**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. PENNER FOR CONGRESS COMMITTEE 235 Donegal Road ADDRESS (number and street) (Check if address is changed) Aurora 68818 NE CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kirk@pennercongress.com (Check if address is changed) Optional Second E-Mail Address pennersales@hamilton.net COMMITTEE'S WEB PAGE ADDRESS (URL) www.kirkpenner.com (Check if address is changed) DATE 2017 C00651539 FEC IDENTIFICATION NUMBER > 3. X 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. Penner, Jennifer, , Mrs., Type or Print Name of Treasurer Penner, Jennifer, , Mrs., [Electronically Filed] 07 26 2017 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information belo	ow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Committee information below.)	omplete the candidate
Name of Candidate Penner, Kirk, Allen, Mr.,	
Candidate Office	State
Party Affiliation REP Sought: X House Senate President	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 committee. (i.e., nonconnected committee)	segregated 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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds fo 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 committees/organizations, none of which is an authorized committee of a federal candidate.	r two or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2. FEC ID number C	
3.	
4.	

	FEC Form 1 (Revised		Page 3
	Vrite or Type Committee Na		
<u> </u>		R CONGRESS COMMITTEE	
6.	Name of Any Connected	I Organization, Affiliated Committee, Joint Fundraising Representat	ive, or Leadership PAC Sponsor
N	ONE		
	Mailing Address		
			] [
		CITY STATE	E ZIP CODE
	Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Representation	entative Leadership PAC Sponsor
'.	Custodian of Records: Id books and records.	dentify by name, address (phone number optional) and position of th	ne person in possession of committee
		, Yvonne, , Mrs.,	ı
	Full Name	908 1st Ave	
	Mailing Address		
		A.u.a.s	, ,68818
		Aurora	
	Title or Position	CITY STATE	ZIP CODE
	Custodian of Records	Telephone number	402 - 694 - 3378
3.	<b>Treasurer:</b> List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the commit , assistant treasurer).	ttee; and the name and address of
		Jennifer, , Mrs.,	
	of Treasurer	235 Donegal Rd	
	Mailing Address		
		1 Augus	
		Aurora NE CITY STATE	ZIP CODE
	Title or Position Treasurer	Telephone number	402  -   694  -   5295  -

FEC <b>For</b> i	m 1 (Revised 02/2009)	Page 4
Full Name of Designated	Carlson, Yvonne, , Mrs.,	
Agent  Mailing Address	908 1st Ave	
Ç 111		
	Aurora NE 68818	
Title or Position	CITY STATE ZIP	CODE
Designated Age	ent	_ 3378
safety deposit be	Pepositories: List all banks or other depositories in which the committee deposits funds, holds ac oxes or maintains funds. Depository, etc.	ccounts, rents
	Depository, etc.  Cornerstone Bank	ccounts, rents
safety deposit be	oxes or maintains funds.  Depository, etc.  Cornerstone Bank	ecounts, rents
safety deposit b Name of Bank,	Depository, etc.  Cornerstone Bank  1206 13th	ccounts, rents
safety deposit be Name of Bank,	oxes or maintains funds.  Depository, etc.  Cornerstone Bank	ccounts, rents
safety deposit be Name of Bank,	Depository, etc.  Cornerstone Bank  1206 13th  Aurora  NE 68818	counts, rents
safety deposit be Name of Bank,	Depository, etc.  Cornerstone Bank  1206 13th  Aurora  CITY  STATE  ZIP	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Cornerstone Bank  1206 13th  Aurora  CITY  STATE  ZIP	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Cornerstone Bank  1206 13th  Aurora  CITY  STATE  ZIP  Depository, etc.	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Cornerstone Bank  1206 13th  Aurora  CITY  STATE  ZIP  Depository, etc.	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Cornerstone Bank  1206 13th  Aurora  CITY  STATE  ZIP  Depository, etc.	