FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Deb Fischer for US Senate 5555 South St, Ste. 200 ADDRESS (number and street) (Check if address is changed) Lincoln 68506 NE CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address stacey@fischerfornebraska.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00498907 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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 Watts, James, , Date 04 05 2024 Signature of Treasurer Watts, James, , , 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	e candidate
Name of Candidate Fischer, Debra, S., ,	
Candidate Office Party Affiliation REP Sought: House X Senate President	State NE District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Diotriot
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican,	•
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
Corporation Corporation w/o Capital Stock Labor O	rganization
Membership Organization Trade Association Coopera	
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 committee. (i.e., nonconnected committee)	d 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 PA	C).
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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
Committees Participating in Joint Fundraiser	
1C	

ı	FEC Form 1 (Revised 0)	2/2009)	Page 3
V	Vrite or Type Committee Name		
	Deb Fischer for l		
6.		ganization, Affiliated Committee, Joint Fundraising Representative, or L	_eadership PAC Sponsor
	2023 Senators Class	c Committee	
	Mailing Address	228 S Washington Street, Suite 115	
		Alexandria	22314
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Idention books and records.	fy by name, address (phone number optional) and position of the person in p	possession of committee
	Watts, Jam Full Name	9 s ,,,	
	Mailing Address	5555 South St	
		Lincoln	68506
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number 402	483 7512
8.	any designated agent (e.g., a	l address (phone number optional) of the treasurer of the committee; and ssistant treasurer).	I the name and address of
	Full Name Watts, Jam of Treasurer	es,,,	
	Mailing Address	5555 South St	
		Lincoln	68506
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼ Treasurer	402	483 7512
		Telephone number	

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
little or Position		
	Depositories: List all banks or other depositories in which the committee deposits funds, hol xes or maintains funds.	ds accounts, rents
Name of Bank, D	Depository, etc.	
	CHAIN BRIDGE BANK	
Mailing Address	1445 A LAUGHLIN AVE	
	MCLEAN VA 22101	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
	First National Bank	
Mailing Address	134 S 13th	
	Lincoln NE 68508	
	CITY ▲ STATE ▲	ZIP CODE ▲

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

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any Connected O			FEC ID	number	C
Inv Connected O					
_		ed Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spor
ng Address	228 S Washington S	Street, Ste 115			
	Alexandria			VA	22314
ionship:		CITY A		STATE A	ZIP CODE ▲
me					
Address					
OR POSITION V	7	CITY A	:	STATE A	ZIP CODE ▲
			Telephone N	umber	
	ionship: Connected of Agent: Identify If Me Address	Alexandria ionship: Connected Organization Affin Agent: Identify by name, address (p	ang Address 228 S Washington Street, Ste 115 Alexandria ionship: Connected Organization Affiliated Committee Address Address OR POSITION ▼ CITY ▲ CITY ▲ CITY ▲	ang Address 228 S Washington Street, Ste 115 Alexandria ionship: CITY ▲ Connected Organization Affiliated Committee X Joint Fundraising Address OR POSITION ▼ CITY ▲	ang Address 228 S Washington Street, Ste 115 Alexandria Connected Organization Affiliated Committee X Joint Fundraising Representation Address OR POSITION ▼ CITY ▲ STATE ▲ STATE ▲ STATE ▲ STATE ▲

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

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1.			
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
7.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
CORNYN VICTORY	COMMITTEE		
Mailing Address	PO BOX 13026		
	Austin	TX	78711
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number - optional)		
Designated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Ourseign Affiliated Occurring Laint Four	ducinia a Dominia antation	and and and in DAC Conn
FISCHER VICTORY	Organization, Affiliated Committee, Joint Fun FUND	draising Representative	, or Leadership PAC Spon:
Mailing Address	228 S Washington Street		
	Suite 115		
	Alexandria	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	y by name, address (phone number – optional)		
esignated Agent: Identi	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ pries: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rent
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY ▲ CITY ▲ pries: List all banks or other depositories in whice aintains funds.	Telephone Number	s funds, holds accounts, rent
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
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ame of Any Connected	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
Fischer-Rounds Vict	ory Committee		
Mailing Address	228 S Washington St, Ste 115		
Maining / Idanooc			
	Alexandria	, VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE A
			. П
	ed Organization Affiliated Committee X J	oint Fundraising Represent	Leadership I AC Sp
			ative Leadership PAC Sp
esignated Agent: Identi			Leadership TAC Sp
esignated Agent: Identi			Leadership TAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
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Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A

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

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h). Joint Fundraisi	•		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spon
Team McConnell			
Mailing Address	228 S Washington St, Ste 115		
	Alexandria	VA I	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X	Joint Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identi			Leadership PAC Sp
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