FORM 3

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REPORT OF RECEIPTS AND DISBURSEMENTS

14 DEC -2 AM 10: 59

TOLAIL	Additionized Committee	Office Use Only
NAME OF TYPE OR PRIN COMMITTEE (in full)	NT ▼ Example: If typing, type over the lines.	12FE4M5
Waltision Foir Siema	te	
ADDRESS (number and street)	1011 di Chierneyi Roja	d #121011-1131
Check if different		
than previously reported. (ACC)		NE 618516-
2. FEC IDENTIFICATION NUMBER ▼	CITY A	STATE ▲ ZIP CODE ▲
000556977	3. IS THIS NEW REPORT (N) OR	AMENDED STATE ▼ DISTRICT
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) Convention (12C) Election on (c) 30-Day POST-Election Report for the General (30G) Election on	General (12G) Special (12S) in the State of Runoff (30R) Special (30S) in the State of NE
5. Covering Period	through	
I certify that I have examined this Report and to	! 1 1 1	rue, correct and complete.
Signature of Treasurer		Date M. Z.6 / Z.o.i.Y
NOTE: Submission of false, erroneous, or incomple	ete 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)

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	F	EC Form 3 (Revised 02/2003)	ot H	Receipts and D	Disbursements				Page 2
W	rite or	Type Committee Name	inte						
Re	port (Covering the Period: From:		16/2	0_1_4	То:	M /	ڲ۫ۮ	2,01,4
6	Not C	Contributions (other than leans)			UMN A Period			OLUMN n Cycle-l	
6.	(a) T	Contributions (other than loans) Total Contributions Other than loans) (from Line 11(e))			2,4.8.3.		V V V	<u>, 4, 3,</u> 0	1, 3,6,
		otal Contribution Refunds from Line 20(d))						У	
		Net Contributions (other than loans subtract Line 6(b) from Line 6(a))	. 11	<u></u>	3,9.8.3.2.			<u>,4,3,</u>	4,3,6,1
7.	Net C	perating Expenditures	_						
		otal Operating Expenditures from Line 17)			1,5,25.55			<u>.4.3,0</u>	1.3.6,3.6
		otal Offsets to Operating expenditures (from Line 14)					_^	<u> </u>	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
		let Operating Expenditures subtract Line 7(b) from Line 7(a))			1,5,25,55			<u>, 4, 3, c</u>	13,636
		on Hand at Close of ting Period (from Line 27)			,o_				
	the C	and Obligations Owed TO ommittee (Itemize all on dule C and/or Schedule D)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	the Co	and Obligations Owed BY ommittee (Itemize all on dule C and/or Schedule D)							
			For f	urther informa	ation contact:				
			Fed	deral Election = 999 E Stree					

Washington, DC 20463

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

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Γ	FEC Form 3 (Revised 12/2003)	DETAILED SUMMARY PAGE of Receipts	Page 3
Writ	te or Type Committee Name		, ago o
(Watson For Senate		
Reg	port Covering the Period: From:	D' LG ZOLY TO	o: [11] 26 2014
	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) 	43000	27,5,50.
	(ii) Unitemized(iii) TOTAL of contributions from individuals .	390.	3,5,9,3
•	b) Political Party Committeesc) Other Political Committees (such as PACs)		7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7
,	d) The Candidate	7,29.3.29	
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	OANS: a) Made or Guaranteed by the Candidate	2,3,5,a,6 ⁴	
	b) All Other Loans c) TOTAL LOANS (add Lines 13(a) and (b))	2,3.5.9.4	
E	DFFSETS TO OPERATING EXPENDITURES Refunds, Rebates, etc.)		
	DTHER RECEIPTS Dividends, Interest, etc.)		
1	TOTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	1,6,3,4,2,a,3	43,43,636

14021251462

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
	OPERATING EXPENDITURES TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<u></u>	<u></u>
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate (b) Of All Other Loans	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
20.	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 20(a), (b), and (c))		
21.	OTHER DISBURSEMENTS		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	1,2,6,8,8,5,0,8	[17,0,9,8,0,89]
	III. CASH SI	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	PRTING PERIOD	1,1,0,5,4,5,15
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)			[
25. SUBTOTAL (add Line 23 and Line 24)			1,26,8,8,8,08
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	[
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)			

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SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 11d
Any information copied from such Reports and Statements m	<u> </u>	12 13a 13b 14 15
or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full)		
Watson For Senate		
Full Name (Last, First, Middle Initial)		
A. Roche Laura Mailing Address		Date of Receipt
4054 Haws Lane		10 23 2014
City State	Zip Code ろ2タ14	
FEC ID number of contributing		
federal political committee.	<u> </u>	Amount of Each Receipt this Period
Name of Employer Occupation	1 .	<u></u>
	emaker	
Receipt For: Election C	ycle-to-Date	
Other (specify)	<u>, , , , , o , o , o , o , o , o , o , o</u>	
Full Name (Last, First, Middle Initial)		
B. Kaiser Alan		Date of Receipt
Mailing Address*		
City State	Zip Code	
Lincoln NE	68506	_
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Occupation		2.6,0,0
	Swor	
Receipt For: Election C	ycle-to-Date	
Primary General Other (specify)	, 2, 6, 0, 0,	
	-5 riar & 5 (6 ra U 5 (1) - 1 a ran	J .
Full Name (Last, First, Middle Initial) Kaiser Tame		Date of Receipt
V		
LSOO S S8 th City State	Zip Code	<u> [] [] [] [] [] [] [] [] [] [] [] [] [] </u>
Lincoln NE	68506	
FEC ID number of contributing federal political committee.	~~~~~	Amount of Each Receipt this Period
		Amount of Each Heading this yellow,
Name of Employer Occupation	Cher	<u></u>
	ycle-to-Date	\dashv
Primary General	· · · · · · · · · · · · · · · · · · ·	
Other (specify)	,_rod,(0,00.m	
		[
SUBTOTAL of Receipts This Page (optional)		<u> </u>
TOTAL This Period (last page this line number only)		<u></u>

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PAGE OF FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ✓ 11a ITEMIZED RECEIPTS 11b 11c 11d Detailed Summary Page 12 13a 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) Full Name (Last, First, Middle Initial) Kumm, Lanell Date of Receipt Mailing Address State Zip Code NE FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Self Employed
Receipt For: Turner Election Cycle-to-Date Primary ✓ General 00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) SUBTOTAL of Receipts This Page (optional).....

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

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_		Detailed Summary Page	12 X 13a 13b 14 15	
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\setminus	NAME OF COMMITTEE (In Full)			
/	Waten For Senate			
<u></u>	Full Name (Last, First, Middle Initial)		, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
A.	Water Told F		Date of Receipt	
	Mailing Address 570 # 200		[M_M] \ [Ono] \ [Andreal	
	2855 570 #200 City State	Zip Code	lin log lact gi	
	Lincoln NE	68506		
	FEC ID number of contributing	~~~~~~~~~~	Amount of Each Receipt this Period	
	federal political committee.	<u></u>	Amount of Each Receipt this Feriod	
	Name of Employer Occupa	tion	<u></u>	
	Various Bi	2 Owner		
	Receipt For: Election Primary General	Cycle-to-Date		
	Other (specify)	12244633		
		<u></u>		
	Full Name (Last, First, Middle Initial)			
В.	ailing Address		Date of Receipt	
			Myna) \ Lovel \ Lavarana	
	City State	Zip Code		
			-	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	Name of Employer Occupa			
	Name of Employer Occupa	tion	[
	Receipt For: Election	Cycle-to-Date	1	
	Primary General	· · · · · · · · · · · · · · · · · · ·		
	Other (specify)	<u></u>		
-	Full Name (Last, First, Middle Initial)			
C.			Date of Receipt	
	Mailing Address		<u> </u>	
	City State	Zip Code		
	FEC ID number of contributing	V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-	Amount of Each Receipt this Period	
	federal political committee.	<u> </u>	Amount of Each Receipt this Period	
	Name of Employer Occupa	tion		
	Passint For			
	Receipt For: Election Primary General	Cycle-to-Date		
	Other (specify)	5		
	Curry Curry	<u></u>		
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SUBTOTAL of Receipts This Page (optional)			Linguage 302 March	
TOTAL This Period (last page this line number only)			23,5,9,00	

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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF		
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7		anie and a	ladiess of any political committee	e to solicit contributions from such committee.	
$ \rangle$	NAME OF COMMITTEE (In Full)				
V	Watzn For Senate				
	Full Name (Last, First, Middle Initial)			, , , , , , , , , , , , , , , , , , , ,	
A.	Watson Told F			Date of Receipt	
	Mailing Address 5 78 #200			[MJM] \ [DJAD] \ [XJAJAJA]	
		State	Zip Code	البا قط الموايدا	
	- 1 ·	NE	68506		
	Lincoln		6206		
	FEC ID number of contributing	C	V U V V V V	Amount of Each Receipt this Period	
	federal political committee.		/_/_/_///	7 7 7 2 9	
		ccupation		Langer J. Autr. S. Langer	
		Bushi	ess Owner		
		ection Cy	/cle-to-Date		
	Primary General	VV	2,4		
	Other (specify)		<u>,l_, </u>		
_	Full Name (Last, First, Middle Initial)				
ь	•			Date of Receipt	
В.	Mailing Address				
	4				
	City	State	Zip Code		
	55010 1 4 4 11 11				
	FEC ID number of contributing federal political committee.	Cl "		Amount of Each Receipt this Period	
			<u></u>		
	Name of Employer Oc	ccupation			
Receipt For: Election C		lection Cy	/cle-to-Date		
	Primary General Other (specify)		· · · · · · · · · · · · · · · · · · ·		
			<u>9</u>		
	Full Name (Last, First, Middle Initial)				
C.				Date of Receipt	
	Mailing Address			· [\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	City	State	Zip Code		
	Only	Oldie	Zip Odde		
	FEC ID number of contributing			-	
	federal political committee.			Amount of Each Receipt this Period	
	·		<u></u>		
	Name of Employer Oc	ccupation			
	December Form				
Receipt For: Election Cy Primary General Other (specify)		/cle-to-Date			
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SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)			
ITEMIZED DISBURSEMENTS	for each category of the	77 18 19a 19b			
	Detailed Summary Page	20a 20b 20c 21			
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a					
NAME OF COMMITTEE (In Full)					
Watson For Senate					
Full Name (Last, First, Middle Initial)		Date of Disbursement			
A. Crooke					
Mailing Address 1606 Amohi, thentre PKwy		10 20 2014			
City State	Zip Code	Amount of Each Disbursement this Period			
Purpose of Disbursement	94043	20427			
Advertising	0.0	<u> </u>			
Candidate Name Told Watson	Category/ Type	²⁷			
Office Sought: House Disbursement For:					
Senate Primary	General				
State: NE District: 00	Decity)				
Full Name (Last, First, Middle Initial)					
B. / 1		Date of Disbursement			
Mailing Address		7.6 / 2.6. 7.4			
1600 Amphithente Pkmy City State		Siebeld Siebeld			
A. \	Zip Code Qy 243	Amount of Each Disbursement this Period			
Purpose of Disbursement	F-0-1	25.5.6.9			
Advertising	<u> </u>				
Candidate Name	Category/ Type				
Office Sought: House Disbursement For:	1 1300	+			
Senate Primary	General				
President Other (sp	ecify)				
Full Name (Last, First, Middle Initial)	11. 2 818181111 11112 2121	-			
C		Date of Disbursement			
Face book Mailing Address		- M.W. / B.B. / X. X. X. X.			
1601 Willow Rd					
City State Zip Menlo Park (A 9	Amount of Each Disbursement this Period				
Purpose of Disbursement	75794				
Advertising					
Candidate Name					
Office Sought: House Disbursement For:	┪				
Senate Primary					
State: NE District: O O Other (sp.	есіту)				
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S	CHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and		
\setminus	NAME OF COMMITTEE (In Full)		
	Watson For Senate		
	Full Name (Last, First, Middle Initial)		Date of Disbursement
A.	Image Inflators		
	Mailing Address 221 Devonshire Dr.		11 05 2014
	City State	Zip Code 6850フ	Amount of Each Disbursement this Period
	Lincoln NE	68307	
	Purpose of Disbursement	0,0,6] [,,,,,]
	Candidate Name	Category	
	Todd Water	Туре	<u>_</u>
	Office Sought: House Disbursement For Senate Primary		
	President Other (s		
_	State: WE District: 08		
	Full Name (Last, First, Middle Initial)		
В.	E. L. Ve		Date of Disbursement
	Face book Mailing Address		- [T / B 4 / [] Z Z T 4
	City State	Zip Code	
	M 1 M	94025	Amount of Each Disbursement this Period
	Purpose of Disbursement	-((0×3	9,2,9,49
	Adverttsing Candidate Name	<u> </u>	
	11 11 +200	Category/ Type	
	Office Sought: House Disbursement For		~
	Senate Primary	General	
	President Other (s	pecify)	
_	State: NE District: co Full Name (Last, First, Middle Initial)		
C.			Date of Disbursement
٠.	Facebook		المرسم القمق السمسا
	Mailing Address		[[_1] [[_6] [Ke_1_4]
		p Code	Amount of Each Disbursement this Period
		94025	
	Purpose of Disbursement Advertising	000] <u> </u>
	Candidate Name	Category/	19
	Todd Watson	Туре	
	Office Sought: House Disbursement For. K Senate Primary	: [X] General	
	President Other (s	<u> </u>	
	State: NE District: 00		
			2 36
S	UBTOTAL of Disbursements This Page (optional)		

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SCHEDULE B (FEC Form 3)				FOR LINE NUMBER: PAGE	OF
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(check only one)	
HEMIZED DISBURSEMENTS		Detailed Summar	,	17 18 19a 20a 20b 20c	—
Any information copied from such Reports and State or for commercial purposes, other than using the				person for the purpose of soliciting co	ntributions
NAME OF COMMITTEE (In Full)	name and add	ress of any pon	tical committee	e to solicit contributions from such co	minitee.
(A) ot son For San I					
Full Name (Last, First, Middle Initial)		÷			
A. (Date of Disbursement	
racebook					<u>^~~</u>
Mailing Address 1601 Weals Blace Will	ot		_	سه والكنا للسال	الك
City City	State	Zip Code		4	
Menlo Pack	C A	44025		Amount of Each Disbursement th	IIS Period
Purpose of Disbursement				5.3	6 0 3
Advertising			0,0,4		
Candidate Name			Category/ Type		
Office Sought: House Disburg	sement For:		туре	-	
Senate	Primary	General			
President	Other (spec	cify)			
State: NE District: 00	74. "				
Full Name (Last, First, Middle Initial)				Barrier Birth	
B. Lincoln Marketing Gr	-A.J.A	4		Date of Disbursement	
Mailing Address	004-			نَّ ذِي الْمُرْانِ اللَّهِ الْمُرْانِ اللَّهِ الْمُرْانِ اللَّهِ الْمُرْانِ اللَّهِ الْمُرْانِ اللَّ	ĭ .Ÿl
5050 New Castle Rd	04-4-	7: 0:1			
City	State NE	Zip Code		Amount of Each Disbursement th	is Period
Purpose of Disbursement	100		(4 6 6	00
Advertising			60,4		
Candidate Name			Category/	·	
Office Sought: House Disburs	sement For:		Туре	-	
Office Sought: House Disburs	sement For:				

State: NE District:	eral	
Full Name (Last, First, Middle Initial)		Data of Dishumanant
Bluehost Inc.		Date of Disbursement
State Zip Code Orem UT 84097		[/_O] [<u>Z.6.]</u> [<u>ZO.[.4]</u>
City State Zip Code		Amount of Each Disbursement this Period
Orem UT 84097		
Purpose of Disbursement		2.0,3.83
Web	0,0,6	
Candidate Name	Category/	
Todd Watson	Type	
Office Sought: House Disburgament For:		

General

Primary

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

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

Other (specify)

Senate

District: 00

President

State: NE

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SCHEDULE B (FEC Form 3)	11	FOR LINE NUMBER: PAGE OF		
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TI EMIZED DISBONSLIVENTS	Detailed Summary Page	17 18 X 19a 19b		
Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a	ay not be sold or used by any	y person for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)				
Watson For Senate	 -			
Full Name (Last, First, Middle Initial)		Date of Disbursement		
A. Watson Todd F		[MJM] / [GJM] / [YYYYYY]		
Mailing Address		119 2014		
2855 5 70th # 200	7'- 0-1			
City State NE	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		1.1.2 26.2 53		
Loan Repay				
Candidate Name	Category	<u> </u>		
100d Watson	Туре			
Office Sought: House Disbursement For:	General			
President Other (sp				
State: NE District: 00	, ,			
Full Name (Last, First, Middle Initial)				
В.		Date of Disbursement		
Mailing Address	M, M, \ D, D \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
City State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement				
Candidate Name	Category Type	<u></u>		
Office Sought: House Disbursement For:				
Senate Primary	General			
President Other (sp. State: District:	есіту)			
Full Name (Last, First, Middle Initial)				
C.		Date of Disbursement		
<u> </u>				
Mailing Address				
City State Zip	Code	Amount of Each Disbursement this Period		
Purpose of Disbursement	Purnose of Dishursement			
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Candidate Name	Category Type			
Office Sought: House Disbursement For:				
Senate Primary	General			
President Other (sp State: District:	өспу)			

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

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

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SCHEDULE C (FEC Form 3)		PAGE OF		
•	Use separate schedule(s) for each category of the	FOR LINE NUMBER:		
LOANS	Detailed Summary Page	(check only one) 13a		
NAME OF COMMITTEE (In Fall)		[130		
NAME OF COMMITTEE (In Full)				
Watson For Senate.				
LOAN SOURCE Full Name (Last, First, Middle Initial)	Ele	ction:		
11) to THE		Primary		
Mailing Address	<u>X</u>	General Other (specify) ▼		
44	-	Cuter (specify)		
0.03	Code			
Lincoln NE 1	68506			
Original Amount of Loan Cumulative Paymen	t To Date Balance	Outstanding at Close of This Period		
		000		
<u> </u>	17,44,4,11 L	<u> </u>		
TERMS Date Incurred Date I	Due Interest Rate	Secured:		
	LAAAAAA LAAAAA MINGGA HAKA			
10.61 13.01 12.01 12.71 10.11 12.71	<u> </u>	✓ % (apr) ✓ Yes No		
List All Endorsers or Guarantors (if any) to Loan Source		ies NO		
Full Name (Last, First, Middle Initial)	Name of Employer	Name of Employer		
Watson Todd F Home Equip LOC	Various			
Mailing Address	Occupation	6		
2855 5 70 h +200	Amount -	uner		
City State ZIP Code	Guaranteed	00		
Lincoln NE 68506	Outstanding:	<u></u>		
2. Full Name (Last, First, Middle Initial)	Name of Employer			
Water Toda, F	Occupation			
Mailing Address	Occupation			
2855 570 #200	Amount	· · · · · · · · · · · · · · · · · · ·		
City State ZIP Code	Guaranteed Outstanding:			
Lincoln IVE 68506				
3. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
	Amount Constitution			
City State ZIP Code	Guaranteed Outstanding:	<u></u>		
4. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
	•	· · · · · · · · · · · · · · · · · ·		
City State ZIP Code	Amount Guaranteed			
	Outstanding:	<u>~~~~</u>		
SUBTOTALS This Period This Page (optional)		10,00		
CONTROL THIS FERIOR THIS Page (Optional)		_ <u>,,</u> 0,		
TOTALS This Period (last page in this line only)	▶	0,0,0		
	<u> </u>	<u></u>		
Carry outstanding balance only to LINE 3, Schedule D, for this line	. If no Schedule D, carry forward	to appropriate line of Summary.		



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Mailed From 68506

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Washington DC 20013-7578

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DANA K. MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

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OVERNIGHT DELIVERY SERVICE: SHIPPING DATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS
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AIRBORNE EXPRESS
RECEIVED FROM FEDERAL ELECTION COMMISSION
POSTMARK ILLEGIBLE \(\bigcap \) NO POSTMARK \(\bigcap \)
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OTHER
PREPARER DATE PREPARED 12-2-14



SEN PATCH



SEN PATCH