

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

2018 MAR -7 PM 12:23

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Dennis Frank Macek for U.S. Senate

ADDRESS (number and street)

3330 M ST



(Check if address
is changed)

Lincoln

CITY ▲

NE

STATE ▲

68510

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

dftmacek@gmail.com

Optional Second E-Mail Address

ljkwmacek@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

dennisfrankmacekforsenate.com

2. DATE

02

16

2018

3. FEC 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 Judith K. Wilson

Signature of Treasurer

Judith K. Wilson

Date

03

01

2018

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
Use
Only

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

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate

Dennis Frank Macek

Candidate Party Affiliation

Republican

Office Sought:

☐ House

House

☒ Senate

Senate

☐ President

President

State

NE

District

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

Name of Candidate

Party Committee:

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

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.

FEC ID number

C

2.

FEC ID number

C

3.

FEC ID number

C

4.

FEC ID number

C

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

Judith Kay Wilson

Mailing Address

3330 M ST

Lincoln

CITY

NE

STATE

68510

ZIP CODE

Title or Position

Treasurer

Telephone number

402

261

6189

Full Name of
Designated
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

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.

Member's Own Credit Union

Mailing Address

1391 South 33rd ST

Lincoln

NE

68510

4508

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

None

Mailing Address

CITY

STATE

ZIP CODE

Mr Dennis Macek
3330 M St
Lincoln, NE 68510



7017 0660 0000 6542 2316



1023



20013

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FEC form 182

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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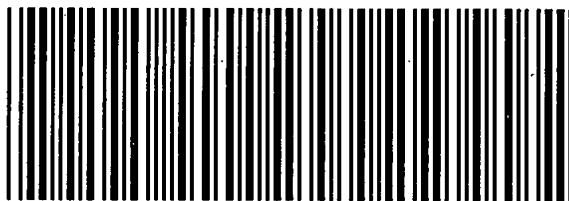
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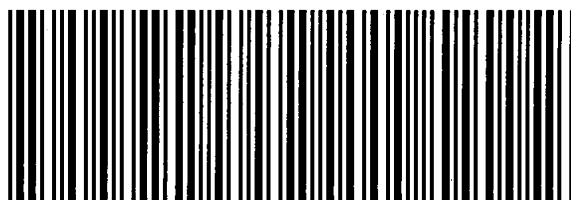
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SEN PATCH



SEN PATCH