

Nebraska Indefinite UIT Sales Report

Nebraska Department of Banking & Finance
<http://www.ndbf.ne.gov>

1526 K Street, Suite 300
PO Box 95006
Lincoln, NE 68508
402-471-3445

For the 12-Month Period Beginning _____ Ending _____

(Please enter dates in mm/dd/yyyy format)

State File Number _____

Fund _____

Address _____

Contact Person _____

Telephone Number _____

Email Address _____

<u>Item</u>	<u>Description</u>	<u>Amount</u>
A.	Aggregate sales during period for which this report is filed.	(A) _____
B.	Fee for aggregate sales during the period for which this report is filed. (Item A times 0.1% or .001)	(B) _____
C.	Fee paid for registration.	(C) _____
D.	Additional fee due for this 12-month period. (Item B minus Item C) If this figure is negative, enter "0". There are no refunds or credits allowed.	(D) _____

If Item D is a positive figure, submit one check for the amount indicated in Item D.