RECEIVED)

2012 NOV 15 AM 11: 32 FEC MAIL CENTER

Committee Name:

NEBRASKA REPUBLICAN CLUB

If registered, FEC ID:

Today's Date:

11/10/2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

PETERSON TRUMP

. Treasurer

12036951704

FEC FORM 1

STATEMENT OF ORGANIZATION

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2012 NOV 15 AH 11: 32

FORM 1		OILGE	1111671	1011			, WILLE, 2
			····			Office Lise DAVA	L CENTER
1. NAME OF COMMITTEE (in	ı full)	(Check if is change		xample:If typing, type ver the lines.	12FE4M	5	
NEBRASK	AREF	PUBLICAN	1 CLUB			1 1 1 1 1 1	
				<u> </u>			
ADDRESS (number a	nd street)	P. O. BO	X 6673	13			
(Check if ac is changed)		POMPAN	O BEA	.CH	FL	33066	·
			CITY		STATE	ZIP CO	DE
COMMITTEE'S E-MA (Check if is change	address			address) publicanClubs	s@gma	ail.com , ,	
COMMITTEE'S WEB	PAGE ADD	RESS (URL)					
(Check if is change							
2. DATE 11	" / ĵ0	°′2012`	,				
3. FEC IDENTIFIC	CATION NU	MBER	С				
4. IS THIS STATE	MENT 🔀	NEW (N)	OR	AMENDED (A)			
I certify that I have e	examined the	s Statement and to	the best of m	ny knowledge and belief it	is true, corre	ct and complete.	
Type or Print Name	of Treasurer	PETERS	SON TF	RUMP			
Signature of Treasure	er	feterso)	Tump		Date 1	1°′10°′	2012 [*]
NOTE: Submission of	-	•	•	subject the person signing the		•	U.S.C. §437g.
Office Use Only				For further information of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FOF	•

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_		Form 1 (Revised 02/2009)	Page 2					
5.		/PE OF COMMITTEE andidate 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. (Cor information below.)	nplete the candidate					
	Name of Candidate							
	Candidate Party Affil	******	State District					
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate							
	Party C	ommittee:						
	(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.					
	Politica	Action Committee (PAC):	· · · · · · · · · · · · · · · · · ·					
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its ∞	onnected organization is a:					
		Corporation Corporation w/o Capital Stock	Labor Organization					
		Membership Organization Trade Association	Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.						
	(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	segregated 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 Fu	ndraising Representative:						
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal eandidate						
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, none of which is an authorized committee of a federal candidate.						
	0	•						
		ommittees Participating in Joint Fundraiser						
	1.							
	2.	FEC ID number C						
	3.	FEC ID number C						
	4.							

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Write or Type Committee Name	
NEBRASKA REPUBLICAN CLUB	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Lead	ership PAC Sponsor
NONE	
INONE	
Mailing Address	
	11111111
	-
CITY STATE	ZIP CODE
	1
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in books and records. 	possession of committee
PETERSON TRUMP	,
Full Name	
Mailing Address P. O. BOX 667313	
POMPANO BEACH FL 330	066 -
Title or Position CITY STATE	ZIP CODE
FINANCE DIRECTOR Telephone number 954 -	1268 18672
Telephone number	[268] _ [8672]
 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer). 	name and address of
Fill Name DETEROON LTD IAAR	
Full Name PETERSON TRUMP of Treasurer	
Mailing Address P. O. BOX 667313	
POMPANO BEACH FL 1330	066 -
CITY STATE	ZIP CODE
Title or Position TREASURER Telephone number [954]	268 8672 _

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		number	
Banks or Other Depo-	sitories: List all banks or other depositories in which the comr	mileo doposilo	•
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.		
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.		
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.		[33064]
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. ELLS FARGO 400 EAST SAMPLE ROAD		
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. ELLS FARGO 400 EAST SAMPLE ROAD POMPANO BEACH CITY	FL.	[33064]
safety deposit boxes or Name of Bank, Deposit WE Mailing Address	r maintains funds. tory, etc. ELLS FARGO 400 EAST SAMPLE ROAD POMPANO BEACH CITY	FL.	[33064]
safety deposit boxes or Name of Bank, Deposit WE Mailing Address	r maintains funds. tory, etc. ELLS FARGO 400 EAST SAMPLE ROAD POMPANO BEACH CITY	FL STATE	33064 _ _ _ _ _ _ _ _
safety deposit boxes or Name of Bank, Deposit IVE Mailing Address Name of Bank, Deposit	r maintains funds. tory, etc. ELLS FARGO 400 EAST SAMPLE ROAD POMPANO BEACH CITY tory, etc.	FL STATE	33064 ZIP CODE
Name of Bank, Deposition Name of Bank, Deposition Name of Bank, Deposition	r maintains funds. tory, etc. ELLS FARGO 400 EAST SAMPLE ROAD POMPANO BEACH CITY tory, etc.	FL STATE	[33064]

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 11/13/2012
Delivery Confirmation™ or Signature Confi	rmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
PY	11/30/2012
PREPARER (2/2005)	DATE PREPARED
(3/2005)	