

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1225 L Street, Suite 400 P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 www.nadc.nebraska.gov		REPORT OF INDEPENDENT EXPENDITURE NADC FORM B-6		POSTMARK DATE	
MICROFILM NUMBER					
OFFICE USE ONLY					
BEFORE COMPLETING THIS FORM READ THE FILING REQUIREMENTS ON PAGE 2(a)				DATE OF ELECTION	11/5/2024
A Report of Independent Expenditure is filed on time if it is postmarked or personally delivered on or before the due date. Late fees are \$25 per day, not to exceed \$750. Any person, other than a committee, corporation, labor organization, limited liability company, limited liability partnership, or industry, trade or professional association who makes an independent expenditure of more than \$250 for the purpose of influencing the election or defeat of a candidate or the qualification, passage, or defeat of a ballot question must file this report. File with the Nebraska Accountability and Disclosure Commission within 10 days of making the expenditure. Persons who fail to file this report or otherwise do not comply with the reporting provisions of the law are subject to penalties. DO NOT FILE THIS REPORT IF THE EXPENDITURE WAS A DIRECT CONTRIBUTION TO A COMMITTEE OR CANDIDATE					
ITEM 1	NAME, ADDRESS AND PHONE NUMBER OF PERSON MAKING EXPENDITURE				
Name	NATIONAL ASSOCIATION OF REALTORS FUND			Telephone No. (312) 329-8200	
Address	430 N MICHIGAN AVENUE CHICAGO IL 60611				
	STREET ADDRESS CITY STATE ZIPCODE				
ITEM 2	NAME OF CANDIDATE OR BALLOT QUESTION FOR WHICH EXPENDITURE WAS MADE AND DATE OF ELECTION				
Candidate(s) or Ballot Question(s)		Office Sought		Support/Oppose	Date of Election
ROBERT DOVER		NEBRASKA - STATE LEGISLATURE - 19		SUPPORT	11/5/2024
ITEM 3	NAME AND ADDRESS OF PERSON TO WHOM EXPENDITURE WAS MADE				
If the person providing the consideration for which the expenditure was made is different from the payee (person receiving the money), also list the name and address of the person providing the consideration.					
NAME			ADDRESS(Street & City)		
ACCESS MARKETING SERVICES			PO BOX 913026 DENVER, CO 80291		
ITEM 4	DATE, AMOUNT AND DESCRIPTION OF NATURE OF EXPENDITURE				
If the expenditure consisted of goods, materials, services, or the provision of facilities of ascertainable monetary value, (in-kind expenditures) but not the payment of money, indicate the estimated monetary value in the "Amount" column.					
DATE	AMOUNT	DESCRIPTION (e.g., radio, TV, newspaper)			
10/8/2024	\$10062.00	ONLINE ADS			
ITEM 5	NAME, ADDRESS, OCCUPATION, EMPLOYER, AND PRINCIPAL PLACE OF BUSINESS OF EACH PERSON WHO CONTRIBUTED MORE THAN \$250 TO THE EXPENDITURE				
NAME	ADDRESS	OCCUPATION	PRINCIPAL PLACE OF BUSINESS	EMPLOYER	

VERIFICATION

I, <u>Entered by NADC Admin User</u> state that to my knowledge the information contained in this report is true,	
<u>(NAME OF PERSON MAKING EXPENDITURE)</u>	
Correct and complete.	
<u>10/18/2024</u>	<u>Entered by NADC Admin User</u>
(DATE)	(SIGNATURE)