

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

SECRETARY OF THE SENATE  
08 FEB 20 AM 10:39

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Raimondo for U.S. Senate

ADDRESS (number and street)

P.O. Box 1586

(Check if address is changed)

Columbus

NE

68602

1586

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

info@raimondo2008.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.raimondo2008.com

COMMITTEE'S FAX NUMBER

402 - 562 - 7400

2. DATE

02 / 13 / 2008

3. FEC IDENTIFICATION NUMBER

C

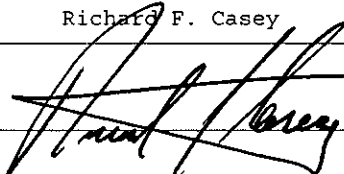
4. IS THIS STATEMENT ☒ NEW (N) OR ☐ AMENDED (A)

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

Richard F. Casey

Signature of Treasurer



Date

02 / 13 / 2008

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  
Use  
Only

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

FEC FORM 1  
(Revised 12/2007)

FE3AN042.PDF

28020092944

## 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 Anthony F. Raimondo

Candidate Party Affiliation DEM Office Sought: ☐ House ☒ Senate ☐ President State NE District 3

- (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

- (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 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 | <input checked="" type="checkbox"/> |
| 2. | _____ | FEC ID number | <input checked="" type="checkbox"/> |
| 3. | _____ | FEC ID number | <input checked="" type="checkbox"/> |
| 4. | _____ | FEC ID number | <input checked="" type="checkbox"/> |
| 5. | _____ | FEC ID number | <input checked="" type="checkbox"/> |

Write or Type Committee Name

Raimondo for U.S. Senate

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

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship:



Connected Organization



Affiliated Committee



Leadership PAC Sponsor



Joint Fundraising Representative

**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

Teresa Fogarty

Mailing Address

626 N. 41st St

Omaha

NE

68131

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

402

553

3421

**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

Richard F. Casey

Mailing Address

P.O. Box 1586

Columbus

NE

68602

1586

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

402

564

4646

Full Name of  
Designated  
Agent

Teresa Fogarty

Mailing Address

626 N. 41st St.

Omaha

CITY

NE

STATE

68131

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

402

553

3421

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.

Pinnacle Bank of Columbus

Mailing Address

P.O. Box 1585

Columbus

CITY

NE

STATE

68601

ZIP CODE

1585

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

**Tony Raimondo**  
for UNITED STATES SENATE

Raimondo for U.S. Senate  
P.O. Box 1586  
Columbus, NE 68602-1586

132  
2/9  
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IN THE SERVICE  
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PLACE STICKER AT TOP OF ENVELOPE  
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SECRETARY OF THE SENATE  
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SECRETARY

PAMELA B. GAVIN  
SUPERINTENDENT

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PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Postmark

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NEXT BUSINESS DAY DELIVERY

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AIRBORNE EXPRESS \_\_\_\_\_

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Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

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Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

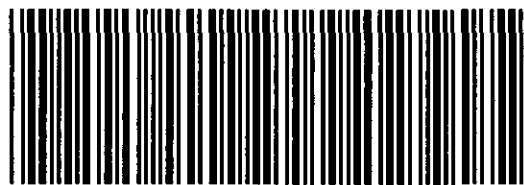
PREPARER

RD

DATE PREPARED

02-20-08

28020092949



28020092950