

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED 2015 FEB -2 AM 10:03

Office Use Only

FEB MAIL CENTER 12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

Crawford for Congress

ADDRESS (number and street)

135 Lakewood Drive



Check if different than previously reported. (ACC)

Lincoln NE 68519

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C00550749

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE DISTRICT

NE 01

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

11 05 2014

through

01 23 2015

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 Diane Crawford

Signature of Treasurer

Diane Crawford

Date

01 23 2015

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 02/2003)



**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

*Crawford for Congress*

Report Covering the Period: From:

*11* / *05* / *2014*

To:

*01* / *23* / *2015*

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) The Candidate.....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..



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

--

--

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....



14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

<i>594.35</i>
---------------

<i>594.35</i>
---------------

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

--

--

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

<i>594.35</i>
---------------

<i>594.35</i>
---------------

1-800-1-1113-4448



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE	OF
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21		

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)  
*Crawford for Congress*

A. *Beutler for Mayor*

Mailing Address: *7021 Fern Hill Place*

City: *Lincoln* State: *NE* Zip Code: *68516*

Purpose of Disbursement: *for their campaign*

Candidate Name: *Dennis Crawford*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *post-election*

State: *NE* District:

Date of Disbursement: *01/23/2015*

Amount of Each Disbursement this Period: *500.00*

B. *Beutler for Mayor*

Mailing Address: *7021 Fern Hill Place*

City: *Lincoln* State: *NE* Zip Code: *68516*

Purpose of Disbursement: *for their campaign*

Candidate Name: *Dennis Crawford*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *post-election*

State: *NE* District:

Date of Disbursement: *01/22/2015*

Amount of Each Disbursement this Period: *506.79*

C. *Carl Eskridge*

Mailing Address: *128 N 13th Apt 1007*

City: *Lincoln* State: *NE* Zip Code: *68508*

Purpose of Disbursement: *for campaign - City Council*

Candidate Name: *Dennis Crawford*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) *post-election*

State: *NE* District:

Date of Disbursement: *01/23/2015*

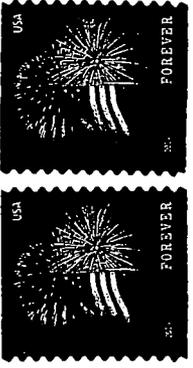
Amount of Each Disbursement this Period: *94.35*

SUBTOTAL of Disbursements This Page (optional) ..... *1106.14*

TOTAL This Period (last page this line number only) ..... *1106.14*

1 FRONT 1 ENVELOPE 1 STICKER 1

gress  
d Drive  
8510



Federal Election Commission  
999 E Street NW  
Washington, DC 20463

RECEIVED  
2015 FEB -2 AM 10:03  
FEC MAIL CENTER

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
 PREPARER

2/2/15  
 DATE PREPARED

NORTH CAROLINA