

[^0]Write or Type Committee Name
Montanans for Limited Government

Report Covering the Period:
From:

| COLUMN A <br> This Period | COLUMN B <br> Calendar Year-to-Date |
| ---: | ---: |

6. (a) Cash on Hand January 1.2020
(b) Cash on Hand at Beginning of Reporting Period. $\qquad$
(c) Total Receipts (from Line 19) $\qquad$
$\qquad$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) $\qquad$
7. Total Disbursements (from Line 31). $\qquad$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) $\qquad$ $\cdots 21,937.16 \quad 21,937.16$
9. Debts and Obligations Owed TO
the Committee (Itemize all on Schedule C and/or Schedule D) $\qquad$
10. Debts and Obligations Owed BY
the Committee (Itemize all on Schedule C and/or Schedule D) $\qquad$

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:
Federal Election Commission 1050 First Street, N.E.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

## Write or Type Committee Name

## Montanans for Limited Government

Report Covering the Period: From: . . . . To

## I. Receipts

11. Contributions (other than loans) From:
(a) Individuals/Persons Other

Than Political Committees
(i) Itemized (use Schedule A) $\qquad$
(ii) Unitemized $\qquad$
(iii) TOTAL (add Lines 11 (a)(i) and (ii) $\qquad$
(b) Political Party Committees
(c) Other Political Committees (such as PADs) $\qquad$
COLUMN A Total This Period

COLUMN B Calendar Year-to-Date

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c) $\qquad$

$$
\begin{array}{ll}
10,450,00 & 10,450,00 \\
10,450,00 & 10,450,00
\end{array}
$$

20. Total Federal Receipts (subtract Line 18(c) from Line 19) .........

21. Federal Election Activity (52 U.S.C. § 30101(20))
(a) Allocated Federal Election Activity
(from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$
(b) Federal Election Activity Paid

Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))...
31. Total Disbursements (add Lines 21(c), 22, $23,24,25,26,27,28(\mathrm{~d}), 29$ and $30(\mathrm{c}))$..
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) $\qquad$
. 304.30


Operating Expenditures
33. Total Contributions (other than loans) (from Line, $11(\mathrm{~d})$, page 3 )
34. Total Contribution Refunds
$\qquad$
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))
37. Offsets to Operating Expenditures (from Line 15, page 3). $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36)
 ITEMIZED RECEIPTS


Any information copied from such Reports and Statements may not be sold or used by any person tor the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Montarans for Limited Government

|  | Date of Receipt <br> \%is 2020 |
| :---: | :---: |
| 2 20ysi woodland Estates Rd. |  |
| Great falls $\left.\mathrm{Ma}^{\text {saia }} \mathrm{T}\right]^{\text {zp cose }} 9405$ |  |
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| TaL Tis Period (Iast pageo tis time |  | ITEMIZED RECEIPTS


| Use separate scheduie(s) | FOR LINE NUMBER: (check only one) |  | PAGE | OF |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| for each category of the Detailed Summary Page |  | $-\begin{aligned} & 11 b \\ & 14 \end{aligned}$ | $\left\lvert\, \begin{aligned} & 11 c \\ & 15 \end{aligned}\right.$ | $12$ |  | 17 |

Montanans for Limited Government

| A. <br> Full Name of Indiyigual (Last. $\ddagger$ irst, Middle | al) or Full Organization Name | Date of Receipt $03.17 .2022$ |
| :---: | :---: | :---: |
| Mity Missouea | $\stackrel{\text { State }}{\text { M17 }} \stackrel{\text { Zip Coge }}{59801}$ | Amount of Each Receipt this Period $\text { a } 10 \text { ooooo }$ <br> Memo tem |
| FEC ID number of contributing federal political committee. |  |  |
| Name qf Employer (for Individual) | Occupation (for Individual) |  |
| Receipt For: $\square$ Primary $\square$ General Other (specify) | Aggregate Year-to-Date $1000000$ |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization NameB. |  | Date of Receipt |
|  |  |  |
| Mailing Address |  |  |
| $\overline{C i t y}$ | Zip Code |  |
|  |  | Amount of Each Recelpt this Perlod$\begin{aligned} & \cdot \ldots, \text {..... }-\boldsymbol{s : , \ldots} \cdot \ldots \cdot \\ & \text { Memo Item } \end{aligned}$ |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) |  |  |
| Receipt For:$\square$Primary $\quad \square$ General <br> Other (specify) | Aggregate Year-to-Date |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name |  | Date of Receipt$\because \quad 3 \quad 1: \overline{0}$ |
|  |  |  |  |
| Mailing Address |  |  |
| $\overline{\text { City }}$ | Zip Code |  |
|  |  | Amount of Each Receipt this Period " <br> , $\therefore \because$ <br> $\therefore . . .{ }^{\top}$ <br> Memo Item |
| FEC ID number of contributing federal political commiftee. |  |  |
| Name of Employer (for Individual) Occupation (for Individual) |  |  |
| Receipt For:$\square$Primary $\quad \square$ General <br> Other (specity) | Aggregate Year-to-Date |  |
| SUBTOTAL of Receipts This Page (optional)................................................................. |  | $\begin{aligned} & 1000000 \\ & , 4045000 \end{aligned}$ |
| TOTAL This Period (last page this line number only)...................................................... |  |  |

ȘCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of so
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from
NAME OF COMMITTEE (In Full)




## 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.


[^1]
[^0]:    I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
    Type or Print Name of Treasurer

    Signature of Treasurer
    

[^1]:    542
    PREPARER
    $4 / 11 / 22$
    (3/2015)

