

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Nebraska Republican Party

ADDRESS (number and street) 1610 N Street
 Check if different than previously reported. (ACC)
Lincoln NE 68508

2. **FEC IDENTIFICATION NUMBER** C00032334
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 Quarterly 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 **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2009 through 07 31 2009

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 Rodney Krogh

Signature of Treasurer Electronically Filed by Rodney Krogh Date 08 20 2009

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							
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

All disbursements and expenditures for NEGOP FUNRAISING MAIL EXPENSE were for fundraising purposes for the state party only; no federal candidate or federal officeholder was identified in any of these events. Non-federal funds were not used in connection with any federal election or federal election activity.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Nebraska Republican Party

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		17374.40
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	12500.82									
(c) Total Receipts (from Line 19)	28775.20	189777.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41276.02	207151.95								
7. Total Disbursements (from Line 31)	23935.94	189811.87								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17340.08	17340.08								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	4140.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	15590.49									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Nebraska Republican Party

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	12950.00	52410.00
(ii) Unitemized	12200.15	75077.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)	25150.15	127487.66
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	18500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	25150.15	145987.66
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	3625.05	43789.89
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	3625.05	43789.89
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28775.20	189777.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25150.15	145987.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	639.70	8822.03
(ii) Non-Federal Share.....	3625.06	49991.41
(b) Other Federal Operating Expenditures.....	1960.97	29135.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6225.73	87949.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	5000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	17710.21	96862.62
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	17710.21	96862.62
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23935.94	189811.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20310.88	139820.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	25150.15	145987.66
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25150.15	140987.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2600.67	37957.84
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2600.67	37957.84

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

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

FOR LINE NUMBER: PAGE 7 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)
Rick Adkins
Mailing Address P.O. Box 278
City State Zip Code
Laurel NE 68745
FEC ID number of contributing federal political committee. **C**
Name of Employer Security National Bank Occupation Chairman
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 07 / 15 / 2009
Transaction ID: 90719.C178997
Amount of Each Receipt this Period: 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Karen Aman
Mailing Address 610 Southfork Road
City State Zip Code
Blair NE 68008
FEC ID number of contributing federal political committee. **C**
Name of Employer Huntel Systems Occupation Executive
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 07 / 30 / 2009
Transaction ID: 90819.C179163
Amount of Each Receipt this Period: 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Bill Anderson
Mailing Address 1235 Pinewood Drive
City State Zip Code
Blair NE 68008
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 07 / 30 / 2009
Transaction ID: 90819.C179164
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 950.00
TOTAL This Period (last page this line number only) ▶

**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 8 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) Della Brown		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 4182 S. Sand Drive		Transaction ID: 90819.C179174
	City Hershey	State NE	Zip Code 69143
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Retired	Occupation Retired	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Dr. David Clare, MD		Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 7541 Cross Creek Ct		Transaction ID: 90719.C178826
	City Lincoln	State NE	Zip Code 68516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Nebraska Orthopaedic & Sports	Occupation Orthopedic Surgeon	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) Marybeth Crawford		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 7767 Madison Rd # 3		Transaction ID: 90719.C178844
	City Alliance	State NE	Zip Code 69301-5035
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Congressman Smith	Occupation District Director	Receipt

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
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SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

**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 9 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) Marilyn Dodge	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 565 4th Street	Transaction ID: 90819.C179097
	City State Zip Code Gering NE 69341	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Western NE Community College	Occupation Educational Outreach Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) William Fleming	Date of Receipt MM / DD / YYYY 07 / 28 / 2009
	Mailing Address PO BOX 137	Transaction ID: 90819.C179136
	City State Zip Code CEDAR BLUFFS NE 68015-0137	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Chet H. Fliesbach	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 210087 Williams Drive	Transaction ID: 90819.C179101
	City State Zip Code Scottsbluff NE 69361	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.

Full Name (Last, First, Middle Initial)
Todd Foje

Mailing Address PO Box 500

City Blair State NE Zip Code 68008

FEC ID number of contributing federal political committee. **C**

Name of Employer Great Plains Comm., Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 30 / 2009

Transaction ID: 90819.C179162

Amount of Each Receipt this Period 500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Dr. Mark Griffin

Mailing Address 9312 Montello Road

City Lincoln State NE Zip Code 68520

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 02 / 2009

Transaction ID: 90719.C178842

Amount of Each Receipt this Period 250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
George Hall

Mailing Address RR 1 Box 183

City Bridgeport State NE Zip Code 69336

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2009

Transaction ID: 90819.C179100

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

**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 11 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) Sheila Heieck		Date of Receipt
	Mailing Address 105 S 129th St		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Omaha	NE	68154-2113
	FEC ID number of contributing federal political committee. C		Transaction ID: 90719.C178825
Name of Employer Self		Occupation Surgeon	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
			Receipt

B.	Full Name (Last, First, Middle Initial) Mick Jensen		Date of Receipt
	Mailing Address 13887 Hwy 75 N		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Blair	NE	68008
	FEC ID number of contributing federal political committee. C		Transaction ID: 90719.C178836
Name of Employer Great Plains Comm., Inc		Occupation VP/Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="525.00"/>
			Receipt

C.	Full Name (Last, First, Middle Initial) Dr. & Mrs. John N. Kabalin		Date of Receipt
	Mailing Address 1214 Meadowlark Drive		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Scottsbluff	NE	69361
	FEC ID number of contributing federal political committee. C		Transaction ID: 90819.C179098
Name of Employer Scottsbluff Urology Asso		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.

Full Name (Last, First, Middle Initial)
John B. Lamphere

Mailing Address 2401 S 60th St

City Lincoln State NE Zip Code 68506

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2009

Transaction ID: 90719.C178936

Amount of Each Receipt this Period 150.00

Receipt

B.

Full Name (Last, First, Middle Initial)
John B. Lamphere

Mailing Address 2401 S 60th St

City Lincoln State NE Zip Code 68506

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 30 / 2009

Transaction ID: 90819.C179155

Amount of Each Receipt this Period 500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Donald Loos

Mailing Address 2100 Circle Dr. Apt. 210

City Scottsbluff State NE Zip Code 69361

FEC ID number of contributing federal political committee. **C**

Name of Employer Loos Electric Supply Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2009

Transaction ID: 90819.C179099

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 900.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 42

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.

Full Name (Last, First, Middle Initial)
Lon Lowrey

Mailing Address 16606 Jamestown Forest Drive

City State Zip Code
Florissant MO 63034-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Novartis Director, State & External Aff

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 08 / 2009

Transaction ID: 90719.C178909

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Dr. Keith Miller

Mailing Address 6700 Cumberland Drive

City State Zip Code
Lincoln NE 68516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bryan LGH Heart Institute Cardiologist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 90719.C178835

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Dick Muller

Mailing Address 505 South 93rd Avenue

City State Zip Code
Omaha NE 68114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Broadmour Financial Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2009

Transaction ID: 90819.C179137

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.

Full Name (Last, First, Middle Initial)
Dr. Douglas Netz

Mailing Address 9610 Irongate Ct.

City Lincoln State NE Zip Code 68526

FEC ID number of contributing federal political committee. **C**

Name of Employer NE Heart Institute Occupation Cardiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2009

Transaction ID: 90719.C178916

Amount of Each Receipt this Period 250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Ron Parks

Mailing Address 10602 Olive St

City Omaha State NE Zip Code 68128

FEC ID number of contributing federal political committee. **C**

Name of Employer Millard Manufacturing Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 30 / 2009

Transaction ID: 90819.C179161

Amount of Each Receipt this Period 500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Richard & Frances Pratt

Mailing Address 212 N 5th Street

City Elmwood State NE Zip Code 68349

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 28 / 2009

Transaction ID: 90819.C179138

Amount of Each Receipt this Period 100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)
Katherine Rhea

Mailing Address 19944 County Road P30

City State Zip Code
Arlington NE 68002

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Cattle Feeder

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 15 / 2009
Transaction ID: 90719.C179005
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Mr. Michael Simmonds

Mailing Address 11404 W. Dodge Road, #650

City State Zip Code
Omaha NE 68154-2535

FEC ID number of contributing federal political committee. **C**

Name of Employer Simmonds Properties Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 07 / 31 / 2009
Transaction ID: 90819.C179179
Amount of Each Receipt this Period: 5000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Gerald Vap

Mailing Address 1302 Norris Avenue

City State Zip Code
McCook NE 69001

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Nebraska Occupation Public Service Commissioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 14 / 2009
Transaction ID: 90719.C178975
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 5300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.

Full Name (Last, First, Middle Initial)
Barbara Wills

Mailing Address 1590 Park Ter.

City State Zip Code
Gering NE 69341

FEC ID number of contributing federal political committee. **C**

Name of Employer
WILLS CHIROPRACTIC

Occupation
Chiropractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 23 / 2009

Transaction ID: 90819.C179096

Amount of Each Receipt this Period
250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Dr. Matthew Wood

Mailing Address 2829 S. 24th St

City State Zip Code
Lincoln NE 68502

FEC ID number of contributing federal political committee. **C**

Name of Employer
Eye Surgical Associates

Occupation
Ophthalmologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2009

Transaction ID: 90719.C178859

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	12950.00

**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)

PAGE 17 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Nebraska	Transaction ID: 90819.E13069 Date of Disbursement
	Mailing Address PO Box 3248 Attn: Randy Boldt	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Omaha State NE Zip Code 68124-	Amount of Each Disbursement this Period
	Purpose of Disbursement Health Insurance Premiums	<input type="text" value="530.00"/>
	Candidate Name	Category/Type <input type="text" value="001"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HEALTH INSURANCE PREMIUMS

B.	Full Name (Last, First, Middle Initial) NEBRASKA STATE FAIR	Transaction ID: 90819.E13074 Date of Disbursement
	Mailing Address PO BOX 81223	<input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City LINCOLN State NE Zip Code 68501-1223	Amount of Each Disbursement this Period
	Purpose of Disbursement Fair Booth Rental	<input type="text" value="419.50"/>
	Candidate Name	Category/Type <input type="text" value="007"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FAIR BOOTH RENTAL

C.	Full Name (Last, First, Middle Initial) Perre Neilan	Transaction ID: 90819.E13071 Date of Disbursement
	Mailing Address 1536 Van Dorn St	<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City Lincoln State NE Zip Code 68502-3944	Amount of Each Disbursement this Period
	Purpose of Disbursement Mileage Reimbursement	<input type="text" value="443.89"/>
	Candidate Name	Category/Type <input type="text" value="002"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1393.39"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) Principal Financial Group	Transaction ID: 90819.E13070 Date of Disbursement
	Mailing Address 711 High St	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Des Moines State IA Zip Code 50392-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Dental Insurance Premiums	<input type="text" value="30.82"/>
	Candidate Name	Category/Type <input type="text" value="001"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DENTAL INSURANCE PREMIUMS

B.	Full Name (Last, First, Middle Initial) US Postmaster	Transaction ID: 90819.E13044 Date of Disbursement
	Mailing Address 700 R Street	<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Lincoln State NE Zip Code 68501-	Amount of Each Disbursement this Period
	Purpose of Disbursement NEGOP Fundraising Mail Expense	<input type="text" value="175.76"/>
	Candidate Name	Category/Type <input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		NEGOP FUNDRAISING MAIL EXPENSE

C.	Full Name (Last, First, Middle Initial) US Postmaster	Transaction ID: 90819.E13047 Date of Disbursement
	Mailing Address 700 R Street	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Lincoln State NE Zip Code 68501-	Amount of Each Disbursement this Period
	Purpose of Disbursement NEGOP Fundraising Mail Expense	<input type="text" value="176.00"/>
	Candidate Name	Category/Type <input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		NEGOP FUNDRAISING MAIL EXPENSE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="382.58"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.

Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address 700 R Street

City Lincoln State NE Zip Code 68501-

Purpose of Disbursement
NEGOP Fundraising Mail Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90819.E13049

Date of Disbursement

07 / 29 / 2009

Amount of Each Disbursement this Period

100.00

NEGOP FUNDRAISING MAIL EX-
PENSE

SUBTOTAL of Disbursements This Page (optional)

100.00

TOTAL This Period (last page this line number only)

1875.97

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) Erin Bottger <hr/> Mailing Address 678 Parkwood Lane <hr/> City Omaha State NE Zip Code 68132- <hr/> Purpose of Disbursement FEA Staff Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90819.E13078 Date of Disbursement MM / DD / YYYY 07 / 15 / 2009
	Amount of Each Disbursement this Period 151.08
	Category/ Type FEA STAFF SALARY
	FEA STAFF SALARY
B. Full Name (Last, First, Middle Initial) Erin Bottger <hr/> Mailing Address 678 Parkwood Lane <hr/> City Omaha State NE Zip Code 68132- <hr/> Purpose of Disbursement FEA Staff Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90819.E13079 Date of Disbursement MM / DD / YYYY 07 / 31 / 2009
	Amount of Each Disbursement this Period 305.25
	Category/ Type FEA STAFF SALARY
	FEA STAFF SALARY
C. Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE <hr/> Mailing Address OGDEN, UTAH <hr/> City OGDEN State UT Zip Code 84201- <hr/> Purpose of Disbursement FEA Staff Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90719.E13037 Date of Disbursement MM / DD / YYYY 07 / 03 / 2009
	Amount of Each Disbursement this Period 1046.57
	Category/ Type FEA STAFF PAYROLL TAXES
	FEA STAFF PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

1502.90

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

**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 21 / 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE	Transaction ID: 90819.E13084
	Mailing Address OGDEN, UTAH	Date of Disbursement MM / DD / YYYY 07 / 22 / 2009
	City OGDEN State UT Zip Code 84201-	Amount of Each Disbursement this Period 2567.25
	Purpose of Disbursement FEA Staff Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA STAFF PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) NEBRASKA DEPT OF REVENUE	Transaction ID: 90819.E13072
	Mailing Address 301 CENTENNIAL MALL SOUTH	Date of Disbursement MM / DD / YYYY 07 / 28 / 2009
	City LINCOLN State NE Zip Code 68508-	Amount of Each Disbursement this Period 572.60
	Purpose of Disbursement FEA Staff Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA STAFF PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Perre Neilan	Transaction ID: 90819.E13075
	Mailing Address 1536 Van Dorn St	Date of Disbursement MM / DD / YYYY 07 / 06 / 2009
	City Lincoln State NE Zip Code 68502-3944	Amount of Each Disbursement this Period 2490.65
	Purpose of Disbursement FEA Staff Salary	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA STAFF SALARY

SUBTOTAL of Disbursements This Page (optional)	5630.50
TOTAL This Period (last page this line number only)	

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 22 / 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) Perre Neilan Mailing Address 1536 Van Dorn St City Lincoln State NE Zip Code 68502-3944 Purpose of Disbursement FEA Staff Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90819.E13076 Date of Disbursement 07 / 15 / 2009 Amount of Each Disbursement this Period 2490.64 FEA STAFF SALARY
B.	Full Name (Last, First, Middle Initial) Perre Neilan Mailing Address 1536 Van Dorn St City Lincoln State NE Zip Code 68502-3944 Purpose of Disbursement FEA Staff Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90819.E13077 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 2490.65 FEA STAFF SALARY
C.	Full Name (Last, First, Middle Initial) Stacey Van Zuiden Mailing Address 11709 Trumble Loup West City Bellevue State NE Zip Code 68123-1184 Purpose of Disbursement FEA Staff Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90819.E13080 Date of Disbursement 07 / 15 / 2009 Amount of Each Disbursement this Period 1539.80 FEA STAFF SALARY

SUBTOTAL of Disbursements This Page (optional) ▶	6521.09
TOTAL This Period (last page this line number only) ▶	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A.	Full Name (Last, First, Middle Initial) Stacey Van Zuiden	Transaction ID: 90819.E13081 Date of Disbursement 07 / 31 / 2009
	Mailing Address 11709 Trumble Loup West	
	City Bellevue State NE Zip Code 68123-1184	Amount of Each Disbursement this Period 1539.81
	Purpose of Disbursement FEA Staff Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA STAFF SALARY

B.	Full Name (Last, First, Middle Initial) Rebecca Weber	Transaction ID: 90819.E13082 Date of Disbursement 07 / 15 / 2009
	Mailing Address 2035 S. 50th St, Apt C	
	City Lincoln State NE Zip Code 68502-	Amount of Each Disbursement this Period 1257.96
	Purpose of Disbursement FEA Staff Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA STAFF SALARY

C.	Full Name (Last, First, Middle Initial) Rebecca Weber	Transaction ID: 90819.E13083 Date of Disbursement 07 / 31 / 2009
	Mailing Address 2035 S. 50th St, Apt C	
	City Lincoln State NE Zip Code 68502-	Amount of Each Disbursement this Period 1257.95
	Purpose of Disbursement FEA Staff Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA STAFF SALARY

SUBTOTAL of Disbursements This Page (optional)	▶	4055.72
TOTAL This Period (last page this line number only)	▶	17710.21

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Friends of Senator Dave Karnes			Nature of Debt (Purpose): -
Mailing Address 625 N. 129th Plaza			
City Omaha	State NE	ZIP Code 68154-	

Outstanding Balance Beginning This Period		Transaction ID: LS0128200412C145191	
4140.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	4140.00	

1) SUBTOTALS This Period This Page (optional).....	4140.00
2) TOTALS This Period (last page this line number only).....	4140.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	4140.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hon. Chuck Sigerson			Nature of Debt (Purpose): Travel Expenses
Mailing Address 15835 California Street			
City Omaha	State NE	ZIP Code 68118-	

Outstanding Balance Beginning This Period 831.75		Transaction ID: LS0128200457E6217	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 831.75	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Staff Management, Inc			Nature of Debt (Purpose): Payroll-Labels-Company Bankrupt
Mailing Address 202 S. 71st Street			
City Omaha	State NE	ZIP Code 68132-	

Outstanding Balance Beginning This Period 11654.33		Transaction ID: LS0128200457E6218	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11654.33	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Maverick Political			Nature of Debt (Purpose): FEA Exempt/Brochures
Mailing Address 4642 So. 132nd St			
City Omaha	State NE	ZIP Code 68137-	

Outstanding Balance Beginning This Period 3104.41		Transaction ID: LS90130.E12586	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3104.41	

1) SUBTOTALS This Period This Page (optional).....	▶	15590.49
2) TOTALS This Period (last page this line number only).....	▶	15590.49
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	15590.49

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 Nebraska Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- X Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Nebraska Republican Party

NAME OF ACCOUNT Non-Federal Account 1610 N Street	DATE OF RECEIPT M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 13.33
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	13.33	Transaction ID: H390819.C179298
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Nebraska Republican Party

NAME OF ACCOUNT Non-Federal Account 1610 N Street	DATE OF RECEIPT M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 101.90
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BREAKDOWN OF TRANSFER RECEIVED		101.90
i) Total Administrative		Transaction ID: H390819.C179299
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Nebraska Republican Party

NAME OF ACCOUNT Non-Federal Account 1610 N Street	DATE OF RECEIPT M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 2592.97
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2592.97	Transaction ID: H390819.C179300
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Nebraska Republican Party

NAME OF ACCOUNT Non-Federal Account 1610 N Street	DATE OF RECEIPT M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 96.19
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	96.19	Transaction ID: H390819.C179301
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Nebraska Republican Party

NAME OF ACCOUNT Non-Federal Account 1610 N Street	DATE OF RECEIPT M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 37.40
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	37.40	Transaction ID: H390819.C179302
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Nebraska Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non-Federal Account 1610 N Street	M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9	783.26

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	783.26	Transaction ID: H390820.C179305
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	3625.05
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	3625.05

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) First National of Nebraska, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1620 Dodge Street			Allocated Activity or Event Year-To-Date 54606.18		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Omaha	NE	68102-	Transaction ID: H490819.E13039		
Purpose of Disbursement: Merchant Service Fees			Category/Type 001		
Activity or Event Identifier: ADMINISTRATION B 4			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: H490819.E13039		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.63		48.87		57.50

B. Full Name (Last, First, Middle Initial) Union Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 82535			Allocated Activity or Event Year-To-Date 58651.44		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Lincoln	NE	68501-	Transaction ID: H490819.E13041		
Purpose of Disbursement: Bank Service Charge			Category/Type 001		
Activity or Event Identifier: ADMINISTRATION B 4			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: H490819.E13041		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.80		299.18		351.98

C. Full Name (Last, First, Middle Initial) Ascom Hasler Mailing Systems, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 858			Allocated Activity or Event Year-To-Date 54906.18		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Shelton	CT	06484-	Transaction ID: H490819.E13042		
Purpose of Disbursement: Postage - Admin			Category/Type 001		
Activity or Event Identifier: ADMINISTRATION B 4			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: H490819.E13042		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.00		255.00		300.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.43		603.05		709.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)
Ascom Hasler Mailing Systems, Inc.

Mailing Address
PO Box 858

City Shelton	State CT	Zip Code 06484-	001
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Purpose of Disbursement:
Postage - Admin

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
58187.30

Date / /

Transaction ID: H490819.E13043

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address
700 R Street

City Lincoln	State NE	Zip Code 68501-	001
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Purpose of Disbursement:
Postage - Admin

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
58299.46

Date / /

Transaction ID: H490819.E13050

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.60		37.40		44.00

C. Full Name (Last, First, Middle Initial)
Alltel

Mailing Address
1440 M St PO Box 81309

City Lincoln	State NE	Zip Code 68501-	001
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Purpose of Disbursement:
Utilities - Cellular

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
55041.74

Date / /

Transaction ID: H490819.E13053

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.33		115.23		135.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.43		195.13		229.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) Black Hills Energy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address PO Box 4660			Allocated Activity or Event Year-To-Date 58064.47																					
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y															
Carol Stream	IL	60197-4660	Transaction ID: H490819.E13055																					
Purpose of Disbursement: Utilities - Gas			Category/Type 001																					
Activity or Event Identifier: ADMINISTRATION B 4			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	2	4	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y															
0	7	/	2	4	/	2	0	0	9															

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.00		22.67		26.67

B. Full Name (Last, First, Middle Initial) Cepter Enterprises			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address 5100 North 27th, Ste. A2			Allocated Activity or Event Year-To-Date 58037.80																					
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y															
Lincoln	NE	68521-	Transaction ID: H490819.E13056																					
Purpose of Disbursement: Web Site Hosting			Category/Type 001																					
Activity or Event Identifier: ADMINISTRATION B 4			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	2	4	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y															
0	7	/	2	4	/	2	0	0	9															

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.89		22.06		25.95

C. Full Name (Last, First, Middle Initial) Culligan Water			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address 1371 S 33rd St			Allocated Activity or Event Year-To-Date 57825.35																					
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y															
Lincoln	NE	68510-4508	Transaction ID: H490819.E13057																					
Purpose of Disbursement: Bottled Water			Category/Type 001																					
Activity or Event Identifier: ADMINISTRATION B 4			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	2	4	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y															
0	7	/	2	4	/	2	0	0	9															

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.62		48.87		57.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.51		93.60		110.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)
Hasler Financial Services

Mailing Address
PO Box 45850

City State Zip Code
San Francisco CA 94145-

001

Purpose of Disbursement:
Postage Meter Lease

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58011.85

Date 07 / 24 / 2009

Transaction ID: H490819.E13058

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
27.98 + 158.52 = 186.50

B. Full Name (Last, First, Middle Initial)
Herbs Window Service

Mailing Address
4140 NW 57th St

City State Zip Code
Lincoln NE 68524-1066

001

Purpose of Disbursement:
Office Maintenance

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58092.29

Date 07 / 24 / 2009

Transaction ID: H490819.E13060

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
4.17 + 23.65 = 27.82

C. Full Name (Last, First, Middle Initial)
Lincoln Electric System

Mailing Address
PO BOX 80869

City State Zip Code
LINCOLN NE 68501-

001

Purpose of Disbursement:
Utilities - Electric

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55589.07

Date 07 / 24 / 2009

Transaction ID: H490819.E13061

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
82.10 + 465.23 = 547.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
114.25 + 647.40 = 761.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) MCI WORLDCOM			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 856053			Allocated Activity or Event Year-To-Date 55694.17		
City Louisville	State KY	Zip Code 40285-	Category/ Type 001		
Purpose of Disbursement: Long Distance			Date M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9		
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H490819.E13062		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.48		8.39		9.87

B. Full Name (Last, First, Middle Initial) RDW Business Services, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 22829			Allocated Activity or Event Year-To-Date 55909.86		
City Lincoln	State NE	Zip Code 68542-	Category/ Type 001		
Purpose of Disbursement: Payroll Processing			Date M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9		
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H490819.E13063		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.85		84.15		99.00

C. Full Name (Last, First, Middle Initial) Sprint PCS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 219554			Allocated Activity or Event Year-To-Date 55810.86		
City Kansas City	State MO	Zip Code 64121-	Category/ Type 001		
Purpose of Disbursement: Utilities - Cellular			Date M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9		
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H490819.E13064		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.50		99.19		116.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.83		191.73		225.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)
Stacey Dieckmann

Mailing Address
4210 G St

City State Zip Code
Lincoln NE 68510-4734

001

Purpose of Disbursement:
Accounting/Business Services

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57745.86

Date 07 / 24 / 2009

Transaction ID: H490819.E13065

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
275.40 + 1560.60 = 1836.00

B. Full Name (Last, First, Middle Initial)
TIME WARNER CABLE

Mailing Address
5400 S. 16TH STREET

City State Zip Code
LINCOLN NE 68512-

001

Purpose of Disbursement:
Utilities - Cable

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55684.30

Date 07 / 24 / 2009

Transaction ID: H490819.E13066

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
14.28 + 80.95 = 95.23

C. Full Name (Last, First, Middle Initial)
Zajicek Refuse

Mailing Address
4011 South 31st Street

City State Zip Code
Lincoln NE 68502-

001

Purpose of Disbursement:
Garbage Service

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57767.86

Date 07 / 24 / 2009

Transaction ID: H490819.E13067

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.30 + 18.70 = 22.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
292.98 + 1660.25 = 1953.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) Nebraska U.C. Fund			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of Labor P.O. Box 94600			Allocated Activity or Event Year-To-Date 58137.30	
City State Zip Code Lincoln NE 68509-	Category/ Type 001		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 28 / 2009	
Purpose of Disbursement: Unemployment Taxes			Transaction ID: H490819.E13073	
Activity or Event Identifier: ADMINISTRATION B 4				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.75		38.26		45.01

B. Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address OGDEN, UTAH			Allocated Activity or Event Year-To-Date 58255.46	
City State Zip Code OGDEN UT 84201-	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 30 / 2009	
Purpose of Disbursement: Federal Unemployment Taxes			Transaction ID: H490819.E13086	
Activity or Event Identifier: ADMINISTRATION B 4				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.22		57.94		68.16

C. Full Name (Last, First, Middle Initial) Wells Fargo Card Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 6426			Allocated Activity or Event Year-To-Date 58725.24	
City State Zip Code Carol Stream IL 60197-	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 31 / 2009	
Purpose of Disbursement: CREDIT CARD: SEE BELOW			Transaction ID: H490819.E13087	
Activity or Event Identifier: ADMINISTRATION B 4				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.07		62.73		73.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.04		158.93		186.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) NETWORK SOLUTIONS INC.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 7305			Allocated Activity or Event Year-To-Date 23.90		
City BALTIMORE	State MD	Zip Code 21297-0525	Date <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: MEMO Web Site Hosting			Transaction ID: H490819.E13089		
Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] MEMO 001 Web Site Hosting			Date <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text" value="3.59"/>		<input type="text" value="20.31"/>		<input type="text" value="23.90"/>	

B. Full Name (Last, First, Middle Initial) Verio			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8005 S Chester St Ste 200			Allocated Activity or Event Year-To-Date 49.90		
City Englewood	State CO	Zip Code 80112-3523	Date <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: MEMO Web Site Hosting			Transaction ID: H490819.E13090		
Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] MEMO 001 Web Site Hosting			Date <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text" value="7.49"/>		<input type="text" value="42.41"/>		<input type="text" value="49.90"/>	

C. Full Name (Last, First, Middle Initial) Wells Fargo Card Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 6426			Allocated Activity or Event Year-To-Date 58787.83		
City Carol Stream	State IL	Zip Code 60197-	Date <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Finance Charges			Transaction ID: H490819.E13088		
Activity or Event Identifier: ADMINISTRATION B 4			Date <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text" value="9.39"/>		<input type="text" value="53.20"/>		<input type="text" value="62.59"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text" value="9.39"/>		<input type="text" value="53.20"/>		<input type="text" value="62.59"/>	

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
<input type="text"/>		<input type="text"/>		<input type="text"/>	

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial) Wells Fargo Card Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 6426			Allocated Activity or Event Year-To-Date 58813.44																						
City	State	Zip Code	Category/ Type																						
Carol Stream	IL	60197-																							
Purpose of Disbursement: CREDIT CARD: SEE BELOW			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	3	1	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
0	7	/	3	1	/	2	0	0	9																
Activity or Event Identifier: ADMINISTRATION B 4			Transaction ID: H490819.E13091																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.84		21.77		25.61

B. Full Name (Last, First, Middle Initial) Target			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 333 North 48th Street			Allocated Activity or Event Year-To-Date 12.22																						
City	State	Zip Code	Category/ Type																						
Lincoln	NE	68504-																							
Purpose of Disbursement: MEMO Office Supplies			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	3	1	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
0	7	/	3	1	/	2	0	0	9																
Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] MEMO 001 Office Supplies			Transaction ID: H490819.E13092																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.83		10.39		12.22

C. Full Name (Last, First, Middle Initial) Baker Hardware			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 801 N Street			Allocated Activity or Event Year-To-Date 3.20																						
City	State	Zip Code	Category/ Type																						
Lincoln	NE	68508-																							
Purpose of Disbursement: MEMO Office Supplies			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	3	1	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
0	7	/	3	1	/	2	0	0	9																
Activity or Event Identifier: ADMINISTRATION B 4 [MEMO ITEM] MEMO 001 Office Supplies			Transaction ID: H490819.E13094																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.48		2.72		3.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.84		21.77		25.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)
Godaddy.com

Mailing Address
14455 North Hayden Road, Ste. 219

City	State	Zip Code
Scottsdale	AZ	85260-

001

Purpose of Disbursement:
MEMO Website Hosting

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10.19

Activity or Event Identifier:
ADMINISTRATION B 4
[MEMO ITEM] MEMO 001 Website Hosting

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	0	9

Transaction ID: H490819.E13093

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.53		8.66		10.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
639.70	3625.06	4264.76