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11/12/2022 08 : 54

STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1	STATEMEN ORGANIZA		Office Us	PAGE 1 / 10
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Nebraska Demo	cratic Party			
ADDRESS (number and street)	3701 O Street, Ste 200			
(Check if address is changed)				
	Lincoln └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └		NE 68510 STATE ▲	
COMMITTEE'S E-MAIL ADDF	ESS			
 (Check if address is changed) 	ted@nebraskademocra	ts.org		
	Optional Second E-Mail Addr chris@pattonprocessi			
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
2. DATE 06	20 ⁷ Y Y Y Y 2019			
3. FEC IDENTIFICATION I	NUMBER ► C coo	0003988		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined	this Statement and to the best of	f my knowledge and belief it	is true, correct and comp	olete.
Type or Print Name of Treasu	rer Kessler, Ted, , ,			
Signature of Treasurer	sler, Ted, , ,	[Electronically Filed]	Date 11 / 12	D / Y Y Y Y 2022
NOTE: Submission of false, erro	neous, or incomplete information m ANY CHANGE IN INFORMATI			ies of 52 U.S.C. §3010§
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	ion FEC	FORM 1 rised 06/2012)

EC Form 1 (Revised 03/2022)	Page 2
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. (Complein information below.)	ete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee: (National, State or subordinate) committee of the DEM (Demonstrate) (d) Image: This committee is a strate or subordinate) committee of the DEM Republic strate	ocratic, lican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
Corporation Corporation w/o Capital Stock	oor Organization
Membership Organization Trade Association Co	operative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party
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	rid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser С 1. С 2.

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	

Nebraska Democratic Party

6.	Name of Any Connected Or DNC NE State Party	-	Commi	ittee, .	Joint	t Fu	undra	aisin	g R	epre	sen	tati	ve, (or I	ead	lers	hip	PAC	Sp	on	sor	
]
	Mailing Address	430 S Capitol Street S	E 																		<u> </u>	
								1								1						
		Washington										C		L	2000	03			- L			
			CITY								STA	TE					ZIP	со	DE			
	Relationship: Connected (Organization Affilia	ted Orga	anizatio	on	x	Join	it Fui	ndra	ising	Rep	orese	entat	ive		L	_eac	lersh	ip P	AC	Spor	າຣ໐ເ

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Kessler, Te	∋d, , ,
Full Name	
Mailing Address	3701 O Street, Ste 200
	Lincoln
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 402 434 2180

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	Kessler, Ted, , ,								
of Treasurer									
Mailing Address	3701 O Street, Ste 200								
	Lincoln NE 68510								
	CITY ▲ STATE ▲ ZIP CODE ▲								
Title or Position ▼									
Treasurer									

FEC Form 1 (Revised 0))2/2(009)																			I	Pag	e 4	۱ ــــــــــــــــــــــــــــــــــــ		
Full Name of Designated Agent										ĺ									ĺ							1	
Mailing Address																											
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Title or Position ▼																											
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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.

	American National Bank	 	
Mailing Address	3801 Vermaas Place		
		NE 68502	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I	Depository, etc. Amalgamated Bank		
Mailing Address	275 Seventh Avenue		
	New York	 NY 10011	
	CITY 🔺	STATE 🔺	ZIP CODE

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number
2.	FEC ID number C
3.	FEC ID number C
4.	FEC ID number

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

		<u> </u>	
Mailing Address	430 S. Capitol Street, SE		
	Washington		20003
Relationship:		STATE 🔺	ZIP CODE
Connected	Organization	✗ Joint Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name			
Mailing Address			
TITLE OR POSITION		STATE A	ZIP CODE
	I I I I I I I I I Tel	phone Number	

Name of Bank, BancFi Depository, etc.	rst			
Mailing Address	PO Box 26788			
	Oklahoma City		OK	73126
		CITY A	STATE A	ZIP CODE

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	С
4.	FEC ID number	С

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

]
Mailing Address	430 South Capitol Street SE		
	Washington		20003
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected	Organization	Joint Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name				
Mailing Address				
TITLE OR POSITION	7	CITY A	STATE A	ZIP CODE
		Telephon	ne Number	

Name of Bank, Depository, etc.																							
Mailing Address	L																						
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). Joint Fundraising Participant:

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

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

Mailing Address			
			20003
Relationship:	CITY 🔺	STATE A	ZIP CODE
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																										
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5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

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

Mailing Address	PO BOX 11422			
				73136
Relationship:	CIT	Y 🔺	STATE A	ZIP CODE
Connected	Organization Affiliated C	ommittee 🗴 Joint	Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																												
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5(g) or (h).	Joint	Fundraising	Participant:

1	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

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

Mailing Address	PO BOX 493			
	BOYS TOWN		NE	68010
Relationship:		CITY 🔺	STATE 🔺	ZIP CODE
Connected 0	Organization	ed Committee	Joint Fundraising Representative	e Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																										
Mailing Address	L																									
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(g) or (h).	Joint Fundraising Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С

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

Mailing Address	PO BOX 493		
5			
	BOYS TOWN		68010
Relationship:	CITY A	STATE A	ZIP CODE
Connected	Organization	X Joint Fundraising Representative	Leadership PAC Sponsor

Designated Agent: Identify by name, address (phone number - optional) 8.

Full Name				
Mailing Address				
TITLE OR POSITION	•	CITY A	STATE 🔺	ZIP CODE
	<u> </u>		Telephone Number	

Name of Bank, Depository, etc.																							
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