

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Nebraska Republican Party

ADDRESS (number and street)

1610 N Street

(Check if address is changed)

Lincoln

NE

68508

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

stacey@negop.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

402-475-3541

2. DATE

11 / 14 / 2007

3. FEC IDENTIFICATION NUMBER

C C00032334

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

Rodney Krogh

Signature of Treasurer

Electronically Filed by Rodney Krogh

Date

11 / 14 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 _____

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 _____

- (d) This committee is a **STA** (National, State (or subordinate) committee of the **REP** (Democratic, Republican, etc.) Party.
- (e) This committee is a separate segregated fund
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

JOHANN'S VICTORY 2008 COMMITTEE

Mailing Address **PO BOX 80297**

LINCOLN **NE** **68501**

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship **JOINT FUNDRAISING REPRESENTATIVE**

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

Nebraska Republican Party

- 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 **Tiffiny Carlton**

Mailing Address **1610 N Street**

Lincoln **NE** **68508**

Title or Position ▼ **Executive Director** CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number **402** - **475** - **2122**

- 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 **Rodney Krogh**

Mailing Address **1610 N Street**

Lincoln **NE** **68508**

Title or Position ▼ **Tresurer** CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number **402** - **475** - **2122**

Full Name of Designated Agent **Tiffiny Carlton**

Mailing Address **1610 N Street**

Lincoln **NE** **68508**

Title or Position ▼ **Executive Director** CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number **402** - **475** - **2122**

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.

Union Bank & Trust

Mailing Address

PO Box 82535

Lincoln

NE

68501

CITY ▲

STATE ▲

ZIP CODE ▲

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.

[ADDITIONAL]

FIRST NATIONAL BANK

Mailing Address

134 SOUTH 13TH ST

SUITE 100

LINCOLN

NE

68508

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number - -

