

FEC  
FORM 1STATEMENT OF  
ORGANIZATION

Office Use Only

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

12FE4M5

Huebner for Nebraska

ADDRESS (number and street)  (Check if address  
is changed) 1302 Industrial Ave Unit 311

North Platte

NE

69103

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

 (Check if address  
is changed)

admin@davidphuebner.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

 (Check if address  
is changed)

davidphuebner.com

2. DATE

04 / 18 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00902767

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 Huebner, David, , ,

Signature of Treasurer Huebner, David, , ,

Date

10 / 12 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100FEC FORM 1  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE:

**Candidate Committee:**

(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

Huebner, David, P.,

Candidate Party Affiliation

REP

Office Sought:

 House Senate President

State

NE

District

03

(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.)

(g)  This committee is an independent expenditure-only political committee (Super PAC).

 In addition, this committee is a Lobbyist/Registrant PAC.

(h)  This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

 In addition, this committee is a Lobbyist/Registrant PAC.**Joint Fundraising Representative:**

(i)  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.

(j)  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.  \_\_\_\_\_

2.  \_\_\_\_\_

C  \_\_\_\_\_  
 C  \_\_\_\_\_

Write or Type Committee Name

Huebner for Nebraska

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

NONE

Mailing Address

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:  Connected Organization  Affiliated Organization  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

Huebner, David, , ,

Mailing Address

1302 Industrial Ave Unit 311

North Platte

NE

69103

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer/Custodian

Telephone number

308 - 208 - 9453

## 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

Huebner, David, , ,

Mailing Address

1302 Industrial Ave Unit 311

North Platte

NE

69103

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

308 - 208 - 9453

Full Name of  
Designated  
Agent

Huebner, Amanda, , ,

Mailing Address

1302 Industrial Ave Unit 311

North Platte

NE

69103

CITY ▲

STATE ▲

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.

Hershey State Bank

Mailing Address

301 E Philip Ave

North Platte

NE

69101

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

NebraskaLand Bank

Mailing Address

1400 S Dewey St. #300

North Platte

NE

69101

CITY ▲

STATE ▲

ZIP CODE ▲