

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

RECEIVED
LEGISLATIVE SENATE
PUBLIC RECORDS

14 MAR 10 PM 3:11

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name is
changed)

Example: If typing, type
over the lines.

12FE4M5

Domina For Nebraska, Inc.

ADDRESS (number and street) 2425 S 144th St

Fl 1

(Check if address is
changed)

Omaha

CITY

NE

STATE

68144

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is
changed)

coleman@capcompliance.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is
changed)

www.davedomina.com

2. DATE

03/05/2014

3. FEC IDENTIFICATION NUMBER

C C00554675

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer

Assist.

~~Fred A. Lockwood~~

Kimberly Coleman

Signature of Treasurer

Kimberly Co

Date

3/7/14

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
Use
Only

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

14020163793

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate David A. Domina

Candidate Party Affiliation Office Sought House Senate President State District

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

Name of Candidate _____

Party Committee:

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

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e. nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----------|---------------|--------------------------------|----------------------|
| 1. _____ | FEC ID Number | <input type="text" value="C"/> | <input type="text"/> |
| 2. _____ | FEC ID Number | <input type="text" value="C"/> | <input type="text"/> |
| 3. _____ | FEC ID Number | <input type="text" value="C"/> | <input type="text"/> |
| 4. _____ | FEC ID Number | <input type="text" value="C"/> | <input type="text"/> |

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Write or Type Committee Name

Domina For Nebraska, Inc.

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
NONE

Mailing Address

CITY STATE ZIP CODE

Relationship:

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

Full Name Brian E. Jorde

Mailing Address 2425 S 144th St

Omaha NE 68144
CITY STATE ZIP CODE

Title or Position

Committee Member

Telephone Number (402) 493-4100

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

Full Name Fred A. Lockwood

Mailing Address 1110 Circle Dr

Ste 100

Scottsbluff NE 69361
CITY STATE ZIP CODE

Title or Position

Treasurer

Telephone Number (308) 632-6570

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Full Name of Designated Agent Kimberly Coleman

Mailing Address 600 Pennsylvania Ave SE
Ste 210
Washington DC 20003
CITY STATE ZIP CODE

Title or Position Assistant Treasurer Telephone Number (202) 544-6960

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

Name of Bank, Depository, etc.

American National Bank

Mailing Address 8990 W Dodge Rd
Omaha NE 68114
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address _____

CITY STATE ZIP CODE

14020163796

NANCY ERICKSON
SECRETARY

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

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

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USPS FIRST CLASS MAIL _____
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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

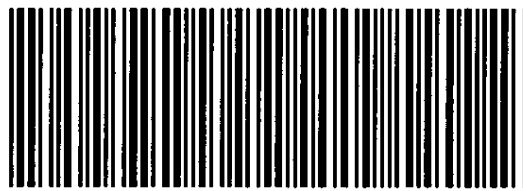
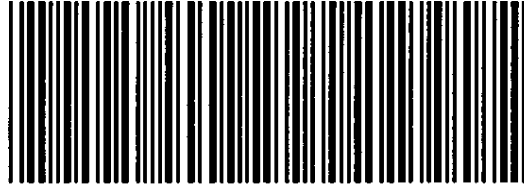
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FAX 3-10-14
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PREPARER DH DATE PREPARED 3-10-14

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