

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2008 Office Use Only 8-41

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

BLUE CROSS BLUE SHIELD OF NE PAC (BLUE PAC)

ADDRESS (number and street)

P.O. Box 3248

☐ Check if different  
than previously  
reported. (ACC)

OMAHA

NE

681801-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00276311

3. IS THIS  
REPORT

☒ NEW

(N)

OR

☐ AMENDED

(A)

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)

☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

☐ Feb 20 (M2)

☐ May 20 (M5)

☐ Aug 20 (M8)

☐ Nov 20 (M11)  
(Non-Election  
Year Only)

☐ Mar 20 (M3)

☐ Jun 20 (M6)

☐ Sep 20 (M9)

☐ Dec 20 (M12)  
(Non-Election  
Year Only)

☐ Apr 20 (M4)

☐ Jul 20 (M7)

☐ Oct 20 (M10)

☐ Jan 31 (YE)

(c) 12-Day

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

PRE-Election

☐

Convention (12C)

☐

Special (12S)

Report for the:

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

MM / DD / YYYY

(d) 30-Day

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Report for the:

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the  
State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

2008

through

MM / DD / YYYY

MM / DD / YYYY

2008

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

Type or Print Name of Treasurer

PATRICK J BOURNE

Signature of Treasurer

*Patrick J Bourne*

Date

MM / DD / YYYY

MM / DD / YYYY

2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BLUE CROSS BLUE SHIELD OF NE PAC

Report Covering the Period:

From:

07 ' 01 ' 2008

To:

09 ' 30 ' 2008

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand  
January 1,

2008

16,345.75

- (b) Cash on Hand at  
Beginning of Reporting Period.....

13,876.14

- (c) Total Receipts (from Line 19) .....

7,158.21

17,731.10

- (d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines  
6(a) and 6(c) for Column B) .....

21,034.35

34,076.85

7. Total Disbursements (from Line 31) .....

8,032.50

21,075.00

8. Cash on Hand at Close of  
Reporting Period  
(subtract Line 7 from Line 6(d)) .....

13,001.85

13,001.85

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

28039852095

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

BLUE CROSS BLUE SHIELD OF NE PAC

Report Covering the Period:

From:

07 ' 01 ' 2008

To:

09 ' 30 ' 2008

## **I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

**11. Contributions (other than loans) From:**

**(a) Individuals/Persons Other**

Than Political Committees

(i) Itemized (use Schedule A).....

25,675.55

4,152.05

(ii) Unitemized.....

4,590.66

13,579.05

(iii) TOTAL (add  
Lines 11(a)(i) and (ii).....▶

7,158.21

17,731.10

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5).....▶

7,158.21

17,731.10

**12. Transfers From Affiliated/Other  
Party Committees.....**

**13. All Loans Received.....**

**14. Loan Repayments Received.....**

**15. Offsets To Operating Expenditures  
(Refunds, Rebates, etc.)**

(Carry Totals to Line 37, page 5).....

**16. Refunds of Contributions Made  
to Federal Candidates and Other  
Political Committees.....**

**17. Other Federal Receipts  
(Dividends, Interest, etc.).....**

**18. Transfers from Non-Federal and Levin Funds**

(a) Non-Federal Account  
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)).....▶**

7,158.21

17,731.10

**20. Total Federal Receipts  
(subtract Line 18(c) from Line 19).....▶**

7,158.21

17,731.10

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

## **II. Disbursements**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

21. Operating Expenditures:  
 (a) Allocated Federal/Non-Federal  
 Activity (from Schedule H4)  
 (i) Federal Share .....

- (ii) Non-Federal Share.....

- (b) Other Federal Operating  
 Expenditures .....

3250

7500

- (c) Total Operating Expenditures  
 (add 21(a)(i), (a)(ii), and (b)) .....

3250

7500

22. Transfers to Affiliated/Other Party  
 Committees.....

7000.00

7000.00

23. Contributions to  
 Federal Candidates/Committees  
 and Other Political Committees.....

1000.00

14000.00

24. Independent Expenditures  
 (use Schedule E) .....

25. Coordinated Party Expenditures  
 (2 U.S.C. §441a(d))  
 (use Schedule F) .....

26. Loan Repayments Made.....

27. Loans Made.....

28. Refunds of Contributions To:  
 (a) Individuals/Persons Other  
 Than Political Committees .....

- (b) Political Party Committees .....

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

- (d) Total Contribution Refunds  
 (add Lines 28(a), (b), and (c)).....

29. Other Disbursements .....

30. Federal Election Activity (2 U.S.C. §431(20))

- (a) Allocated Federal Election Activity  
 (from Schedule H6)

- (i) Federal Share .....

- (ii) "Levin" Share .....

- (b) Federal Election Activity Paid Entirely  
 With Federal Funds .....

- (c) Total Federal Election Activity (add ..  
 Lines 30(a)(i), 30(a)(ii) and 30(b))....

31. Total Disbursements (add Lines 21(c), 22,  
 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

803250

2107500

32. Total Federal Disbursements  
 (subtract Line 21(a)(ii) and Line 30(a)(ii)  
 from Line 31).....

803250

2107500

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7,158.21	17,731.10
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7,158.21	17,731.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3250	7500
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3250	7500

28039852098

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 5

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC

Full Name (Last, First, Middle Initial)

A. SCHUMACHER, JEFF

Mailing Address

2920 S 91st

City

LINCOLN NE

State

68520

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE

Occupation

BOARD MEMBER

Receipt For:

☐ Primary  
☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

07/02/2008

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. MARTIN, STEVEN S

Mailing Address

521 S 38 AVE

City

OMAHA NE

State

68022

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE PRESIDENT & CEO

Occupation

Receipt For:

☐ Primary  
☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.25

Date of Receipt

09/30/2008

Amount of Each Receipt this Period

382.80

Full Name (Last, First, Middle Initial)

C. TROWBRIDGE, LEWIS

Mailing Address

205 S 216th Circle

City

OMAHA, NE

State

68022

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE EVP TREASURER & CFO

Occupation

Receipt For:

☐ Primary  
☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.43

Date of Receipt

09/30/2008

Amount of Each Receipt this Period

172.42

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

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

1,555.22

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

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

FOR LINE NUMBER:  
(check only one)

PAGE **2** OF **5**

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC**

Full Name (Last, First, Middle Initial)

A. **RICHARDSON, JANET**

Mailing Address

**1506 LAWRENCE LANE**

City

**BELLEVUE NE**

State

Zip Code

**68005**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**BLUE CROSS BLUE SHIELD OF NE**

Occupation

**SRVP, Bus Prod Corp SV**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

**495.00**

Date of Receipt

**09' 30' 2008**

Amount of Each Receipt this Period

**165.00**

Full Name (Last, First, Middle Initial)

B. **MINIER, WILLIAM C**

Mailing Address

**5611 LEAVENWORTH ST**

City

**OMAHA NE**

State

Zip Code

**68106**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**BLUE CROSS BLUE SHIELD OF NE**

Occupation

**VP, MED POLICY & MEDICAL DIRECTOR**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

**455.65**

Date of Receipt

**09' 30' 2008**

Amount of Each Receipt this Period

**140.25**

Full Name (Last, First, Middle Initial)

C. **BUSHARDT, KEITH**

Mailing Address

**9629 HARNEY PARKWAY SOUTH**

City

**OMAHA, NE**

State

Zip Code

**68114**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**BLUE CROSS BLUE SHIELD OF NE**

Occupation

**EVP & CHIEF MKT OFF**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

**346.50**

Date of Receipt

**09' 30' 2008**

Amount of Each Receipt this Period

**115.50**

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

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

**420.75**

28039852100

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 5

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC

Full Name (Last, First, Middle Initial)

A. BYERS, GERALD

Mailing Address

128 ALLISON

City

PAPILLION NE 68133

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE

Occupation

SRVP, CHIEF RISK OFFICER

Receipt For:

☐ Primary  
☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.11

Date of Receipt

09' 30' 2008

Amount of Each Receipt this Period

85.24

Full Name (Last, First, Middle Initial)

B. WALDMAN, SARAH

Mailing Address

2808 LEIGH LN

City

PAPILLION NE 68133

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE

Occupation

VP, ETHICS & BOARD SEC

Receipt For:

☐ Primary  
☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.64

Date of Receipt

09' 30' 2008

Amount of Each Receipt this Period

77.58

Full Name (Last, First, Middle Initial)

C. TENKINS, THOMAS J

Mailing Address

12936 DEWEY AVE

City

OMAHA NE 68154

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE

Occupation

VP, LEGAL & GEN COUNSEL

Receipt For:

☐ Primary  
☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.04

Date of Receipt

09' 30' 2008

Amount of Each Receipt this Period

73.50

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

236.32

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

28039852101



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 4 OF 5

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC

Full Name (Last, First, Middle Initial)

A. SALTZMAN, SHARON

Mailing Address

3734 N 79 ST

City

OMAHA NE 68134

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE SRVP, CLAIMS

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.39

Date of Receipt

09/30/2008

Amount of Each Receipt this Period

68.40

Full Name (Last, First, Middle Initial)

B. WHALEN, TOMMY L

Mailing Address

13220 LARIMORE AVE, #352

City

OMAHA NE 68164

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE VP, HR & OD

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

09/30/2008

Amount of Each Receipt this Period

72.66

Full Name (Last, First, Middle Initial)

C. HANDKE, LEE J

Mailing Address

5603 N 160TH AVE

City

OMAHA NE 68116

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE VP, HEALTH NETWORK & WELLNESS

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.18

Date of Receipt

09/30/2008

Amount of Each Receipt this Period

64.26

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

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

205.32

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

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

FOR LINE NUMBER:  
(check only one)

PAGE **5** OF **5**

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC**

Full Name (Last, First, Middle Initial)

A. **KAVALEC, DONALD**

Mailing Address

**1416 HARTMAN AVE**

City

**OMAHA, NE 68164**

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**BLUE CROSS BLUE SHIELD OF NE**

Occupation

**VP, ORG DEV**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

**21311**

Date of Receipt

**09/30/2008**

Amount of Each Receipt this Period

**63.72**

Full Name (Last, First, Middle Initial)

B. **COURTNEY, SUSAN**

Mailing Address

**1711 N 171st St**

City

**OMAHA, NE 68118**

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**BLUE CROSS BLUE SHIELD OF NE**

Occupation

**VP, I/S + CIO**

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

**21299**

Date of Receipt

**09/30/2008**

Amount of Each Receipt this Period

**86.22**

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

**BLUE CROSS BLUE SHIELD OF NE**

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

**09/30/2008**

Amount of Each Receipt this Period

**2567.55**

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

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

**149.94**

**2567.55**

28039852103

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

07 02 2008

A. BLUE PAC

Mailing Address

1310 G ST, NW 12th FLOOR

City

State

Zip Code

WASHINGTON DC

20005

Purpose of Disbursement

TRANSFER

Candidate Name

008  
Category/  
Type

Amount of Each Disbursement this Period

7,000.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: NE

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

7,000.00  
7,000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
 (check only one)

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE / OF /

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

**07 / 02 / 2008**

A.

**ADRIAN SMITH FOR US CONGRESS**

Mailing Address

**3321 AVE I, SUITE 6**

City

**SCOTTS BLUFF NE**

State

Zip Code

**69361**

Purpose of Disbursement

**CONTRIBUTION**

Candidate Name

**ADRIAN SMITH**

**011**

Category/  
Type

Amount of Each Disbursement this Period

**1000.00**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State: **NE**

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**MM / DD / YYYY**

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

**011**

Category/  
Type

Amount of Each Disbursement this Period

**1000.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

**MM / DD / YYYY**

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

**011**

Category/  
Type

Amount of Each Disbursement this Period

**1000.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

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

**1000.00**

**1000.00**

28039852105

Federal Election Commission  
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