

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Brad Ashford for Congress

ADDRESS (number and street)

PO Box 24023



Check if different than previously reported. (ACC)

Omaha

NE

68124

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00557181

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NE

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2017

through

M M / D D / Y Y Y Y

03 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Barrett, Frank, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Barrett, Frank, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 12

Write or Type Committee Name  
**Brad Ashford for Congress**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
 01 / 01 / 2017

To:

M M / D D / Y Y Y Y  
 03 / 31 / 2017

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	2500.00	3057.21
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	2500.00	3057.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2620.36	34384.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	988.98	1083.99
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	1631.38	33300.82
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3587.67	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	2000.00	

## For further information contact:

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Brad Ashford for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	7

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	7

**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

2500.00

2500.00

**(ii) Unitemized.....**

0.00

557.21

**(iii) TOTAL of contributions from individuals ▶**

2500.00

3057.21

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS**

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

2500.00

3057.21

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS**

(add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES**

(Refunds, Rebates, etc.) .....

988.98

1083.99

**15. OTHER RECEIPTS**

(Dividends, Interest, etc.) .....

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

3488.98

4141.20

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2620.36	34384.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	2620.36	34384.81

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2719.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3488.98
25. SUBTOTAL (add Line 23 and Line 24).....	6208.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2620.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3587.67

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Brad Ashford for Congress**

Full Name (Last, First, Middle Initial)

**Roos, Janet, M, ,**

**A.**

Mailing Address 16309 Western Ave

City

Omaha

State

NE

Zip Code

68118-2481

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Broadmoor Development

Occupation

Manager

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify) ▼

Debt General 2016

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2017

Transaction ID : VNJ61FQ2CX3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2500.00

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 12

☐ 11a ☐ 11b ☐ 11c ☒ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**Brad Ashford for Congress**

Full Name (Last, First, Middle Initial)

**Omaha Public Power District**

**A.**

Mailing Address PO Box 3995

City

Omaha

State

NE

Zip Code

68103-0995

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

487.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2017

Transaction ID : VNJ61FPZXG3

Amount of Each Receipt this Period

487.67

☐ Memo Item

Refund of overpayment

Full Name (Last, First, Middle Initial)

**Metropolitan Utilities District**

**B.**

Mailing Address 1723 Harney St

City

Omaha

State

NE

Zip Code

68102-1960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

489.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2017

Transaction ID : VNJ61FPZXK6

Amount of Each Receipt this Period

489.14

☐ Memo Item

Refund of overpayment

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

976.81

976.81

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Brad Ashford for Congress

Full Name (Last, First, Middle Initial)

**A. American National Bank**

Mailing Address 8990 W Dodge Rd

City  
OmahaState  
NEZip Code  
68114-3383Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	24	2017

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : VNH6SA8A4B0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American National Bank**

Mailing Address 8990 W Dodge Rd

City  
OmahaState  
NEZip Code  
68114-3383Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	06	2017

FEC Identification Number

C

Amount of Each Disbursement this Period

66.00

Transaction ID : VNH6SA89ZR0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Frontline Private Security**

Mailing Address PO Box 641616

City  
OmahaState  
NEZip Code  
68164-7616Purpose of Disbursement  
Security Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	27	2017

FEC Identification Number

C

Amount of Each Disbursement this Period

429.34

Transaction ID : VNH6SA8A4A2

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

500.34

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Brad Ashford for Congress

Full Name (Last, First, Middle Initial)

**A. American National Bank**

Mailing Address 8990 W Dodge Rd

City  
OmahaState  
NEZip Code  
68114-3383Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : VNH6SA89ZQ2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Castle Barrett**

Mailing Address 4330 Leavenworth St

City  
OmahaState  
NEZip Code  
68105-1032Purpose of Disbursement  
Event Room Rental and Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

755.70

Transaction ID : VNH6SA89ZW2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paramount Parking**

Mailing Address 5900 S 77th St

City  
OmahaState  
NEZip Code  
68127-4267Purpose of Disbursement  
Parking Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

526.50

Transaction ID : VNH6SA89ZV4

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1287.20

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Brad Ashford for Congress

Full Name (Last, First, Middle Initial)

**A. The Jewish Press**

Mailing Address 333 S 132nd St

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2017

City  
OmahaState  
NEZip Code  
68154-2106Purpose of Disbursement  
Advertising

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : VNH6SA8A4D5

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. American National Bank**

Mailing Address 8990 W Dodge Rd

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2017

City  
OmahaState  
NEZip Code  
68114-3383Purpose of Disbursement  
Bank Fee

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

30.00

Transaction ID : VNH6SA89ZT6

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. American National Bank**

Mailing Address 8990 W Dodge Rd

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2017

City  
OmahaState  
NEZip Code  
68114-3383Purpose of Disbursement  
Bank Fee

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

30.00

Transaction ID : VNH6SA8A4C8

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

560.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Brad Ashford for Congress

Full Name (Last, First, Middle Initial)

**A. American National Bank**

Mailing Address 8990 W Dodge Rd

City  
OmahaState  
NEZip Code  
68114-3383Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : VNH6SA89ZS8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American National Bank**

Mailing Address 8990 W Dodge Rd

City  
OmahaState  
NEZip Code  
68114-3383Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : VNH6SA89ZF9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

35.00

**TOTAL** This Period (last page this line number only).....▶

2382.54

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 11 OF 12

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Brad Ashford for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Paramount Parking**

Nature of Debt (Purpose):

Parking service at event

Mailing Address 5900 S 77th St

City

Omaha

State

NE

Zip Code

68127-4267

Outstanding Balance Beginning This Period

526.50

Transaction ID : VNF899HCX11

Amount Incurred This Period

0.00

Payment This Period

526.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Lathrop, Jessica, , ,**

Nature of Debt (Purpose):

Bookkeeping and compliance service

Mailing Address 926 N 74th St

City

Omaha

State

NE

Zip Code

68114-3228

Outstanding Balance Beginning This Period

0.00

Transaction ID : VNF899HCX03

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Aksarben Suites**

Nature of Debt (Purpose):

Lodging

Mailing Address 7270 Cedar St

City

Omaha

State

NE

Zip Code

68124-2310

Outstanding Balance Beginning This Period

76.81

Transaction ID : VNF899HCX53

Amount Incurred This Period

0.00

Payment This Period

76.81

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) .....

2000.00

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 12 OF 12

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Brad Ashford for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The Jewish Press**

Nature of Debt (Purpose):

Advertising

Mailing Address 333 S 132nd St

City

Omaha

State

NE

Zip Code

68154-2106

Outstanding Balance Beginning This Period

500.00

Transaction ID : VNF899HCMX3

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Frontline Private Security**

Nature of Debt (Purpose):

Security Services

Mailing Address PO Box 641616

City

Omaha

State

NE

Zip Code

68164-7616

Outstanding Balance Beginning This Period

429.34

Transaction ID : VNF899HCX45

Amount Incurred This Period

0.00

Payment This Period

429.34

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Castle Barrett**

Nature of Debt (Purpose):

Catering and Room Rental

Mailing Address 4330 Leavenworth St

City

Omaha

State

NE

Zip Code

68105-1032

Outstanding Balance Beginning This Period

755.70

Transaction ID : VNF899HCX29

Amount Incurred This Period

0.00

Payment This Period

755.70

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) .....

0.00

2) **TOTALS** This Period (last page this line number only) .....

2000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

2000.00