|  | RECORD OF COMMITTEE WITNESS STATE SENATE |              |  |
|--|--|--------------|--|
|  | COMMITTEE                                |              | DATE 7/39/09   |
| BILL OR RESOLUTION NUMBER  |  |              | / / /  |
| I IDENIMICA MICA   | OTHER (Subject matter                    | )            |  |
| I. IDENTIFICATION  | 15.160 000                               | Ca la a      | 3.1-   |
| Name GAIL M. NRI   | MENEC ASSI. RI                           | -GIONAL CE   | INSUS MAMAGER  |
| Firm/Business/Agency U.S   | CENSUS BURE                              | EAU          |  |
| Name GAIL A. KRI<br>Firm/Business/Agency U.S<br>Address 500 WEST A | MADISON ST. STE.11                       | 6:80 CHICAGI | $\frac{2}{2}  \text{State } \frac{1}{2}  \frac{1}{2} \frac{1}{2$ |
| Title  |  |              | 5 tate 1 2 2 p   |
| III. POSITION (Check appropriate box)                              | SUS BUREAU                               |              |  |
| Original Bill  | Proponent                                | Opponent     | No Position on Merits  |
| Amendment(s) #   | Proponent                                | Opponent     | ☐ No Position on Merits  |
| Conference Committee Report #                                      | Proponent                                | Opponent     | ☐ No Position on Merits  |
| IV. TESTIMONY (Check appropriate bo                                | x)                                       | 0            |  |
| ☐ Oral ☐ W   | ritten Statement Filed                   | Record o     | f Appearance Only  |
|  |  |              | pulna  |
|  | Signature                                | 11m 62. 8    | poline   |
|  | /  | 17           |  |

| BILL OR RESOLUTION NUMBER  I. IDENTIFICATION  Name PAUL GREEN  Firm/Business/Agency Roose  Address 430 S. Michig  Title Interface Truster | COMMITTEE LEGIS OTHER (Subject matter                       | STATE SENAT                     | COMMISSION -7/29/09   |
|---|---|---------------------------------|---|
| Title   | if the witness is appearing<br>presented in this appearance | on behalf of any gro            | up, organization or other entity.)  |
| Original Bill  Amendment(s) #  Conference Committee Report #  | Proponent   | ☐ Opponent☐ Opponent☐ Opponent☐ | <ul><li>□ No Position on Merits</li><li>□ No Position on Merits</li><li>□ No Position on Merits</li></ul> |
| IV. TESTIMONY (Check appropriate bbx)  Vi Oral  Written   | Statement Filed Signature                                   | Record                          | popearance Only   |

|   | RECORD OF                | COMMITT<br>STATE SENAT |                                      |  |  |  |
|---|--------------------------|------------------------|--------------------------------------|--|--|--|
| Co  | OMMITTEE                 | 18 Tricler 5           | DATE 7/29/89                         |  |  |  |
| BILL OR RESOLUTION NUMBER OT  | THER (Subject matter     | Redistr                | eding                                |  |  |  |
| I. IDENTIFICATION Name DAWN CLAS  | 2K NET                   | sett                   | J                                    |  |  |  |
| Firm/Business/Agency  |                          |                        |                                      |  |  |  |
| Address 1700 N HUGSON   |                          | City Chicago           | State_ <u>\$1</u> Zip <u>606 / 4</u> |  |  |  |
| Title Trofssor Emer   | du-                      |                        |                                      |  |  |  |
| II. REPRESENTATION (This section to filled if the witness is appearing on behalf of any group, organization or other entity.) |                          |                        |                                      |  |  |  |
| Name of person(s), group(s), firm(s) represe  |                          | <i>L</i> , * .         |                                      |  |  |  |
| III. POSITION (Check appropriate box)   |                          |                        |                                      |  |  |  |
| Original Bill   | Proponent                | Opponent               | ☐ No Position on Merits              |  |  |  |
| Amendment(s) #  | Proponent                | Opponent               | ☐ No Position on Merits              |  |  |  |
| Conference Committee Report #   | 🔲 Proponent              | Opponent               | ☐ No Position on Merits              |  |  |  |
| IV. TESTIMONY (Check appropriate box)   |                          |                        |                                      |  |  |  |
| Oral Written Sta  | ntement Filed  Signature | Francis 1              | Appearance Oply Link helich          |  |  |  |

|                                  | RECORD OF COMMITTEE WITNESS STATE SENATE |              |  |
|----------------------------------|--|--------------|--|
|                                  | COMMITTEE Redi                           | stricting    | DATE 7-29-09   |
| BILL OR RESOLUTION NUMBER        |  | 17 500       |  |
| I. IDENTIFICATION                | (  | /            |  |
| Name Ami Gandl                   | n-Legal Director                         |              | 9.00 March 100 M |
| Firm/Business/Agency_A           | sian American Instit                     | ute          |  |
| Address 4753 N.                  | Broadway St., Ste. 904                   | City Chicago | State IL Zip 60640   |
| Title                            |  |              |  |
| Name of person(s), group(s       |  |              | I can community  |
| III. POSITION (Check appropriate | e box)                                   |              |  |
| Original Bill                    | Proponent                                | Opponent     | No Position on Merits  |
| Amendment(s) #                   | Proponent                                | Opponent     | ☐ No Position on Merits  |
| Conference Committee Repor       | t#Proponent                              | Opponent     | No Position on Merits  |
| IV. TESTIMONY (Check appropr     | iate box)                                |              |  |
| Oral                             | Written Statement Filed                  | Record o     | f Appearance Only  |
|                                  | Signature                                |              |  |