Only

PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Leo A Daly Company PAC 8600 Indian Hills Drive ADDRESS (number and street) (Check if address is changed) Omaha 68114 NE CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .jdvipond@leoadaly.com (Check if address is changed) Optional Second E-Mail Address admin@evanskatz.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2021 C00402727 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. Brader, James B., , , Type or Print Name of Treasurer Brader, James B., , , [Electronically Filed] 12 08 2021 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

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	raye z
Can	didate	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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of didate		
Par	ty Con	nmittee:	(D
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 scommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee Na		-
Leo A Daly Co	ompany PAC	
	d Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
Leo A Daly Compan	y	
Mailing Address	8600 Indian Hills Drive	
Mailing Address		
	Omaha	68114
	CITY STAT	TE ZIP CODE
Relationship: x Connec	cted Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
Custodian of Records: I books and records.	dentify by name, address (phone number optional) and position of the	he person in possession of committee
	James, B., ,	
Full Name	8600 Indian Hills Dr	
Mailing Address		
	Omaha	68114
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	402 391 - 8111
. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the commi	ittee; and the name and address of
Full Name Brader, of Treasurer	James B., , ,	
Mailing Address	8600 Indian Hills Drive	
	Omaha NE	68114
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	402 - 391 - 8111

	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Whittaker, Katie, , ,	
Mailing Address	8600 Indian Hills Drive	
	Omaha NE 68114 CITY STATE Z	ZIP CODE
Title or Position Assistant Treasu	urer	91 - 8111
Banks or Other safety deposit bo Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, holds exes or maintains funds. Depository, etc. Wells Fargo	accounts, rents
Mailing Address	P.O. Box 63020	
Mailing Address		
Mailing Address		
Mailing Address	P.O. Box 63020 San Francisco CA 94163	ZIP CODE
Mailing Address Name of Bank, D	P.O. Box 63020 San Francisco CA 94163 CITY STATE	ZIP CODE
	P.O. Box 63020 San Francisco CA 94163 CITY STATE	ZIP CODE
	P.O. Box 63020 San Francisco CA 94163 CITY STATE	ZIP CODE
Name of Bank, D	P.O. Box 63020 San Francisco CA 94163 CITY STATE	ZIP CODE
Name of Bank, D	P.O. Box 63020 San Francisco CA 94163 CITY STATE	ZIP CODE