

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL ELECTION COMMISSION  
MAIL ROOM

JUL 28 8 58 AM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

|  |  |   |
|--|--|---|
| 1. NAME OF COMMITTEE (in full)<br>NEBRASKA CREDIT UNION LEAGUE<br>POLITICAL ACTION COMMITTEE (NCULPAC)                                       |  | 2. FEC IDENTIFICATION NUMBER<br><br>CG0172858 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported<br><br>11904 Arbor Street                   |  |   |
| CITY, STATE and ZIP CODE<br><br>Omaha, NE 68144  |  |   |
| 3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on Has not qualified (date). |  |   |

## 4. TYPE OF REPORT

(a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

Monthly Report Due On:  
 February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

(b) Is this Report an Amendment?     YES     NO

| SUMMARY |   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date   |
|---------|---|-------------------------|---|
| 5.      | Covering Period <u>01-01-93</u> through <u>06-30-93</u>                                   |                         |   |
| 6.      | (a) Cash on Hand January 1, 19_____   |                         | \$ 5,228.74   |
|         | (b) Cash on Hand at Beginning of Reporting Period   | \$ 5,228.74             |   |
|         | (c) Total Receipts (from Line 19)   | \$ 4,424.24             | \$ 4,424.24   |
|         | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)  | \$ 9,652.98             | \$ 9,652.98   |
| 7.      | Total Disbursements (from Line 3D)  | \$ 4,527.48             | \$ 4,527.48   |
| 8.      | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))                | \$ 5,125.50             | \$ 5,125.50   |
| 9.      | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | \$                      | For further information contact:<br>Federal Election Commission<br>999 E Street, NW<br>Washington, DC 20463<br>Toll Free 800-424-9530<br>Local 202-219-3420 |
| 10.     | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$                      |   |

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<br>Steve Edgerton | Date<br>07-22-93 |
| Signature of Treasurer<br>                        |                  |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

| NAME OF COMMITTEE<br>Nebraska Credit Union League Political<br>Action Committee              |  | REPORT COVERING PERIOD<br>FROM 01-01-93 TO: 06-30-93 |                           |
|--|--|--|---------------------------|
|  |  | COLUMN A<br>Total This Period                        | COLUMN B<br>Calendar Year |
| <b>I. Receipts</b>   |  |  |                           |
| 11. Contributions (other than loans) From:   |  |  |                           |
| a. Individual/Persons Other Than Political Committees  |  |  |                           |
| i. Itemized (use Schedule A) .....   |  | \$ 851.00  | \$ 851.00                 |
| ii. Unitemized .....   |  | 3,511.00   | 3,511.00                  |
| iii. Total .....   | (add i and ii) >                                 | 4,362.00   | 4,362.00                  |
| b. Political Party Committees .....  |  | -0-  | -0-                       |
| c. Other Political Committees (such as PACs) .....   |  | -0-  | -0-                       |
| d. Total Contributions .....   | (add a ii, b and c) >                            | -0-  | -0-                       |
| 12. Transfers From Affiliated/Other Party Committees .....                                   |  | -0-  | -0-                       |
| 13. All Loans Received .....   |  | -0-  | -0-                       |
| 14. Loan Repayments Received .....   |  | -0-  | -0-                       |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....                         |  | -0-  | -0-                       |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..... |  | -0-  | -0-                       |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....                                 |  | 62.24  | 62.24                     |
| 18. Transfers from Nonfederal Account for Joint Activity .....                               |  | -0-  | -0-                       |
| 19. Total Receipts .....   | (add 11d, 12, 13, 14, 15, 16, 17, and 18) >      | 4,424.24   | 4,424.24                  |
| 20. Total Federal Receipts .....   | (subtract line 18 from line 19) >                | 4,424.24   | 4,424.24                  |
| <b>II. Disbursements</b>   |  |  |                           |
| 21. Operating Expenditures:  |  |  |                           |
| a. Shared Federal/Non-Federal Activity (from Schedule HM)                                    |  |  |                           |
| i. Federal Share .....   |  | -0-  | -0-                       |
| ii. Non-Federal Share .....  |  | -0-  | -0-                       |
| b. Other Federal Operating Expenditures .....  |  | 27.48  | 27.48                     |
| c. Total Operating Expenditures .....  | (add a i, a ii, and b) >                         | 27.48  | 27.48                     |
| 22. Transfers to Affiliated/Other Party Committees .....                                     |  | 4,500.00   | 4,500.00                  |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees .....      |  | -0-  | -0-                       |
| 24. Independent Expenditures (use Schedule E) .....  |  | -0-  | -0-                       |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) .. |  | -0-  | -0-                       |
| 26. Loan Repayments Made .....   |  | -0-  | -0-                       |
| 27. Loans Made .....   |  | -0-  | -0-                       |
| 28. Refunds of Contributions To:   |  |  |                           |
| a. Individual/Persons Other Than Political Committees .....                                  |  | -0-  | -0-                       |
| b. Political Party Committees .....  |  | -0-  | -0-                       |
| c. Other Political Committees (such as PACs) .....   |  | -0-  | -0-                       |
| d. Total Contribution Refunds .....  | (add a, b and c) >                               | -0-  | -0-                       |
| 29. Other Disbursements .....  |  | -0-  | -0-                       |
| 30. Total Disbursements .....  | (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | 4,527.48   | 4,527.48                  |
| 31. Total Federal Disbursements .....  | (subtract line 21 a ii from line 30) >           | 4,527.48   | 4,527.48                  |
| <b>III. Net Contributions/Operating Expenditures</b>   |  |  |                           |
| 32. Total Contributions (other than loans)(from line 11d) .....                              |  | 4,362.00   | 4,362.00                  |
| 33. Total Contribution Refunds (from line 28d) .....   |  | -0-  | -0-                       |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) .....                     |  | 4,362.00   | 4,362.00                  |
| 35. Total Federal Operating Expenditures .....   | (add 21 a i and 21 b) >                          | 27.48  | 27.48                     |
| 36. Offsets to Operating Expenditures (from line 15) .....                                   |  | -0-  | -0-                       |
| 37. Net Operating Expenditures .....   | (subtract line 36 from 35) >                     | 27.48  | 27.48                     |

0 1 2 3 4 5 6 7 8 9

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Nebraska Credit Union League Political Action Committee

| A. Full Name, Mailing Address and ZIP Code  | Name of Employer                          | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| Steve Edgerton<br>11904 Arbor Street<br>Omaha, NE 68144   | Nebraska Credit Union League              | 01-11-93                | \$250.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>President                   |                         | Aggregate Year-to-Date > \$ 250.00 |
| B. Full Name, Mailing Address and ZIP Code  | Name of Employer                          | Date (month, day, year) | Amount of Each Receipt this Period |
| Janet Johnson<br>5032 South 84th Street<br>Omaha, NE 68127  | Bell Federal Credit Union                 | 01-28-93                | 100.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Vice President              |                         | Aggregate Year-to-Date > \$ 100.00 |
| C. Full Name, Mailing Address and ZIP Code  | Name of Employer                          | Date (month, day, year) | Amount of Each Receipt this Period |
| Joan L. Dixon<br>13202 South 28th Street<br>Omaha, NE 68123   | Omaha Federal Credit Union                | 03-01-93                | 100.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>President                   |                         | Aggregate Year-to-Date > \$ 100.00 |
| D. Full Name, Mailing Address and ZIP Code  | Name of Employer                          | Date (month, day, year) | Amount of Each Receipt this Period |
| Tina Aho<br>2434 North 135th Street<br>Omaha, NE 68164  | Greater Omaha Federal Credit Union        | 03-04-93                | 100.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Manager                     |                         | Aggregate Year-to-Date > \$ 100.00 |
| E. Full Name, Mailing Address and ZIP Code  | Name of Employer                          | Date (month, day, year) | Amount of Each Receipt this Period |
| Ginny Plemmons<br>719 East 7th Street<br>Papillion, NE 68046  | Nebraska Credit Union League              | 03-16-93                | 101.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Executive Secretary         |                         | Aggregate Year-to-Date > \$ 101.00 |
| F. Full Name, Mailing Address and ZIP Code  | Name of Employer                          | Date (month, day, year) | Amount of Each Receipt this Period |
| Kathy Gettert<br>312 Sidney, Box 492<br>Hemingford, NE 69348  | Hemingford Community Federal Credit Union | 03-24-93                | 100.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Manager                     |                         | Aggregate Year-to-Date > \$ 100.00 |
| G. Full Name, Mailing Address and ZIP Code  | Name of Employer                          | Date (month, day, year) | Amount of Each Receipt this Period |
| Roger Hake<br>1414 15th Street<br>Columbus, NE 68601  | NPPD Employees Federal Credit Union       | 03-25-93                | 100.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>President                   |                         | Aggregate Year-to-Date > \$        |

|   |        |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)           | 851.00 |
| TOTAL This Period (last page this line number only) | 851.00 |

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE **1** OF **1**  
FOR LINE NUMBER **21.b.**

**Other Federal Operating Expenditures**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (in Full)

| A. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement   | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Metro Health Services FCU<br>1910 South 44th Street<br>Omaha, NE 68106                          | <b>Check Order</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | 02-17-93                | \$11.48                                 |
| B. Full Name, Mailing Address and ZIP Code<br><br>Federal Reserve Bank<br>Kansas City, Missouri | <b>1992 Pol. Tax Liability</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 02-17-93                | \$16.00                                 |
| C. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | Date (month, day, year) | Amount of Each Disbursement This Period |

1  
2  
3  
4  
5  
6  
7  
8  
9  
0

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | \$27.48 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | \$27.48 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 22

Transfer to Affiliated Committee

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

| A. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement   | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| CULAC<br>805 15th Street N.W., Suite 300<br>Washington, D.C. 20005-2207 | Purpose of Disbursement: <u>Affiliated Transfer</u><br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 02-02-93                | \$4,500.00                              |
| B. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |
| C. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code                              | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | Date (month, day, year) | Amount of Each Disbursement This Period |

|   |            |
|---|------------|
| SUBTOTAL of Disbursements This Page (optional) . . . . .      | \$4,500.00 |
| TOTAL This Period (last page this line number only) . . . . . | \$4,500.00 |

**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE**  
**FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

7-20-93

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records  
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*M.H.*  
PREPARER

7-28-93  
DATE PREPARED

1 3 0 3 3 1 1 3 4 4