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Only

FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Sensible American Solutions Supporting Everyone PAC 332 W Lee Hwy ADDRESS (number and street) # 303 (Check if address is changed) Warrenton 20186 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@fecfinancial.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00571802 FEC IDENTIFICATION NUMBER 3. 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. Ralls, Steve, , , Type or Print Name of Treasurer Ralls, Steve, , , [Electronically Filed] 15 2016 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
		OMMITTEE	
	naidate	Committee:	
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
	ne of ididate		
	didate ty Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	rty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected 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)	I I	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	progeted fund or party
(f)	×	committee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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 Forms 1 (Decision	24 03/3000)	Dama 2					
FEC Form 1 (Revise Write or Type Committee Na		Page 3					
•		240					
	rican Solutions Supporting Everyone F						
_	d Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor					
Sasse, Benjamin, E	<u>, , , , , , , , , , , , , , , , , , , </u>						
Mailing Address	105 E 6th St						
	Fremont NE	68025					
	CITY STATE	ZIP CODE					
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Represental	tive x Leadership PAC Sponsor					
7. Custodian of Records: I books and records.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.						
Full Name							
Mailing Address							
Title or Position	CITY STATE	ZIP CODE					
	Telephone number						
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; j., assistant treasurer).	and the name and address of					
Full Name Ralls, S of Treasurer	steve, , ,						
Mailing Address	332 W Lee Hwy						
	# 303						
	Warrenton VA	20186					
	CITY STATE	ZIP CODE					
Title or Position Treasurer	5. Telephone number	40 878 5664					

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 1
	Depositories: List all banks or other depositories in which the committee deposits funds, hole oxes or maintains funds. Depository, etc. Wells Fargo	
safety deposit bo	oxes or maintains funds. Depository, etc.	
safety deposit bo Name of Bank, I	Depository, etc. Wells Fargo 420 Montgomery St	ZIP CODE
safety deposit bo Name of Bank, I	Depository, etc. Wells Fargo 420 Montgomery St San Francisco CA 94104 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Wells Fargo 420 Montgomery St San Francisco CA 94104 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address Name of Bank, I	Depository, etc. Wells Fargo 420 Montgomery St San Francisco CA 94104 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Wells Fargo 420 Montgomery St San Francisco CA 94104 CITY STATE	
safety deposit be Name of Bank, I Mailing Address Name of Bank, I	Depository, etc. Wells Fargo 420 Montgomery St San Francisco CA 94104 CITY STATE	
safety deposit be Name of Bank, I Mailing Address Name of Bank, I	Depository, etc. Wells Fargo 420 Montgomery St San Francisco CA 94104 CITY STATE	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor SASSE LEADERSHIP COMMITTEE 332 W LEE HWY Mailing Address # 303 WARRENTON 20186 **CITY** STATE 4 ZIP CODE Relationship: X Connected Organization Joint Fundraising Representative Leadership PAC Sponsor Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number