

11 NOV -8 AM 11:14

Office Use Only

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

The William Bord Group

ADDRESS (number and street) 2808 Parks Bluff Ln

(Check if address is changed)

Fremont

NE

68025

7947

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

jpark@novia.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 10<sup>th</sup> / 26<sup>th</sup> / 2011<sup>Y</sup>

3. FEC IDENTIFICATION NUMBER C

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

2011 NOV -8 PM 1:04

FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

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 Jerry Park

Signature of Treasurer *Jerry Park*

Date 11<sup>th</sup> / 03<sup>rd</sup> / 2011<sup>Y</sup>

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.

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

FEC FORM 1  
(Revised 02/2009)

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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 \_\_\_\_\_

Candidate Party Affiliation \_\_\_\_\_ Office Sought:  House  Senate  President State \_\_\_\_\_ District \_\_\_\_\_

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

Name of Candidate **Ben Nelson** \_\_\_\_\_

**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

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Write or Type Committee Name

The William Bord Group

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

Jerry Park

Mailing Address

2808 Parks Bluff Ln

Fremont

NE

68025

7947

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

402

753

0424

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

Jerry Park

Mailing Address

2808 Parks Bluff Ln

Fremont

NE

68025

7947

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

402

753

0424

11030684998

Full Name of Designated Agent

Kevin Yount

Mailing Address

2825 Deborah Dr

Fremont

CITY

NE

STATE

68025

ZIP CODE

8683

Title or Position

Assistant Treasurer

Telephone number

402

721

7502

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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.

Pinnacle Bank of Fremont

Mailing Address

99 W 6th ST

Fremont

CITY

NE

STATE

68025

ZIP CODE

4955

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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.

Hand Delivered Date of Receipt

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Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): Shipping Date  
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Received from House Records & Registration Office Date of Receipt

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11/8/11

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 11/8/11  
 PREPARER DATE PREPARED

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