

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Maxwell for Congress

ADDRESS (number and street)

11906 Arbor St #100

(Check if address  
is changed)

Omaha

NE

68144

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address  
is changed)

chipmaxwell@cox.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

www.maxwellforcongress.com

2. DATE

06 / 1 / 2015

3. FEC IDENTIFICATION NUMBER

C

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

Chip Maxwell

Signature of Treasurer

Date

06 / 01 / 2015

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  
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Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

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

Chip Maxwell

Candidate Party Affiliation

R

Office Sought:

House

Senate

President

State

NE

District

02

- (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 at:
  - 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.)

Joint Fundraising Representative:

- (g)  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.
- (h)  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.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

Write or Type Committee Name

# Maxwell for Congress

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

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  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

Chip Maxwell

Mailing Address

11906 Arbor St #100

Omaha

NE

68144

Title or Position

CITY

STATE

ZIP CODE

candidate

Telephone number

402 - 253 - 1799

**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

Chip Maxwell

Mailing Address

11906 Arbor St #100

Omaha

NE

68144

Title or Position

CITY

STATE

ZIP CODE

treasurer

Telephone number

402 - 253 - 1799

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Full Name of Designated Agent

[Grid]

Mailing Address

[Grid]

[Grid]

[Grid]

CITY

STATE

ZIP CODE

Title or Position

[Grid]

Telephone number

[Grid]

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.

Pinnacle Bank

Mailing Address

1016 Douglas on the Mall

[Grid]

Omaha NE 68102

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid]

Mailing Address

[Grid]

[Grid]

[Grid]

CITY

STATE

ZIP CODE

3835 California St  
Omaha NE 68131

UNIVERSITY MICROFILMS

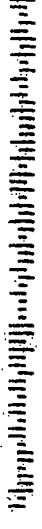
OMAHA NE 68102  
02 JUN 2015 PM 11

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FEC  
999 E St NW  
Washington DC 20463

20463



Federal Election Commission  
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 The FEC added this page to the end of this filing to indicate how it was received.

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Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
 PREPARER  
 (3/2015)

6/9/15  
 DATE PREPARED

FBI - WASH DC