

# 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.   
**Treasure State PAC**

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  /  /  through  /  /

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 Brett Debruycker

Signature of Treasurer Brett Debruycker [Electronically Filed] Date  /  /

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

Treasure State PAC

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"/>		61097.15
(b) Cash on Hand at Beginning of Reporting Period.....	45826.50	
(c) Total Receipts (from Line 19) .....	11000.00	159650.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	56826.50	220747.15
7. Total Disbursements (from Line 31).....	44482.92	208403.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12343.58	12343.58
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

Write or Type Committee Name

**Treasure State PAC**

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).....	0.00	42650.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	42650.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	11000.00	117000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11000.00	159650.00
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))..... ▶	11000.00	159650.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11000.00	159650.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	34482.92	98503.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	34482.92	98503.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	75500.00
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 .....	10000.00	34400.00
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)) ..	44482.92	208403.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44482.92	208403.57

**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) .....	11000.00	159650.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11000.00	159650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	34482.92	98503.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	34482.92	98503.57

**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 6 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
**Treasure State PAC**

**A.** Full Name (Last, First, Middle Initial)  
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 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
05	/	12	/	2014

**Transaction ID : C10325466**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)

Mailing Address 1166 AVENUE OF THE AMERICAS

City NEW YORK	State NY	Zip Code 10036
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00457234

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 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
05	/	07	/	2014

**Transaction ID : C10321443**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mortgage Bankers Association PAC

Mailing Address 1717 RHODE ISLAND AVE NW  
SUITE 400

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 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
05	/	21	/	2014

**Transaction ID : C10332385**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 7 OF 18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)  
**A. VISA, Inc. PAC**

Mailing Address 1300 Connecticut Ave NW  
Ste 900

City Washington State DC Zip Code 20036-1714

FEC ID number of contributing federal political committee. **C** C00365122

Name of Employer Occupation

Receipt For: 2014  
 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  
 05 / 21 / 2014  
**Transaction ID : C10332384**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. Wine & Spirits Wholesalers of America PAC**

Mailing Address 805 15th St NW  
Ste 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014  
 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  
 05 / 20 / 2014  
**Transaction ID : C10331072**

Amount of Each Receipt this Period  
 2500.00

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11000.00

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Compliance, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2014

Mailing Address 3242 Cummins Way

**Transaction ID : D716374**

City Missoula State MT Zip Code 59802-3222

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Accounting

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Chraca Friedman Group**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Mailing Address 236 Massachusetts Ave NE  
Ste 207

**Transaction ID : D716379**

City Washington State DC Zip Code 20002-4980

Amount of Each Disbursement this Period

15000.00
----------

Purpose of Disbursement  
PAC Fundraising consultant

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Chraca Friedman Group**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Mailing Address 236 Massachusetts Ave NE  
Ste 207

**Transaction ID : D716380**

City Washington State DC Zip Code 20002-4980

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
PAC Fundraising consultant

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

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

23000.00
----------

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

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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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Air**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716364**

Amount of Each Disbursement this Period

1213.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Delta Air**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716365**

Amount of Each Disbursement this Period

25.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Exec Air Montana, Inc.**

Mailing Address 2430 Airport Rd

City Helena State MT Zip Code 59601-1234

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716385**

Amount of Each Disbursement this Period

6294.00

Category/  
Type

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

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

7532.00

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. MasterCard**

Mailing Address PO Box 31021

City Tampa State FL Zip Code 33631-3021

Purpose of Disbursement  
Credit card payment-various

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716368**

Amount of Each Disbursement this Period

1191.03

Full Name (Last, First, Middle Initial)

**B. Doubletree Metropolitan**

Mailing Address 569 Lexington Avenue

City New York State NY Zip Code 10022

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716372**

Amount of Each Disbursement this Period

463.72

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Doubletree Metropolitan**

Mailing Address 569 Lexington Avenue

City New York State NY Zip Code 10022

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716373**

Amount of Each Disbursement this Period

417.80

**[MEMO ITEM]**

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

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

1191.03

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. Hilton Garden Inn Tulsa**

Mailing Address 7728 E Virgin Ct

City State Zip Code  
Tulsa OK 74115-3713

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2014

**Transaction ID : D716386**

Amount of Each Disbursement this Period

124.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hilton Garden Inn Tulsa**

Mailing Address 7728 E Virgin Ct

City State Zip Code  
Tulsa OK 74115-3713

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2014

**Transaction ID : D716387**

Amount of Each Disbursement this Period

124.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MasterCard**

Mailing Address PO Box 31021

City State Zip Code  
Tampa FL 33631-3021

Purpose of Disbursement  
Credit card payment-various

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2014

**Transaction ID : D716369**

Amount of Each Disbursement this Period

1693.62

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

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

1693.62

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. Acqua al 2**

Mailing Address 212 7th St SE

City Washington State DC Zip Code 20003-4311

Purpose of Disbursement  
PAC Catering/meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716384**

Amount of Each Disbursement this Period

1577.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716356**

Amount of Each Disbursement this Period

89.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MasterCard**

Mailing Address PO Box 31021

City Tampa State FL Zip Code 33631-3021

Purpose of Disbursement  
Credit card payment-various

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716370**

Amount of Each Disbursement this Period

895.29

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

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

895.29

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4285

Purpose of Disbursement  
Ground Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716355**

Amount of Each Disbursement this Period

28.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Embarque**

Mailing Address 4530 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4627

Purpose of Disbursement  
Ground Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716381**

Amount of Each Disbursement this Period

92.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Embarque**

Mailing Address 4530 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4627

Purpose of Disbursement  
Ground Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716382**

Amount of Each Disbursement this Period

283.90

[MEMO ITEM]

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. National**

Mailing Address 557 Lexington Ave

City New York State NY Zip Code 10022-7512

Purpose of Disbursement  
PAC Catering/meals

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

Transaction ID : D716377

Amount of Each Disbursement this Period

62.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. National**

Mailing Address 557 Lexington Ave

City New York State NY Zip Code 10022-7512

Purpose of Disbursement  
PAC Catering/meals

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

Transaction ID : D716378

Amount of Each Disbursement this Period

140.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
Postage/shipping

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

Transaction ID : D716402

Amount of Each Disbursement this Period

4.77

[MEMO ITEM]

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716357**

Amount of Each Disbursement this Period

19.11

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716358**

Amount of Each Disbursement this Period

16.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

**Transaction ID : D716359**

Amount of Each Disbursement this Period

19.11

[MEMO ITEM]

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2014

**Transaction ID : D716360**

Amount of Each Disbursement this Period

13.12

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2014

**Transaction ID : D716361**

Amount of Each Disbursement this Period

19.11

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
PAC Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2014

**Transaction ID : D716362**

Amount of Each Disbursement this Period

19.20

**[MEMO ITEM]**

**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)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

### A. Campaign Compliance, Inc.

Mailing Address 3242 Cummins Way

City Missoula State MT Zip Code 59802-3222

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2014

Transaction ID : D716375

Amount of Each Disbursement this Period

111.78

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)..... ▶

111.78

34423.72

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Treasure State PAC**

Full Name (Last, First, Middle Initial)

**A. Montana League of Rural Voters**

Mailing Address PO Box 522

City Billings State MT Zip Code 59103

Purpose of Disbursement  
Nonfederal contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2014

**Transaction ID : D716390**

Amount of Each Disbursement this Period

5000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Montana Native Vote**

Mailing Address 220 S. 27th St. #B

City Billings State MT Zip Code 59101

Purpose of Disbursement  
Nonfederal contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2014

**Transaction ID : D716391**

Amount of Each Disbursement this Period

5000.00

Category/  
Type

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) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/  
Type

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

10000.00

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

10000.00