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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------|--|---------------------|--------------|
| <b>NEBRASKA<br/>ACCOUNTABILITY AND<br/>DISCLOSURE COMMISSION</b><br>1225 L Street, Suite 400 P.O. Box 95086<br>Lincoln, NE 68509 (402) 471-2522                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>AGENT'S EXPENDITURE<br/>REPORT</b><br><br><b>NADC Form B-10</b> | POSTMARK<br>DATE                              |  | MICROFILM<br>NUMBER |              |
| BEFORE COMPLETING THIS FORM<br>READ THE FILING REQUIREMENTS ON<br>PAGE 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                    | OFFICE USE ONLY                               |  |                     |              |
| <ul style="list-style-type: none"> <li>NO EXPENDITURE SHALL BE MADE, OTHER THAN FOR OVERHEAD OR NORMAL OPERATING EXPENSES, BY AN AGENT OR AN INDEPENDENT CONTRACTOR, INCLUDING AN ADVERTISING AGENCY, ON BEHALF OF OR FOR THE BENEFIT OF A CANDIDATE OR COMMITTEE UNLESS THE EXPENDITURE IS REPORTED BY THE COMMITTEE, OR UNLESS THE AGENT OR INDEPENDENT CONTRACTOR FILES AN AGENT'S EXPENDITURE REPORT.</li> <li>NO EXPENDITURE SHALL BE MADE, OTHER THAN FOR OVERHEAD OR NORMAL OPERATING EXPENSES, BY AN INDIVIDUAL OR ENTITY GATHERING PETITION SIGNATURES ON BEHALF OF ANYONE, INCLUDING A BALLOT QUESTION COMMITTEE, UNLESS THE EXPENDITURE IS REPORTED BY THE BALLOT QUESTION COMMITTEE AS IF THE EXPENDITURE WERE MADE DIRECTLY BY THE COMMITTEE AS IF THE EXPENDITURE WERE MADE DIRECTLY BY THE COMMITTEE, OR UNLESS THE PERSON OR ENTITY GATHERING SIGNATURES FILES AN AGENT'S EXPENDITURE REPORT.</li> <li>AN INDIVIDUAL OR ENTITY GATHERING PETITION SIGNATURES, AN AGENT, OR AN INDEPENDENT CONTRACTOR WHO IS REQUIRED TO FILE THIS REPORT SHALL FILE A SEPARATE AGENT'S REPORT FOR EACH PERSON ON WHOSE BEHALF AN EXPENDITURE IS MADE.</li> <li>AN AGENT'S EXPENDITURE REPORT SHALL BE FILED WITH THE COMMISSION WITHIN 10 DAYS AFTER THE END OF THE CALENDAR MONTH IN WHICH THE EXPENDITURE IS MADE.</li> <li>PERSONS WHO FAIL TO FILE THIS REPORT OR OTHERWISE COMPLY WITH THE REPORTING PROVISIONS OF THE LAW ARE SUBJECT TO PENALTIES. ONTH IN WHICH THE EXPENDITURE IS MADE.</li> </ul> |                                                                    |                                               |  |                     |              |
| <b>Item 1</b> NAME, ADDRESS AND PHONE NUMBER OF THE ENTITY OR INDIVIDUAL FILING THE REPORT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                    |                                               |  |                     |              |
| Name <u>CHASE MARKETING LLC</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                    | Permanent Telephone No. <u>(402) 321-9453</u> |  |                     |              |
| Permanent Address <u>4323 S 198 AVE</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                    | <u>OMAHA</u>                                  |  | <u>NE</u>           | <u>68135</u> |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    | CITY                                          |  | STATE               | ZIP          |
| Temporary Address <u>4323 S 198 AVE</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                    | <u>OMAHA</u>                                  |  | <u>NE</u>           | <u>68135</u> |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    | CITY                                          |  | STATE               | ZIP          |
| Temporary Telephone No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                    |                                               |  |                     |              |
| STATE OF <u>NEBRASKA</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                    |                                               |  |                     |              |
| COUNTY OF <u>NEBRASKA</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                    |                                               |  |                     |              |
| I <u>KYLE CLARK</u> UPON OATH, STATE THAT I AM DULY AUTHORIZED TO FILE THIS REPORT, THAT I HAVE<br><div style="text-align: center; margin-top: 5px;">         _____<br/>         (Name of Individual Signing)       </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                    |                                               |  |                     |              |
| USED ALL REASONABLE DILIGENCE IN ITS PREPARATION AND THAT TO THE BEST OF MY KNOWLEDGE IT IS TRUE AND COMPLETE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    |                                               |  |                     |              |
| KYLE CLARK<br>PARTNER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                    |                                               |  |                     |              |
| _____<br>(SIGNATURE AND TITLE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                    |                                               |  |                     |              |

PLEASE NOTE THAT A SEPARATE AGENTS REPORT MUST BE FILED FOR EACH PERSON OR COMMITTEE ON WHOSE BEHALF AN EXPENDITURE HAS BEEN MADE

Please put below the Name, Street Address or Rural Route, City, State and Telephone Number of the **Person** or **Committee** on **whose behalf** the expenditure is made.

PETERSEN FOR  
NEBRASKA

4121 S 87TH ST OMAHA, NE 68127

(402) 850-3850

Name of Person or Committee

Street Address or Rural Route, City and State

Telephone Number

The Name, permanent Street Address or Rural Route, City and State of the person to whom expenditures were made

The Temporary Street Address or Rural Route, City and State of the person to whom the expenditure was made

Date of each Expenditure

Amount of each Expenditure

A Description of the Goods or Services Purchased.

SMARTCALL MEDIA

10050 BRIDGE ST #2283  
TRUCKEE, CA 96160

5/8/2026

\$3,461.23

TEXTING