FEC FORM 1	STATEMENT OF ORGANIZATION	PUELLO ANTI: 59 Office Use Only
1. NAME OF COMMITTEE (ir	n full) (Check if name Example: If typing, type over the lines.	12FE4M5
Dowglas	Runner Gon President	
ADDRESS (number a	ind street) 29635 Rivenner Rd III	
(Check if a is changed		
is changed	Ashby	NE 6,9,333-197,2,9 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-M/	AIL ADDRESS	'
(Check if is changed	address d) Optional Second E-Mail Address	e. cam
COMMITTEE'S WEE		
2. DATE	0 26 2016	
3. FEC IDENTIFIC		
4. IS THIS STATE		
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 Douglas A. Runner	
Signature of Treasur	er Douge & Lunes	Date 10 26 2016
NOTE: Submission of	false, erroneous, or incomplete information may subject the person signing t ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	
Office Use Only	For further information c Federal Election Commissis Toll Free 800-424-9530 Local 202-694-1100	

		m 1 (Revised 02/2009)	Page 2
		DMMITTEE Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(u)	- / / - 112 - 1	AN THE TOTAL OF TOTAL OF THE TOTAL OF	
(b)	-	This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
Name Candio			
Candio		Office	State
Party	Affiliatio	on Sought: House Senate 🗙 President	District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candie	-		
Party	/ Com	imittee:	
(d)	, 1 3 		emocratic, publican, etc.) Pa
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	1 1 C	This committee supports/opposes more than one Federal candidate, and is NOT a separate segr committee. (i.e., nonconnected committee)	egated fund or pa
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	raising Representative:	···· ·· ·· ·· ·· ·· ··
(g)	1	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
h)	1	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
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	2.		-Cr., 2 (54
	3.	FEC ID number C	en e
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Write or Type Committee Na Douglas	me A R) unner	for	Pres	ident	
6. Name of Any Connected	J Organization, Affil	iated Committee, Joi	nt Fundraising Rep	resentative,	or Leadership P	AC Sponsor
						1 1 1 1 1 1 1
Mailing Address						
				STATE	ZIP (
Relationship:	ted Organization	Affiliated Committee	Joint Fundraising	Representa	ltive DLeaders	nip PAC Sponsor
7. Custodian of Records: Ic books and records.		ress (phone number -	- optional) and posit	ion of the p	erson in possessi	on of committee
Full Name	uglias A	Runner		<u> </u>		<u> </u>
Mailing Address	129635	Runner	Ra			
				<u> </u>		
	Ashby		<u></u>	NE	69333	1-19720
Title or Position	/	CITY		STATE	ZIP (CODE
			Telephone nun	nber [3	98-1458	3-12659
8. Treasurer: List the name any designated agent (e.g.			f the treasurer of the	committee;	and the name ar	nd address of
Full Name of Treasurer	igilais A	Runner		_ i	<u></u>	<u> </u>
Mailing Address	129635	Runner	Rd		. <u>i l l l</u> l	
	Ashby			NE STATE	693333 ZIP C	-9720
			Telephone num	iber 3	081-1458	1-12655

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Full Name of Designated Agent	L	L	1_1	1		. 1	1				_4	_1	L	. I.	1		_1_	1	1	_1	ŀ	ł		4	1	_	1	1	_1_	1	L. 1	1	1		J

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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.

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Name of Bank,	Depository, e	etc.																												_
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Hand Delivered

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

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(3/2015)