

05 JUL 12 PM 12:06

FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4MS

Kramer for Senate

ADDRESS (number and street)

9919 Essex Drive

(Check if address
is changed)

Omaha

NE

68114

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Info@KramerforSenate.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.KramerforSenate.com

COMMITTEE'S FAX NUMBER

402-551-9894

2. DATE

07 05 2005

3. FED 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

William T. Foley

Signature of Treasurer

Date

07 05 2005

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
Use
Only

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

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 David J. Kramer

Candidate Party Affiliation REP Office Sought House Senate President State NE District _____

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship _____

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

Kramer for Senate

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 Treasurer

Mailing Address _____

_____ - _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____ - _____ - _____

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 William J. Foley

Mailing Address 10330 Regency Parkway Drive, Suite 100

Omaha NE 68114 - _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number (402) - 390 - 7132

Full Name of Designated Agent _____

Mailing Address _____

_____ - _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____ - _____ - _____

B. 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.

Great Western Bank

Mailing Address

P.O. Box 4070

Omaha NE 68104-0070

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

25020233339
25020233339



David J. Kramer
9919 Essex Drive
Omaha, NE 68114

Office of Public Records
P.O. Box 5109
Alexandria, VA 22301-0109

SCREENED BY
SENATE POST OFFICE



EMILY J. REYNOLDS
SECRETARY

PANELA B. GAVIN
SUPERINTENDENT

MAJORITY SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
Phone: (202) 224-0927

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL 07-09-05

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

PREPARER RD DATE PREPARED 07-12-05

25020233341
25020233341

