

SCHEDULE A-1
REPORT OF CAMPAIGN CONTRIBUTIONS
OF
MORE THAN \$500

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| FOR OFFICE USE ONLY |
| POLITICAL COMMITTEE IDENTIFICATION NO. NON-PROFIT ORGANIZATION |

Full name and complete mailing address of Political Committee:

Two Party System Inc.
 P.O. Box 81737
 Chicago, IL 60681-0737

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

This form must be on file within **TWO** business days of receipt of a contribution in an aggregate of more than \$500 received: a) in the period from January 1st up through and including the day before a General Primary Election or b) in the 30 day period preceding any other election, (up through and including the day before any 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 (217)-782-5959. Please retain a confirmation transmission for your records, or
3. **ELECTRONIC TRANSMISSION**

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.**

This form must be on file with the State Board of Elections within two business days of receipt of a contribution of more than \$500 or penalties will be levied for late filings. Report may be hand delivered or faxed to (217)-557-5630 or (217)-782-5959.

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

| RECEIVED FROM: FULL NAME, MAILING ADDRESS, AND ZIP CODE | DATE | AMOUNT |
|---|------------|--------------|
| Kenneth C. Griffin 131 S. Dearborn Street Chicago, IL 60603 | 10/20/2010 | \$ 35,000.00 |
| Patrick G. Ryan, Jr. 815 W. Van Buren Street, Suite 500 Chicago, IL 60607 | 10/21/2010 | \$ 10,000.00 |
| | | \$ |
| | | \$ |
| | | \$ |

Judy D. McGarvey 10/21/2010
SIGNATURE OF TREASURER OR CANDIDATE **DATE**

ILLINOIS STATE BOARD OF ELECTIONS IS REQUESTING DISCLOSURE INFORMATION THAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS OUTLINED UNDER PUBLIC ACT 78-1182. DISCLOSURE OF THIS INFORMATION IS REQUIRED. FAILURE TO PROVIDE ANY INFORMATION COULD RESULT IN A FINE UP TO \$5,000. THIS FORM IS IN COMPLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT

STATE POLITICAL COMMITTEES RETURN TO:
 STATE BOARD OF ELECTIONS OR STATE BOARD OF ELECTIONS
 1020 S SPRING ST 1020 S SPRING ST
 PO BOX 4187 JAMES R. THOMPSON CENTER
 SPRINGFIELD, IL 62706-4187 100 W RANDOLPH ST, STE 14-100
 (217) 557-5630 FAX, (217) 782-6888 FAX CHICAGO, IL 60601-3232

LOCAL POLITICAL COMMITTEES AND STATE AND LOCAL POLITICAL COMMITTEES SHALL FILE WITH THE STATE BOARD OF ELECTIONS AND EACH APPROPRIATE COUNTY CLERK

(THIS FORM MAY BE REPRODUCED)

SEE INSTRUCTIONS ON REVERSE SIDE

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Revised 8/07