FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
13 OCT 18 AM 11:32
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

SID DINSDALE FOR U.S. SENATE, INC.

ADDRESS (number and street) (Check if address is changed)

20330 VETERANS WAY DRIVE,
SUITE 6

CITY ▲ ELKHORN
STATE ▲ NE
ZIP CODE ▲ 68022 -

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed)

INFO@SIDFORSENATE.COM

Optional Second E-Mail Address
JOEDONOVAN@DELOITTE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed)

WWW.SIDFORSENATE.COM

2. DATE MM 10 / DD 15 / YYYY 2013

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT X 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 JOSEPH DONOVAN

Signature of Treasurer Joe D Date 10 / 15 / 2013

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 06/2012)

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5. TYPE OF COMMITTEE

Candidate Committee:

(a) [X] 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: SID DINSDALE

Candidate Party Affiliation: REP

Office Sought: [ ] House [X] Senate [ ] President

State: NE

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 C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

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Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

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: JOSEPH DONOVAN

Mailing Address: 20330 VETERANS WAY DR. STE 6

ELKHORN NE 68022 -

CITY STATE ZIP CODE

Title or Position: TREASURER

Telephone number: 402 - 210 - 3676

8. **Treasurer:** List the name and 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 of Treasurer: JOSEPH DONOVAN

Mailing Address: 20330 VETERANS WAY DRIVE, STE 6

ELKHORN NE 68022 -

CITY STATE ZIP CODE

Title or Position: TREASURER

Telephone number: 402 - 210 - 3676

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Full Name of Designated Agent: JOSEPH DONOVAN

Mailing Address: 20330 VETERANS WAY DRIVE, STE 6

ELKHORN (CITY) NE (STATE) 68022 - (ZIP CODE)

Title or Position

Telephone number - -

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.: PINNACLE BANK

Mailing Address: 20320 VETERANS WAY DRIVE

ELKHORN, (CITY) NE (STATE) 68022 - (ZIP CODE)

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE -

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Flat Rate ☐ or Weight lbs. ozs.	Military ☐ 2nd Day ☐ 3rd Day	Total Postage & Fees $
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EP13F

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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PREPARER DH DATE PREPARED 10-18-13

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