29030090577

FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2009 MAY 15 A 10: 53 Office Use Only

1.	NAME OF		
	COMMITTEE	(in	full)

1.	NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	·
N	EBRASKA BA	INKERS FE	SERAL POLI	TICAL A	Ction
_	ommittee	<u> </u>	<u> </u>	<u> </u>	
ΑD	DRESS (number and street)	233, SOUT	1 13+n 5+R	EET SUI	TE 700
	(Check if address is changed)	Lincoln		NE 6	<i>8508</i>]-[]
			CITY	STATE	ZIP CODE
CO	MMITTEE'S E-MAIL ADDRE (Check if address is changed)		e-mail address) h.eato:nene	bank ers	
CC	DMMITTEE'S WEB PAGE AD	DRESS (URL)			
	(Check if address is changed)				
2.	DATE ÖŸ´Ş	8 2009			
3.	FEC IDENTIFICATION N	JMBER C	00083790		
4.	IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
	ertify that I have examined the	0 0	st of my knowledge and belief		d complete.
Sig	gnature of Treasurer	surge pe		Date 03	77 2009
NO	TE: Submission of false, erron		n may subject the person signin		penalties of 2 U.S.C. §437g.
L	Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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

PEC FO	Fage Z			
TYPE OF C				
Candidate	e Committee:			
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)			
(b) .	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Name of Candidate				
Candidate Party Affiliati	Office State on Sought: House Senate President District			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Con	A 111 111 11 11 11 11 11 11 11 11 11 11			
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.			
Political A	action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:			
	Corporation Corporation w/o Capital Stock Labor Organization			
	Membership Organization Trade Association Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
	In addition, this committee is a Lobbyist/Registrant PAC.			
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint Fund	Iraising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
Com	mittees Participating in Joint Fundraiser			
1.	FEC ID number C			
2.	FEC ID number C			
3.	FEC ID number C			
4.				

	FEC FORM (Nevised		raye J
W	rite or Type Committee Nam	ne	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
L	1		
	Mailing Address		
	-		
			-
		CITY STATE ZIF	CODE
	Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Leader	ship PAC Sponsor
7.	Custodian of Records: Ide	entify by name, address (phone number optional) and position of the person in posses	sion of committee
	Full Name Jen	nifer Heaton	
	Mailing Address	1233 South 113th Street Suite 70	
		Lincoln INE 16850	8 - <u> </u>
	Title or Position	CITY STATE ZIP	CODE
	Vice President	of Government Relations Telephone number 402-47	4 _{-[} 1555]
В.	Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the name, assistant treasurer).	and address of
	Full Name of Treasurer	rge G. BEAttie	
	Mailing Address	1233 South 113th Street Suite	700
			لسنسا
		CITY STATE ZIP	S - L L L L L L L L L L L L L L L L L L
1	Title or Position	Telephone number 402 - 47	4 ₁₋₁ /5,55 1

-	FEC For	m 1 (Revised 02/2009)	Page 4
	Full Name of Designated Agent Mailing Address	ROBERT J. HALLSTROM: 233 SOLUTH 13+4: StrEET	- Suite 700
		CITY STA	VE 68508- TE ZIP CODE
	Title or Position	all Counsel: Telephone number	402-474-1555
9.		r Depositorles: List all banks or other depositories in which the committee do oxes or maintains funds. Depository, etc.	eposits funds, holds accounts, rents
			<u> </u>
	Mailing Address	<u> </u>	<u> </u>
			
		CITY STA	ATE ZIP CODE
	Name of Bank,	Depository, etc.	
			<u> </u>
	Mailing Address		<u> </u>
		CITY STA	ATE ZIP CODE

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.				
Hand Delivered	Date of Receipt			
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Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Business	s Day Delivery			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	eceipt or Postmarked			
JMN	5/15/07			
PREPARER (3/2005)	DATE PREPARED			