48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of $1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL
Deb Fischer for US Senate

ADDRESS (number and street) 5555 South St, Ste. 200

CITY	STATE	ZIP CODE
Lincoln	NE	68506

2. NAME OF CANDIDATE
Fischer, Debra, S., ,

3. OFFICE SOUGHT (State and District)
Senate NE

4. FEC IDENTIFICATION NUMBER
C00498907

5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____

A. FULL NAME LIBERTY MUTUAL INSURANCE COMPANY - PAC **MAILING ADDRESS** 175 BERKELEY ST **CITY** BOSTON **STATE** MA **ZIP CODE** 02116-5066	Name of Employer **Transaction ID : TX122096** Occupation	Date (month, day, year) 05/02/2024	Amount 2500.00
B. FULL NAME LIBERTY MUTUAL INSURANCE COMPANY - PAC **MAILING ADDRESS** 175 BERKELEY ST **CITY** BOSTON **STATE** MA **ZIP CODE** 02116-5066	Name of Employer **Transaction ID : TX122097** Occupation	Date (month, day, year) 05/02/2024	Amount 2500.00
C. FULL NAME AMERICAN MEDICAL ASSOCIATION PAC **MAILING ADDRESS** 25 MASSACHUSETTS AVE. NW, SUITE 60 **CITY** WASHINGTON **STATE** DC **ZIP CODE** 20001-7400	Name of Employer **Transaction ID : TX122098** Occupation	Date (month, day, year) 05/02/2024	Amount 1000.00
D. FULL NAME PACIFIC LIFE INSURANCE COMPANY PAC **MAILING ADDRESS** 700 NEWPORT CENTER DR **CITY** NEWPORT BEACH **STATE** CA **ZIP CODE** 92660-6307	Name of Employer **Transaction ID : TX122101** Occupation	Date (month, day, year) 05/02/2024	Amount 1500.00
E. FULL NAME HILLER, MARTIN, , , **MAILING ADDRESS** 16918 VILLALAGOS DE AVILA **CITY** LUTZ **STATE** FL **ZIP CODE** 33548-	Name of Employer NDX LLC **Transaction ID : TX122106** Occupation CHAIRMAN	Date (month, day, year) 05/02/2024	Amount 1000.00

SIGNATURE (optional)
Watts, James, , ,

DATE
05/04/2024

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 03/2016)

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Lincoln NE 68506

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
MCBRIDE, STACY, , , 905 CHALFONTE DRIVE ALEXANDRIA VA 22305-1105	HUSCH BLACKWELL **Transaction ID : TX122105** LOBBYIST	05/02/2024	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
MCNALLY-SCHULLER, LYNNE, , , 5335 TROON DRIVE LINCOLN NE 68526-9558	NE HORSEMEN **Transaction ID : TX122099** CEO	05/02/2024	1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**