

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

13 NOV - 6 PM 1:33 Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. JENKINS FOR SENATE

ADDRESS (number and street) PO BOX 246 (Check if address is changed) CALLAWAY CITY NE 68825 STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) INFO@JENKINSFORSENATE.ORG Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) JENKINSFORSENATE.ORG

2. DATE 10/29/2013

3. FEC IDENTIFICATION NUMBER C.T.O. to be assigned

4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)

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

Type or Print Name of Treasurer STEVEN D. BOYER

Signature of Treasurer [Signature] Date 10/29/2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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5. TYPE OF COMMITTEE

Candidate 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 JAMES JEFFREY JENKINS

Candidate Party Affiliation IND. Office Sought: House Senate President State NE District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political 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 Fundraising 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.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input type="checkbox"/> <u> </u>
2.	_____	FEC ID number	<input type="checkbox"/> <u> </u>
3.	_____	FEC ID number	<input type="checkbox"/> <u> </u>
4.	_____	FEC ID number	<input type="checkbox"/> <u> </u>

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Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name MELANNI LOPER

Mailing Address PO BOX 246

KALLAWAY NE 68825

Title or Position

CITY

STATE

ZIP CODE

COORDINATOR

Telephone number 308-870-1495

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer STEVEN D BOYER

Mailing Address 911 W 33rd ST

KEARNEY NE 68845-3362

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 308-440-0500

13020524626

Full Name of Designated Agent

MEGAN L BOYER

Mailing Address

1911 W 33RD ST

KEARNEY

CITY

NE

STATE

68845-1336

ZIP CODE

Title or Position

ASST. TREASURER

Telephone number

308-440-0501

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

NEBRASKA STATE BANK + TRUST CO.

Mailing Address

1945 SOUTH D STREET

BROKEN BOW

CITY

NE

STATE

68822

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13020524627

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MEGAN BOYER
 (308) 440-0501
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 KEARNEY NE 68847-0508

0.2 LBS LTR 1 OF 1
 SHP WT: LTR
 DATE: 30 OCT 2013

SHIP ATTN SECRETARY OF SENATE
 TO: OFFICE OF PUBLIC RECORDS
 232 HART SENATE OFFICE BLDG

WASHINGTON DC 20510-0200

MD 201 9-48

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NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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10-30-13

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Date of Receipt

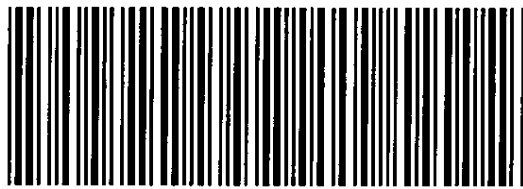
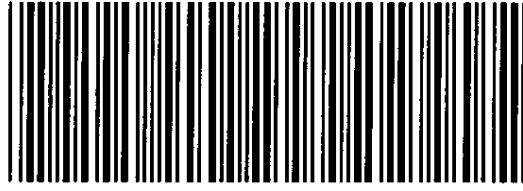
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PREPARER DH DATE PREPARED 11-4-13

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