

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
Daines Montana Victory Committee

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period  01 / 01 / 2014 through  03 / 31 / 2014

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 Shirley J. Warehime

Signature of Treasurer Shirley J. Warehime [Electronically Filed] Date  07 / 02 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Daines Montana Victory Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="65525.11"/>	<input type="text" value="65525.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="65525.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="157690.00"/>	<input type="text" value="157690.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="223215.11"/>	<input type="text" value="223215.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="110437.14"/>	<input type="text" value="110437.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="112777.97"/>	<input type="text" value="112777.97"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Daines Montana Victory Committee**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	157350.00	157350.00
(ii) Unitemized .....	340.00	340.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	157690.00	157690.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	157690.00	157690.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	157690.00	157690.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	157690.00	157690.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	18937.14	18937.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18937.14	18937.14
22. Transfers to Affiliated/Other Party Committees.....	91500.00	91500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	110437.14	110437.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110437.14	110437.14

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	157690.00	157690.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	157690.00	157690.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	18937.14	18937.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18937.14	18937.14

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @`CF`-H9A-N5H-CB

Form/Schedule: F3XA  
Transaction ID :

BEST EFFORTS: Our original solicitation includes a clear and conspicuous request for contributor information and informs the contributor of the requirements of federal law for the reporting of such information. If the information is not provided, we make one follow-up, stand-alone effort to obtain this information, regardless of whether the contribution was solicited or not. This effort occurs no later than 30 days after receipt of the contribution and is in the form of a written request. The follow-up request clearly asks for the missing information, without soliciting a contribution; informs the contributor of the requirements of federal law for reporting such information; and is in the form of a postage-paid, pre-addressed postcard. Follow-up phone calls are also made to try to obtain the information. INFORMATION REQUESTED: indicates that our best efforts procedure has been followed. If self-employed, or partial work information is listed, it is the information that was provided by the contributor in response to our request. Amending FEC letter dated 06/10/2014.

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 37  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for 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)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Craig K Anderson**

Mailing Address 3250 Gregory Dr W

City Billings	State MT	Zip Code 59102
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Merrill Lynch	Occupation Financial Consultant
-----------------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 40403.C166**

Amount of Each Receipt this Period  
2500.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Bert E Arnlund**

Mailing Address PO Box 1320

City Hamilton	State MT	Zip Code 59840
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FEC ID number of contributing federal political committee. **C**

Name of Employer King Resources Inc	Occupation Consultant
--	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 40403.C178**

Amount of Each Receipt this Period  
2500.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Norman H Asbjornson**

Mailing Address 2202 S Troost Ave

City Tulsa	State OK	Zip Code 74114
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FEC ID number of contributing federal political committee. **C**

Name of Employer AAON Inc	Occupation Manager
------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 40403.C188**

Amount of Each Receipt this Period  
15200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

**A. Gerhart S Blain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6309 Jellison Rd  
 City Billings State MT Zip Code 59101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Billings Flying Service Inc Occupation Co-Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 24 / 2014**  
**Transaction ID : 40403.C199**  
 Amount of Each Receipt this Period **5000.00**  
 Receipt

**B. Vickie Blain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6309 Jellison Rd  
 City Billings State MT Zip Code 59101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 24 / 2014**  
**Transaction ID : 40403.C200**  
 Amount of Each Receipt this Period **5000.00**  
 Receipt

**C. Hank Bouma**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Bridger Canyon Spur Rd  
 City Bozeman State MT Zip Code 59715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer H Lazy 6 Ranch Occupation Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt **03 / 21 / 2014**  
**Transaction ID : 40403.C189**  
 Amount of Each Receipt this Period **2000.00**  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>12000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Mark Bretz**

Mailing Address 4800 Grant Creek Rd

City	State	Zip Code
Missoula	MT	59808

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Bretz RV & Marine	Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 40403.C197**

Amount of Each Receipt this Period  
1000.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Jan Cashman**

Mailing Address 2055 Springhill Rd

City	State	Zip Code
Bozeman	MT	59718

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Cashman Nursery	Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2014

**Transaction ID : 40403.C152**

Amount of Each Receipt this Period  
500.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Richard F Cebull**

Mailing Address PO Box 1455

City	State	Zip Code
Billings	MT	59103

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 40403.C165**

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 37  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Leanne Dutton**

Mailing Address 2046 Mariposa Ln

City	State	Zip Code
Billings	MT	59102

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Self Employed	Realtor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 40403.C164**

Amount of Each Receipt this Period  
1000.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Howard D Edwards**

Mailing Address 8320 B Deschamps Ln

City	State	Zip Code
Missoula	MT	59808

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : 40403.C190**

Amount of Each Receipt this Period  
250.00

Receipt

Full Name (Last, First, Middle Initial)  
**c. Malka Ehreberg**

Mailing Address 219 Milbank Ave

City	State	Zip Code
Greenwich	CT	06830

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Self Employed	Veterinary Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	08	/	2014

**Transaction ID : 40403.C150**

Amount of Each Receipt this Period  
10000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

**A. Greg R Gianforte**  
Full Name (Last, First, Middle Initial)

Mailing Address 1320 Manley Rd

City Bozeman State MT Zip Code 59715

FEC ID number of contributing federal political committee. **C**

Name of Employer RightNow Technologies Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 40403.C180**

Amount of Each Receipt this Period  
 5000.00

Receipt

**B. Susan K Gianforte**  
Full Name (Last, First, Middle Initial)

Mailing Address 1320 Manley Rd

City Bozeman State MT Zip Code 59715

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 40403.C179**

Amount of Each Receipt this Period  
 5000.00

Receipt

**C. Michael L Goguen**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1707

City Los Altos State CA Zip Code 94023

FEC ID number of contributing federal political committee. **C**

Name of Employer Proof Research Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 40403.C201**

Amount of Each Receipt this Period  
 10000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

**A. Wayne Hirsch**  
Full Name (Last, First, Middle Initial)

Mailing Address 1161 Amendment Cir

City	State	Zip Code
Billings	MT	59105

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
US Bank	Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 40403.C167**

Amount of Each Receipt this Period  
 250.00

Receipt

**B. Katherine M Hoffman**  
Full Name (Last, First, Middle Initial)

Mailing Address 2628 Skinner Rd

City	State	Zip Code
Belgrade	MT	59714

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : 40403.C153**

Amount of Each Receipt this Period  
 1000.00

Receipt

**C. Barry J Jacobsen**  
Full Name (Last, First, Middle Initial)

Mailing Address 2107 Spring Creek Dr

City	State	Zip Code
Bozeman	MT	59715

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Montana State University	Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : 40403.C154**

Amount of Each Receipt this Period  
 250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

**A. Barry L Klein**  
Full Name (Last, First, Middle Initial)

Mailing Address 219 Milbank Ave W

City Greenwich State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer DKR Capital Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 08 / 2014  
**Transaction ID : 40403.C151**

Amount of Each Receipt this Period  
 10000.00

Receipt

**B. Terry Leprino**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Little Raven St #6A

City Denver State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C**

Name of Employer Leprino Foods Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 40403.C198**

Amount of Each Receipt this Period  
 1500.00

Receipt

**C. Kent Levi**  
Full Name (Last, First, Middle Initial)

Mailing Address 634 Stonegate Dr

City Bozeman State MT Zip Code 59715

FEC ID number of contributing federal political committee. **C**

Name of Employer Rocky Mountain Bank Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : 40403.C155**

Amount of Each Receipt this Period  
 500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 37  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Joel T Long**

Mailing Address 730 Bluegrass Pl

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer United Industry Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 40403.C181**

Amount of Each Receipt this Period  
2500.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Malcolm D Long**

Mailing Address 4548 Rangeview Dr

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer CMG Construction Occupation Engineer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 40403.C182**

Amount of Each Receipt this Period  
2500.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Jodee MacDonald-Etchart**

Mailing Address 1819 Iris Ln

City Billings State MT Zip Code 59102

FEC ID number of contributing federal political committee. **C**

Name of Employer Billings Clinic Occupation Physician Assistant

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 40403.C175**

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Vincent W Meng**

Mailing Address 4920 Burning Tree Dr

City State Zip Code  
Missoula MT 59803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Dentist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 40403.C192**

Amount of Each Receipt this Period  
250.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Matt Meusey**

Mailing Address 6884 Linda Vista Blvd

City State Zip Code  
Missoula MT 59803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wagners Home Furnishings Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 40403.C193**

Amount of Each Receipt this Period  
250.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Scot A Miller**

Mailing Address 2226 Fairway Dr

City State Zip Code  
Billings MT 59102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 40403.C183**

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

**A. Shawn D Modula**  
Full Name (Last, First, Middle Initial)

Mailing Address 2901 Brooks St #A1

City Missoula State MT Zip Code 59801

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 40403.C196**

Amount of Each Receipt this Period 250.00

Receipt

**B. Bob Nance**  
Full Name (Last, First, Middle Initial)

Mailing Address 5033 Hwy 3

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 40403.C176**

Amount of Each Receipt this Period 5000.00

Receipt

**C. Penni Nance**  
Full Name (Last, First, Middle Initial)

Mailing Address 5033 Hwy 3

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 40403.C177**

Amount of Each Receipt this Period 5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial) <b>A. Alexander K Omura</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2014 <b>Transaction ID : 40403.C194</b>
Mailing Address 7785 Alta VW		Amount of Each Receipt this Period 250.00
City Missoula	State MT	Zip Code 59804
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Missoula Anesthesiology	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. David K Palagi</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2014 <b>Transaction ID : 40403.C156</b>
Mailing Address 303 Churn Creek Dr		Amount of Each Receipt this Period 500.00
City Bozeman	State MT	Zip Code 59715
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Stifel	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Ken D Peterson</b>		Date of Receipt MM / DD / YYYY 02 / 24 / 2014 <b>Transaction ID : 40403.C168</b>
Mailing Address 424 48th St W		Amount of Each Receipt this Period 250.00
City Billings	State MT	Zip Code 59106
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Self Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial) <b>A. Charles H Raches Jr</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2014 <b>Transaction ID : 40403.C157</b>
Mailing Address 6600 Tepee Ridge Rd		Amount of Each Receipt this Period 500.00
City Bozeman	State MT	Zip Code 59715
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Bradley L Radoff</b>		Date of Receipt MM / DD / YYYY 02 / 13 / 2014 <b>Transaction ID : 40403.C149</b>
Mailing Address 1177 W Loop S #1625		Amount of Each Receipt this Period 5000.00
City Houston	State TX	Zip Code 77027
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Self Employed	Occupation Investment Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Debbi L Royer</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2014 <b>Transaction ID : 40403.C158</b>
Mailing Address 107A Gallatin Dr		Amount of Each Receipt this Period 1000.00
City Bozeman	State MT	Zip Code 59718
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Countrywide Home Loans	Occupation Lender	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Leon Royer**

Mailing Address 107 A Gallatin Dr

City Bozeman State MT Zip Code 59718

FEC ID number of contributing federal political committee. **C**

Name of Employer American Bank Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : 40403.C159**

Amount of Each Receipt this Period  
1000.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Margaret Ryan**

Mailing Address PO Box 117

City Billings State MT Zip Code 59103

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 40403.C186**

Amount of Each Receipt this Period  
15200.00

Receipt

Full Name (Last, First, Middle Initial)  
**c. Thomas C Ryan**

Mailing Address PO Box 117

City Billings State MT Zip Code 59103

FEC ID number of contributing federal political committee. **C**

Name of Employer Montana Oil Properties Inc Occupation Oil & Gas Exploration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 40403.C185**

Amount of Each Receipt this Period  
15200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

**A. David Schaenen**  
Full Name (Last, First, Middle Initial)

Mailing Address 2627 Forest Meadow Ln

City	State	Zip Code
Billings	MT	59102

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	11	/	2014

**Transaction ID : 40403.C184**

Amount of Each Receipt this Period  
1600.00

Receipt

**B. John M Simkins**  
Full Name (Last, First, Middle Initial)

Mailing Address 1625 Kenyon Dr

City	State	Zip Code
Bozeman	MT	59715

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Simkins Hallin Lumber	Co-Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

**Transaction ID : 40403.C160**

Amount of Each Receipt this Period  
1000.00

Receipt

**C. Susan B Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 5522 Billy Casper Dr

City	State	Zip Code
Billings	MT	59106

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	24	/	2014

**Transaction ID : 40403.C171**

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2850.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Ann M Soares**

Mailing Address 6070 Masters Blvd

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer Mercedes Benz of Billings Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 40403.C172**

Amount of Each Receipt this Period  
1000.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. Stephen A Solberg**

Mailing Address 3513 Prestwick Rd

City Billings State MT Zip Code 59101

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 40403.C173**

Amount of Each Receipt this Period  
5000.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Michele Stinnett**

Mailing Address 385 Meadowlark Dr

City Bozeman State MT Zip Code 59718

FEC ID number of contributing federal political committee. **C**

Name of Employer Village Economy Stores Inc Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : 40403.C162**

Amount of Each Receipt this Period  
5200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Raymond G Stinnett**

Mailing Address 385 Meadowlark Dr

City Bozeman State MT Zip Code 59718

FEC ID number of contributing federal political committee. **C**

Name of Employer 2 A Management Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : 40403.C161**

Amount of Each Receipt this Period  
5200.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. William E Wilson**

Mailing Address 10955 Horseback Ridge Rd

City Missoula State MT Zip Code 59804

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 40403.C195**

Amount of Each Receipt this Period  
500.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. Stephen A Zabawa**

Mailing Address 810 Bluegrass Pl

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer Rimrock Auto Group Occupation Car Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 40403.C174**

Amount of Each Receipt this Period  
2500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 37  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)  
**A. Stephen A Zabawa**

Mailing Address 810 Bluegrass Pl

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer Rimrock Auto Group Occupation Car Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 40403.C187**

Amount of Each Receipt this Period  
 1000.00

Receipt

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	157350.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Atlas LLC**

Mailing Address 1820 N Last Chance Gulch

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Rental Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

**Transaction ID : 40403.E110**

Amount of Each Disbursement this Period

500.00

OFFICE RENTAL FEE

Full Name (Last, First, Middle Initial)

**B. Creative Event Rentals**

Mailing Address PO Box 11664

City Bozeman State MT Zip Code 59719-

Purpose of Disbursement  
Event Equipment Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 40403.E113**

Amount of Each Disbursement this Period

777.55

EVENT EQUIPMENT RENTAL

Full Name (Last, First, Middle Initial)

**C. Special Projects**

Mailing Address 400 N California

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Financial Reporting & Bookkeeping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2014

**Transaction ID : 40409.E145**

Amount of Each Disbursement this Period

705.72

FINANCIAL REPORTING & BOOKKEEPING

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1983.27



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Special Projects**

Mailing Address 400 N California

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Financial Reporting & Bookkeeping

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 17 / 2014

**Transaction ID : 40403.E107**

Amount of Each Disbursement this Period

834.55

FINANCIAL REPORTING & BOOKKEEPING

Full Name (Last, First, Middle Initial)

**B. Special Projects**

Mailing Address 400 N California

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Financial Reporting & Bookkeeping

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 40403.E111**

Amount of Each Disbursement this Period

825.59

FINANCIAL REPORTING & BOOKKEEPING

Full Name (Last, First, Middle Initial)

**C. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Reimburse; See Below

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2014

**Transaction ID : 40124.E80**

Amount of Each Disbursement this Period

3721.88

REIMBURSE; SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5382.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Montana Club**

Mailing Address PO Box 637

City Helena State MT Zip Code 59624-

Purpose of Disbursement  
Fundraiser Catering

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	1	4		

**Transaction ID : 40409.E148**

Amount of Each Disbursement this Period

1	3	1	0	0	0
---	---	---	---	---	---

**[MEMO ITEM]**  
MEMO: FUNDRAISER CATERING

Full Name (Last, First, Middle Initial)

**B. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	1	4		

**Transaction ID : 40409.E149**

Amount of Each Disbursement this Period

1	3	1	0	8	
---	---	---	---	---	--

**[MEMO ITEM]**  
MEMO: MILEAGE

Full Name (Last, First, Middle Initial)

**C. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	1	4		

**Transaction ID : 40409.E150**

Amount of Each Disbursement this Period

1	1	0	7	4	
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**[MEMO ITEM]**  
MEMO: MILEAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0	0	0	0	0	
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0	0	0	0	0	
---	---	---	---	---	--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Fundraising Consulting Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2014

Transaction ID : 40409.E151

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

MEMO: FUNDRAISING CONSULTING FEES

Full Name (Last, First, Middle Initial)

**B. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Reimburse; See Below

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2014

Transaction ID : 40403.E117

Amount of Each Disbursement this Period

3595.69

REIMBURSE; SEE BELOW

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2014

Transaction ID : 40403.E118

Amount of Each Disbursement this Period

242.35

[MEMO ITEM]

MEMO: POSTAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3595.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Ferraros Fine Italian**

Mailing Address 726 N 7th Ave

City Bozeman State MT Zip Code 59715-

Purpose of Disbursement  
Event Catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2014

**Transaction ID : 40403.E119**

Amount of Each Disbursement this Period

407.55
--------

**[MEMO ITEM]**  
MEMO: EVENT CATERING

Full Name (Last, First, Middle Initial)

**B. Office Depot**

Mailing Address 3035 N Sanders St

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2014

**Transaction ID : 40403.E121**

Amount of Each Disbursement this Period

190.99
--------

**[MEMO ITEM]**  
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**C. Office Depot**

Mailing Address 3035 N Sanders St

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2014

**Transaction ID : 40403.E122**

Amount of Each Disbursement this Period

408.86
--------

**[MEMO ITEM]**  
MEMO: OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Fundraising Consulting Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2014

**Transaction ID : 40403.E124**

Amount of Each Disbursement this Period

2000.00

**[MEMO ITEM]**

MEMO: FUNDRAISING CONSULTING FEES

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2014

**Transaction ID : 40403.E125**

Amount of Each Disbursement this Period

314.65

**[MEMO ITEM]**

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

**C. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Reimburse; See Below

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 40403.E126**

Amount of Each Disbursement this Period

6559.15

REIMBURSE; SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6559.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Office Depot**

Mailing Address 3035 N Sanders St

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E127

Amount of Each Disbursement this Period

548.80

**[MEMO ITEM]**  
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**B. Office Depot**

Mailing Address 3035 N Sanders St

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E129

Amount of Each Disbursement this Period

49.00

**[MEMO ITEM]**  
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E130

Amount of Each Disbursement this Period

263.58

**[MEMO ITEM]**  
MEMO: POSTAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2014

**Transaction ID : 40403.E131**

Amount of Each Disbursement this Period

110.66

**[MEMO ITEM]**  
MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2014

**Transaction ID : 40403.E133**

Amount of Each Disbursement this Period

402.63

**[MEMO ITEM]**  
MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2014

**Transaction ID : 40403.E134**

Amount of Each Disbursement this Period

70.45

**[MEMO ITEM]**  
MEMO: POSTAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Fundraising Consulting Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E135

Amount of Each Disbursement this Period

4000.00

[MEMO ITEM]

MEMO: FUNDRAISING CONSULTING FEES

Full Name (Last, First, Middle Initial)

**B. Office Depot**

Mailing Address 3035 N Sanders St

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E136

Amount of Each Disbursement this Period

97.96

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**C. Office Depot**

Mailing Address 3035 N Sanders St

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E137

Amount of Each Disbursement this Period

98.00

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Office Depot**

Mailing Address 3035 N Sanders St

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E138

Amount of Each Disbursement this Period

117.99

[MEMO ITEM]  
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Postage - Returned Mail

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E139

Amount of Each Disbursement this Period

10.78

[MEMO ITEM]  
MEMO: POSTAGE - RETURNED MAIL

Full Name (Last, First, Middle Initial)

**C. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E140

Amount of Each Disbursement this Period

109.76

[MEMO ITEM]  
MEMO: MILEAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E141

Amount of Each Disbursement this Period

109.76

[MEMO ITEM]  
MEMO: MILEAGE

Full Name (Last, First, Middle Initial)

**B. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E142

Amount of Each Disbursement this Period

267.68

[MEMO ITEM]  
MEMO: MILEAGE

Full Name (Last, First, Middle Initial)

**C. Standard Consulting**

Mailing Address 1820 N Last Chance Gul

City Helena State MT Zip Code 59601-

Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 40403.E143

Amount of Each Disbursement this Period

129.92

[MEMO ITEM]  
MEMO: MILEAGE

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 2300 N Harris Ave

City Helena State MT Zip Code 59601-

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2014

Transaction ID : 40403.E144

Amount of Each Disbursement this Period: 70.42

[MEMO ITEM]  
MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

**B. Valley Bank**

Mailing Address PO Box 5269

City Helena State MT Zip Code 59604-

Purpose of Disbursement Credit Card Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 20 / 2014

Transaction ID : 40403.E108

Amount of Each Disbursement this Period: 862.92

CREDIT CARD FEES

Full Name (Last, First, Middle Initial)

**C. Valley Bank**

Mailing Address PO Box 5269

City Helena State MT Zip Code 59604-

Purpose of Disbursement Credit Card Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 20 / 2014

Transaction ID : 40403.E109

Amount of Each Disbursement this Period: 17.08

CREDIT CARD FEES

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 880.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Valley Bank**

Mailing Address PO Box 5269

City Helena State MT Zip Code 59604-

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 40403.E112**

Amount of Each Disbursement this Period

16.27

CREDIT CARD FEES

Full Name (Last, First, Middle Initial)

**B. Valley Bank**

Mailing Address PO Box 5269

City Helena State MT Zip Code 59604-

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 40403.E115**

Amount of Each Disbursement this Period

520.74

CREDIT CARD FEES

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

537.01

18937.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Montana Republican Central Committee**

Mailing Address PO Box 935

City Helena State MT Zip Code 59604-

Purpose of Disbursement  
Transfer of Net Proceeds

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2014

**Transaction ID : 40403.E114**

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

**B. Steve Daines for Montana**

Mailing Address PO Box 1598

City Helena State MT Zip Code 59624-

Purpose of Disbursement  
Transfer of Net Proceeds

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2014

**Transaction ID : 40403.E106**

Amount of Each Disbursement this Period

18000.00

Full Name (Last, First, Middle Initial)

**C. Steve Daines for Montana**

Mailing Address PO Box 1598

City Helena State MT Zip Code 59624-

Purpose of Disbursement  
Transfer of Net Proceeds

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 40403.E116**

Amount of Each Disbursement this Period

69000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

91500.00

91500.00