing address of Political Committee:

Ron Sly for New Lenox  
143 Wallace St.  
New Lenox, IL 80451

CHECK IF AN ADDRESS CHANGE

**SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.**

**Note: Schedule A-1 reporting requirements now apply throughout the calendar year.**

This form must be filed within 5 business days after receipt of any contribution of \$1000 or more, or within 2 business days if that receipt was within 30 days or less before the date of an election and the political committee supports or opposes a candidate or public question on the ballot at that election or makes expenditures in excess of \$500 on behalf of or in opposition to a candidate(s), or a public question(s), on the ballot at that election by either:

1. **HAND DELIVERY** - to a State Board of Elections office (see bottom of form for addresses),
2. **FACSIMILE** - to (217)-557-5630 or (312)-814-8485. Please retain a confirmation transmission for your records,
3. **ELECTRONIC TRANSMISSION** - If this political committee is required to file its reports electronically, the Schedule A-1 must also be filed electronically.

Postal service or other mail services may be used, **CAUTION**; such services do not guarantee that the A-1 form will be received by our office prior to the deadline. **A POSTMARK IS NOT USED TO DETERMINE WHETHER AN A-1 FORM HAS BEEN TIMELY FILED.**

**THESE CONTRIBUTIONS MUST ALSO BE REPORTED ON THE NEXT REGULARLY SCHEDULED FORM D-2 QUARTERLY REPORT, SCHEDULE A OR SCHEDULE I.**

RECEIVED FROM: FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE	AMOUNT
Renetta Bridge 21155 Wooded Cove Drive, Elwood, IL. 60421	3/2/15	\$ 1000.00
Postl-Yore and Associates, Inc. 2100 Golf Road Suite 320, Rolling Meadows, IL. 60008	3/2/15	\$ 1500.00
Blasing Construction Co. P.O. Box 654, New Lenox, IL. 60451	3/2/15	\$ 1000.00
		\$
		\$

  
SIGNATURE OF TREASURER OR CANDIDATE

3/4/15  
DATE

Name and address of person submitting this report if other than the committee's chairman or treasurer:

THE ILLINOIS STATE BOARD OF ELECTIONS IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS OUTLINED UNDER PUBLIC ACT 78-1198. DISCLOSURE OF THIS INFORMATION IS REQUIRED. FAILURE TO PROVIDE ANY INFORMATION COULD RESULT IN A FINE UP TO \$5000. THIS FORM IS IN COMPLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT.

ALL POLITICAL COMMITTEES RETURN TO:

STATE BOARD OF ELECTIONS  
2329 S. MacArthur Blvd.  
SPRINGFIELD, IL. 62708-4187

OR

STATE BOARD OF ELECTIONS  
JAMES R. THOMPSON CENTER  
100 W RANDOLPH ST, STE 14-100  
CHICAGO, IL. 60601-3232