Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. NETJETS INC. PAC 4111 BRIDGEWAY AVENUE ADDRESS (number and street) (Check if address is changed) COLUMBUS 43219 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS rtanner2@netjets.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00481309 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Tanner, Bob, , , Type or Print Name of Treasurer Tanner, Bob, , , [Electronically Filed] 80 2018 Signature of Treasurer Date 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. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page 2
	COMMITTEE 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. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		(Democratic,
(d)		Republican, etc.) Party.
Political A	action Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a
	Corporation Wo 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 se committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FEC Form 1 (Davised (22/2000)	Page 3
FEC Form 1 (Revised 0 Write or Type Committee Name		Page 3
NETJETS INC.		
-	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
BNSF RAILWAY COM	IPANY RAILPAC (BNSF RAILPAC)	
Mailing Address	P.O. Box 961039	
Mailing Address	Suite 220	
	Fort Worth TX 76161	
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization 🗶 Affiliated Committee 🔲 Joint Fundraising Representative 📗 Lea	dership PAC Sponsor
 Custodian of Records: Iden books and records. 	ntify by name, address (phone number optional) and position of the person in poss	session of committee
Tanner, Bo	ob, , ,	1
Full Name	,4111 Bridgeway Avenue	
Mailing Address		
	Columbus , OH , 43219	
	Columbus OH 43219	
Title or Position	CITY STATE 2	ZIP CODE
VP-Corp.&Govt. Aff.	Telephone number 614 – 2	239 - 2091
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of
Full Name Tanner, Bo	ob, , ,	
Mailing Address	4111 Bridgeway Avenue	
	Columbus	
	CITY STATE Z	ZIP CODE
Title or Position PAC Treasurer		2091

FEC FOIII I (R	Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
safety deposit boxes or	ositories: List all banks or other depositories in which the committee deposits funds, how maintains funds.	
Name of Bank, Deposi	or maintains funds.	
Name of Bank, Deposi	or maintains funds. itory, etc. th Third Bank	
Name of Bank, Deposi	or maintains funds. itory, etc. th Third Bank	5
Name of Bank, Deposi	th Third Bank 21 East State Street	ZIP CODE
Name of Bank, Deposi	commaintains funds. Ith Third Bank 21 East State Street Columbus CITY STATE	
Name of Bank, Deposi	commaintains funds. Ith Third Bank 21 East State Street Columbus CITY STATE	
Name of Bank, Deposi Mailing Address Name of Bank, Deposi	th Third Bank 21 East State Street Columbus CITY STATE 166 N. Hamilton Rd.	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundrais i	ng i artioipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
ACME Brick Con	npany Good Government Fund for Fe	deral Elections	
I			
Mailing Address	P.O. Box 425		
	Fort Worth	, TX	76101
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
•			
	ed Organization Affiliated Committee Joint lify by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

Page ____ **of** ______

Mailing Address TITLE OR POSITION	vries: List all banks o	CITY A	STATE Telephone Number		ODE A
Mailing Address TITLE OR POSITION anks or Other Depositor Deposi	vries: List all banks o	CITY A	STATE Telephone Number	ZIP CO	ODE A
Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or maintain and the control of	vries: List all banks o	CITY A	STATE Telephone Number	ZIP CO	ODE A
Mailing Address TITLE OR POSITION	vries: List all banks o	CITY A	STATE Telephone Number	ZIP CO	ODE A
Mailing Address TITLE OR POSITION	▼	CITY A	STATE Telephone Number	ZIP CO	ODE A
Mailing Address			STATE		
Mailing Address					
Full Name					
		phone number – optional)		Loader	5p 1 AO OP
	d Organization		oint Fundraising Repre		ship PAC Sp
Relationship:		CITY A	STAT		_ - CODE ▲
	Washington		, D	20076	1 1
Maining Addition					
Mailing Address	One GEICO Plaza				1 1 1 1
		ted Committee, Joint Fuce Company Politic			PAC Spons
			,		
4.			FEC ID num	oer C	
			FEC ID num	oer C	
3.			FEC ID num	per C	
1			•		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ______

TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address				s funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.				s funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.				s funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or ma				s funds, holds accounts, rents
Banks or Other Deposito				s funds, holds accounts, rents
	wines Link all beauty or all the			a funda halda caracinta unti
TITLE OR POSITION			Lophono Hamboi	
TITLE OR POSITION		ııı Te	lephone Number	
	▼ CIT	Y ▲	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identify	by name, address (phone	number - optional)		
Connected	d Organization X Affiliated	Committee Joint	Fundraising Representa	ative Leadership PAC Spo
Relationship:	C	ITY 🛦	STATE ▲	ZIP CODE ▲
	Temple		TX	76503
-				
Mailing Address	4747 McLane Parkway			
McLane Company	/ Inc. Federal Politic	al Action Commit	t ee	
Name of Any Connected	Organization, Affiliated Co	ommittee, Joint Fundra	aising Representative	e, or Leadership PAC Sponso
4.			FEC ID number	C
			FEC ID number	C
3.			FEC ID number	C
2			FEC ID number	C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
MidAmerican Ene	ergy Company PAC		
	<u> </u>		
	666 Grand Avenue		
Mailing Address			
	P.O. Box 657		
	Des Moines	IA L	50306
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or ((h). Joint Fundraising	y Participant:			
	1	<u> </u>		FEC ID number	С
	2.			FEC ID number	C
	3.			FEC ID number	C
_	4.			FEC ID number	C
6. N	Name of Any Connected of Berkshire Hathawa		nmittee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	666 Grand Avenue		<u> </u>	1 1 1 1 1 1 1 1 1 1
		P.O. Box 657			
		Des Moines		IA I	50306
	Relationship:	CIT	TY A	STATE A	ZIP CODE ▲
	Connected	Organization X Affiliated (Committee Joint	Fundraising Represent	ative Leadership PAC Sponsor
3. D	Pesignated Agent: Identify Full Name	by name, address (phone r	number – optional)		
	Mailing Address				
		CITY	, A	STATE A	ZIP CODE A
	Mailing Address	CITY	ı		
sa N	Mailing Address TITLE OR POSITION Banks or Other Depositor tafety deposit boxes or main land to the position of Bank,	ies: List all banks or other	Tele	STATE ▲ ephone Number	
sa N	Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or main afety deposit boxes or main afety depository, etc.	ies: List all banks or other	Tele	STATE ▲ ephone Number	ZIP CODE 🛦
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi r		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr		e, or Leadership PAC Spon
Mailing Address	825 N E MULTNOMAH SUITE 2000 LCT		
	PORTLAND	OR	97232
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
		Fundraising Representa	Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1		FEC ID number	С
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2.		J	
3.		FEC ID number	C
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ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spon
NetJets Inc.			1 1 1 1 1 1 1 1 1
Mailing Address	4111 Bridgeway Avenue		
	Columbus	OH	43219-1882
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optional)		
Full Name			
Mailing Address			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	STATE Telephone Number	ZIP CODE A
	<u> </u>	Telephone Number	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	9		
1.		FEC ID number	C
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=	LITICAL ACTION COMMITTEE	aising nepresentative	e, or Leadership FAC Spon
Mailing Address	P.O. BOX 81500		
· ·	ATTN: JOHN J. VINSKI, ASST. TREAS.		
	LAS VEGAS	NV	89180
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sp
Connecte		Fundraising Representa	ative Leadership PAC Sp
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