## FEC FORM 1

## STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATI

11 FEB 22, PM 2: 20

| S                             |   |                                   |  |                              |
|-------------------------------|---|-----------------------------------|--|------------------------------|
| NAME OF COMMITTEE (in fu      | (Check if name is changed)  | Example: If typyir over the lines | ng, type 12FE4M5                                     |                              |
| BRUNING FOR                   | SENATE INCORPORATED   | 111111                            |  |                              |
|                               |   | 111.1.1.1.1                       |  |                              |
| ADDRESS (number and str       | PO BOX 83950  |                                   | <u> </u>   |                              |
| (Check if address is changed) |   |                                   | II.I.I.I.I.I.I.I.I                                   | 69501   1                    |
| L. I Similare,                | LINCOLN   |                                   | NE)  | 68501                        |
|                               |   | CITY                              | STATE  | ZIP CODE 📥                   |
| COMMITTEE'S E-MAIL            | ADDRESS (Please provide only one                                    | e-mail address)                   |  |                              |
| (Check if address             | campaign@jonbruni   | ing.com                           |  |                              |
| is changed)                   |   | 111111                            |  |                              |
| COMMITTEE'S WEB F             | AGE ADDRESS (URL)   |                                   |  |                              |
| (Check if address             | www.jonbruning.co   | m<br>                             |  |                              |
| is changed)                   | 1   |                                   | 1 1 1 1 1 1 1  |                              |
| 2. DATE M M M 0.2             | 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                             | C C00492108                       | <del></del> ]  |                              |
| 3. FEC IDENTIFICA             | TION NUMBER   | C   C00432100                     |  |                              |
| 4. IS THIS STATEM             | ENT . NEW (N) OR  | AMEN                              | DED (A)  |                              |
| I certify that I have examin  | ed this Statement and to the best of my kno  Treasurer  Lisa Lisker | owledge and belief it is true     | correct and complete                                 |                              |
| Signature of Treasurer        | Electronically Piled by Lisa Lisk                                   | (er                               | Date 0,2   | M / 0,7 / Y,201,1 Y          |
| NOTE: Submission of fals      | e, erroneous, or incomplete information may<br>ANY CHANGE IN INFORM |                                   |  |                              |
| Office<br>Use                 |   |                                   | nformation contact:<br>tion Commission<br>3-424-9530 | FEC FORM 1 (Revised 02/2009) |

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| 5. |                |                     | MMITTEE (Check One)  |  |  |   |  |           |
|    | Candi          | date C              | ommittee:  |  |  |   |  |           |
|    | (a)            | X                   | This committee is a principal campai   | ign committee. (Complete                                 | the candidate inform                         | mation below.)                          |  |           |
|    | (p)            |                     | This committee is an authorized cominformation below.)                       | nmittee, and is NOT a prir                               | cipal campaign com                           | nmittee. (Complete                      | the candidate                                | •         |
|    | Name<br>Candi  |                     | JON C BRUNING  | 1                  | 1 1 1 1 1 1 1                                | 1 1 1 1                                 | <u>                                     </u> | 1 1       |
|    | Candi<br>Party | idate<br>Affiliatio | on REP Sought:   | † House X  | . Senate                                     | President                               | State<br>District                            | NE<br>00  |
|    | (c)            |                     | This committee supports/opposes on   | nly one candidate, and is f                              | NOT an authorized o                          | committee.                              |  |           |
|    | Name<br>Cand   |                     |  |  | 1 1 1 1                                      |   |  |           |
|    | Party          | Comm                | ittee:   | Mg   |  |   |  |           |
|    | (d)            |                     | This committee is a  | (National, State<br>(or subordinate) co                  | mmittee of the                               |   | Democratic,<br>Republican,etc.               | ) Party.  |
|    | Politi         | ical Act            | ion Committee (PAC):   |  |  |   |  |           |
|    | (e)            | ΤĤ                  | This committee is a separate segreg  | ated fund. (Identify conne                               | cted organization or                         | n line 6.) Its conne                    | cted organizati                              | ion is a: |
|    | (0)            | 1 _1                | p. tank  | - Armeria  | o Capital Stock                              |   | or Organization                              |           |
|    |                |                     | Corporation  | i Corporation w  | o Capitai Stock                              | : Lau                                   | or Organization                              | •         |
|    |                |                     | Membership Organization  | Trade Associa  | ition  | Coc                                     | perative                                     |           |
|    |                |                     | In addition, this committee  | e is a Lobbyist/Registrant                               | PAC.   |   |  |           |
|    | <b>(f)</b>     |                     | This committee supports/opposes mo   | ore than one Federal cand                                |  | separate segrega                        | ated fund or pa                              | rty       |
|    | •              |                     | In addition, this committee is a   |  |  |   |  |           |
|    |                |                     | Loss of  |  |  |   |  |           |
|    |                |                     | In addition, this committee is a   | Leadership PAC. (Identify                                | sponsor on line 6.)                          |   |  |           |
|    | Joint          | Fundra              | ising Representative:  |  |  |   |  |           |
|    | (g)            |                     | This committee collects contributions committees/organizations, at least on  | , pays fundraising expens<br>ne of which is an authorize | es and disburses need committee of a fe      | et proceeds for two<br>deral candidate. | o or more politi                             | cal       |
|    | (h) .          |                     | This committee collects contributions committees/organizations, none of will | i, pays fundraising expens<br>hich is an authorized com  | es and disburses no<br>mittee of a federal c | et proceeds for two<br>andidate.        | o or more politi                             | ical      |
|    |                | Com                 | mittees Participating in Joint Fundraise                                     | er   |  |   | ur v   |           |
|    |                |                     | 1.   |  | FEC ID number                                | , <b>C</b> ,                            | · ·  |           |
|    |                |                     | 2.   |  | FEC ID number                                | С                                       | -  |           |
|    |                |                     | 3.   |  | FEC ID number                                | , <b>c</b> ,                            |  |           |
|    |                |                     | 4.   |  | FEC ID number                                | C                                       | ·* * · ·                                     |           |

Write or Type Committee Name

| <b>BRUNING I</b> |     | CENA. | TE INC | OPPO | PATE  | :n |
|------------------|-----|-------|--------|------|-------|----|
| RRUNING          | -UK | SENA  | IEINU  | UKPU | JKAIC | ΞV |

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|----|-----------------------|--|--|--------------------------|
| 5. | Name of Any Connected | Organization, Affiliated Committee, Join                                     | nt Fundraising Representative, or Le         | eadership PAC Sponsor    |
| 1  | ONE                   |  | <u> </u>                                     |                          |
|    |                       | <u>                                     </u>                                 | 1111111111                                   | 1111111                  |
|    | Mailing Address       |  |  |                          |
|    |                       |  |  |                          |
|    |                       |  |  |                          |
|    |                       | CITY▲  | STATE▲                                       | ZIP CODE ▲               |
| i  | Relationship:         | tion Affiliated Committee  | Joint Fundraising Representative             | Leadership PAC Sponsor   |
|    | possession of Committ | Identify by name, address, (phone number books and records.                  | mber optional), and position of t            | he person in             |
|    | Mailing Address       | PO Box 83950   |  |                          |
|    |                       | Lincoln  | NE_  | 68501 _                  |
|    | Title or Position ♥   | CITY A   | STATE <b>A</b>                               | ZIP CODE A               |
|    | Assista               | ant Treasurer  | Telephone number 402                         | <u>438</u> - <u>2400</u> |
| 8. | name and address of   | me and address (phone number opti<br>any designated agent (e.g., assistant t | onal) of the treasurer of the commreasurer). | nittee; and the          |
|    | of Treasurer Do       | uglas R. Ayer  |  |                          |
|    | Mailing Address       | PO Box 83950   |  |                          |
|    | •                     | Lincoln  | NE_  | 68501 _                  |
|    | Title or Position♥    | CITY   | STATE A                                      | ZIP CODE &               |
|    | Treasu                | urer   | Telephone number 402                         |                          |

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| Agent   | PO Box 83950                                    |   |                   |                 |
|---|---|---|-------------------|-----------------|
| Mailing Address   | TO BOX GOOD                                     |   |                   |                 |
| •   | Lincoln   | NE  | 68501             |                 |
| Title or Position ♥   | CITY A  | STATE &                                       | ZIP C             | ODE A           |
| Assista   | nt Treasurer                                    | Telephone number 40                           | 2 438             | _ 4200          |
|   |   |   |                   |                 |
| Banks or Other Deposi<br>safety deposit boxes or r                  | tories: List all banks or other depositories in | which the committee deposits                  | funds, holds acco | unts, rents     |
| Saieth achosit poves or i   |   |   |                   |                 |
| Name of Bank, Deposito  |   |   |                   |                 |
| Name of Bank, Deposito  |   | <u>                                      </u> | 11111             |                 |
| Name of Bank, Deposito  | ry, etc.  |   |                   | 11111           |
| Name of Bank, Deposito  | ry, etc.<br>nnacle Bank                         |   |                   |                 |
| Name of Bank, Deposito  | ry, etc.<br>nnacle Bank                         |   | 6850              | 8               |
| Name of Bank, Deposito  | nnacle Bank  1401 N St.                         |   | <u></u>           | 8 CODE <b>Δ</b> |
| Name of Bank, Deposito  | nnacle Bank  1401 N St.  Lincoln  CITY Δ        | <u>                                     </u>  | <u></u>           |                 |
| Name of Bank, Deposito  | nnacle Bank  1401 N St.  Lincoln  CITY Δ        | <u>                                     </u>  | <u></u>           |                 |
| Name of Bank, Deposito  Pi  Mailing Address  Name of Bank, Deposito | nnacle Bank  1401 N St.  Lincoln  CITY Δ        | <u>                                     </u>  | <u></u>           |                 |
| Name of Bank, Deposito  | nnacle Bank  1401 N St.  Lincoln  CITY Δ        | <u>                                     </u>  | <u></u>           |                 |
| Name of Bank, Deposito  Pi  Mailing Address  Name of Bank, Deposito | nnacle Bank  1401 N St.  Lincoln  CITY Δ        | <u>                                     </u>  | <u></u>           |                 |

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| safety deposit boxes or maint      |  |                       | ADDITIONAL ]                         |
|------------------------------------|--|-----------------------|--------------------------------------|
| Name of Bank, Depository, et       | С.   | Ĺ                     | ADDITIONAL J                         |
| ·<br>                              | <u> </u>   |                       |                                      |
| Mailing Address                    |  |                       |                                      |
|                                    |  |                       |                                      |
| •                                  |  |                       |                                      |
| •                                  | CITY 🗖   | STATE                 | ZIP CODE 🛕                           |
| Name of Any Connected Or           | ganization, Affiliated Committee, Joint Fundraising Re | presentative, or Lead | [ ADDITIONAL ]<br>ership PAC Sponsor |
| <u> </u>                           |  |                       | 111111                               |
|                                    |  | 1 1 1 1 1 1           |                                      |
| Mailing Address                    |  |                       |                                      |
|                                    |  | <u> </u>              |                                      |
| ·                                  |  |                       | <u> </u>                             |
|                                    | CITY▲  | STATE                 | ZIP CODE                             |
| lationship: Connected Organization | Affiliated Committee Joint Fundraising Rep             | presentative 👝 Lead   | lership PAC Sponsor                  |
| Designated Agent                   |  |                       | [ ADDITIONAL ]                       |
| l l                                | Lisker   |                       |                                      |
| Mailing Address                    | 228 S. Washington St., Ste. 115                        |                       |                                      |
|                                    | Alexandria   | VA                    | 22314 _                              |
| Title or Position ♥                | CITY A   | STATE <b></b> ▲       | ZIP CODE A                           |
| Assista                            | nt Treasurer Teleph                                    | 703<br>one number     | 549                                  |
|                                    | nt .   |                       | [ ADDITIONAL ]                       |
| Joint Fundraiser Participar        |  |                       |                                      |

## BRUNING FOR SENATE INCORPORATED

SECRETARY OF THE SENATE

11 FEB 22 PM 2: 19

February 16, 2011

Seth Kaye Campaign Finance Analyst Federal Election Commission c/o US Secretary of the Senate 232 Hart Senate Office Building Washington, DC 20510

Identification Number: C00492108

Reference: Statement of Organization Received 1/3/11

Dear Mr. Kaye:

This letter is in response to your request for additional information, dated February 7, 2011.

Enclosed please find an amended Statement of Organization.

Sincerely,

Lisa Lisker

**Assistant Treasurer** 





For FedFy Everson® CL:

Page 1 of 1

Origin ID: ZFOA Fed EXX. Ship Date: 17FEB11 ActWgt 0.3 LB CAD: 8587532/INET3130

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Alexandria, VA 22314

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WASHINGTON, DC 20510

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## **(**) 2007 C)

United States Senate

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