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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Autho	orized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Daines Montana Victo	ry Committee		
ADDRESS (number and street)	PO Box 1618		
▼ Check if different			
than previously reported. (ACC)	Helena		MT 59624
2. FEC IDENTIFICATION N	UMBER ▼ CITY	^	STATE ▲ ZIP CODE ▲
C C00506865	3. IS	THIS NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15 Quarterly Report (Q1		0 (M4) Jul 20 (M7)	Oct 20 (M10)
July 15 Quarterly Report (0	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Floation	on/	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		on//	in the State of
5. Covering Period 1		through 12	31 2016
I certify that I have examined the	his Report and to the best of m Warehime, Shirley, J, ,	ny knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure			
Signature of Treasurer	ehime, Shirley, J, ,	[Electronically Filed]	Date 01 / 17 / 2017
NOTE: Submission of false, error	neous, or incomplete information	may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name **Daines Montana Victory Committee** 11 29 2016 12 31 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 10202.16 January 1, 2016 (b) Cash on Hand at 9715.98 Beginning of Reporting Period..... 0.00 76500.00 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 86702.16 9715.98 6(a) and 6(c) for Column B)..... 976.94 77963.12 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 8739.04 8739.04 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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. 05/2016)

Write or Type Committee Name

Daines Montana Victory Committee

2016 31 2016 12 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 76400.00 (i) Itemized (use Schedule A)..... 0.00 100.00 (ii) Unitemized (iii) TOTAL (add 76500.00 0.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 76500.00 0.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 0.00 76500.00 20. Total Federal Receipts 0.00 76500.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Saistida Tour to Bute
0.00	0.00
3.00	0.00
0.00	0.00
976.94	48213.12
076.04	48213.12
970.94	40213.12
0.00	29750.00
0.00	0.00
0.00	0.00
	4 1 4 1 4 1 4
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
,	
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
976.94	77963.12
976.94	77963.12
	Total This Period 0.00 0.00 976.94 976.94 0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	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)	0.00	76500.00	
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	76500.00	
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	976.94	48213.12	
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38. Net Operating Expenditures (subtract Line 37 from Line 36)	976.94	48213.12	

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F3XN 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.

Form/Schedule: Transaction ID:

S П

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		EOR LINE	FOR LINE NUMBER: PAGE 7 OF 7	
ITEMIZED DISBURSEMENTS			(check only	NOMBELL.	
		for each category of the Detailed Summary Page		22 23 26 27	
			28a	28b 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Daines Montana Victory Committee	Э				
Full Name (Last, First, Middle Initial)					
A. Valley Bank				Date of Disbursement	
Mailing Address PO Box 5269	11 30 2016				
City	State	Zip Code		FEC Identification Number	
Helena	MT 59604				
Purpose of Disbursement Credit Card Fees				C	
Candidate Name				Transaction ID : B6F89CD91C	
Canadate Name			Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburser	nent For:			16.35	
Senate	Primary General			7 7	
President	President Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)				Date of Disbursement	
B. Special Projects					
Mailing Address 400 N California	12 17 2016				
City		FEC Identification Number			
Helena Purpose of Disbursement	MT	59601-4968			
Bookkeeping and Compliance Reporting	C				
Candidate Name	Transaction ID: B89B54B0E2I Amount of Each Disbursement this Period				
	Amount of Each dispulsement this Penou				
Office Sought: House Disbursement For:				960.59	
Senate	Primary	General			
President	Other (spec	eify)		Memo Item	
State: District: Full Name (Last, First, Middle Initial)				_	
C.				Date of Disbursement	
				M M / D D / Y Y Y Y	
Mailing Address					
City	State	Zip Code		FEC Identification Number	
Purpose of Disbursement	C				
Candidate Name	Amount of Each Disbursement this Period				
Office Sought: House Disburser					
Senate Primary General					
State: District: Other (specify) ▼				Memo Item	
State. District.					
SUBTOTAL of Disbursements This Page (optional)				976.94	
COSTOTAL OF DISDUTS CHIEFTON THIS Page (OPTIONAL)				4 4	
TOTAL This Period (last page this line number only)				976.94	