Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Zinke for Congress PO Box 1596 ADDRESS (number and street) (Check if address is changed) Helena 59624 MT CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lorna@mt.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00550871 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Kuney, Lorna, , , Type or Print Name of Treasurer Kuney, Lorna, , , [Electronically Filed] 10 17 2016 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate inform	ation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign com information below.)	mittee. (Complete the candidate
Name of Zinke, Ryan, K, , Candidate	
Candidate Party Affiliation REP Office Sought: House Senate	President State MT District 01
(c) This committee supports/opposes only one candidate, and is NOT an authorized c	ommittee.
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 li	ine 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 committee. (i.e., nonconnected committee)	separate segregated fund or party
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 procommittees/organizations, at least one of which is an authorized committee of a federal	
(h) This committee collects contributions, pays fundraising expenses and disburses net procommittees/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.	С

FEC Form 1 (Revised	d 02/2009)	Page 3
Write or Type Committee Nar	me	
Zinke for Cong	gress	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
Zinke Daines Victory	Fund 2016	
	228 S Washington Street	
Mailing Address	Suite 115	
	Alexandria VA 22314	
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee X Joint Fundraising Representative Le	eadership PAC Sponsor
Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the person in po	essession of committee
Kuney, I	Lorna, , ,	
Full Name	400 N California	
Mailing Address		
	Helena , MT , 59601-	4968
	Helena MT 59601-	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		442 6633
. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the n	ame and address of
Full Name Kuney, L	Lorna, , ,	
Mailing Address	400 N California	
	Helena MT59601-4	1968 – [
Title or Decition	CITY STATE	ZIP CODE
Title or Position Treasurer		442 6633

FEC Form		
Full Name of Designated Agent		
Mailing Address		
	CITY STATE ZIP C	- ODE
Title or Position		
	Telephone number	
safety deposit bo: Name of Bank, D	ves or maintains funds. Depository, etc. Valley Bank	1 1 1 1 1
	oxes or maintains funds. Depository, etc.	
Name of Bank, D	ves or maintains funds. Depository, etc. Valley Bank	
Name of Bank, D	ves or maintains funds. Depository, etc. Valley Bank	
Name of Bank, D	Valley Bank 3030 N Montana Ave	
Name of Bank, D	Depository, etc. Valley Bank 3030 N Montana Ave Helena CITY STATE ZIP C	
Name of Bank, D	Depository, etc. Valley Bank 3030 N Montana Ave Helena CITY STATE ZIP C	
Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. Valley Bank 3030 N Montana Ave Helena CITY STATE ZIP C Depository, etc.	
Name of Bank, D	Depository, etc. Valley Bank 3030 N Montana Ave Helena CITY STATE ZIP C Depository, etc.	
Name of Bank, D Mailing Address Name of Bank, D	Depository, etc. Valley Bank 3030 N Montana Ave Helena CITY STATE ZIP C Depository, etc.	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Zinke Victory Fund 2470 Daniells Bridge Rd #121 Mailing Address GΑ 30606-6191 Athens **CITY** STATE 4 ZIP CODE Relationship: X Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page 6 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC ONE INTERNATIONAL PLACE - 44TH FL. Mailing Address C/O BOWDITCH & DEWEY, LLP **BOSTON** 02110 MA **CITY** STATE 4 ZIP CODE Relationship: × Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent Full Name** Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number