

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
CENTER
-5 AM 10:42
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE-M5

Montanans for Limited Government

ADDRESS (number and street) P.O. Box 1154

Check if different than previously reported. (ACC)

4010 MT 59847

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

CC0563155

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 04 01 2019 through 06 30 2019

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 Kathryn Kay

Signature of Treasurer Kathryn Kay Date 07 31 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Montanans for Limited Government

Report Covering the Period: From: 04 01 2019 To: 06 30 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2019</u>		1,038.67
(b) Cash on Hand at Beginning of Reporting Period.....	1,119.28	
(c) Total Receipts (from Line 19).....	26,250.00	26,550.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	27,369.28	27,588.67
7. Total Disbursements (from Line 31).....	324.77	544.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27,044.51	27,044.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on 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)

Page 3

Write or Type Committee Name

Montanans for Limited Government

Report Covering the Period: From:

MM DD YYYY
04 01 2019

To:

MM DD YYYY
06 30 2019

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).....

26,050.00

26,350.00

(ii) Unitemized.....

0

0

(iii) TOTAL (add

Lines 11(a)(i) and (ii)).....

0

0

(b) Political Party Committees.....

2,000.00

2,000.00

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....

26,250.00

26,550.00

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b)).....

0

0

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

26,250.00

26,550.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....

26,250.00

26,550.00

26,250.00

26,550.00

26,250.00

26,550.00

26,250.00

26,550.00

26,250.00

26,550.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	26,250.00	26,550.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26,250.00	26,550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

NOT FOR PUBLIC RELEASE

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	OF	3
<input 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

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)
Montanans for Limited Government

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ibsen, Carl

Mailing Address
650 Blaine St.

City **Missoula** State **MT** Zip Code **59801**

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

Name of Employer (for Individual) **N/A** Occupation (for Individual) **Retired.**

Receipt For:
 Primary General
 Other (specify) **Promote PAC**

Aggregate Year-to-Date **200.00**

Date of Receipt
04 / 25 / 2019

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Juras, Kristen G.

Mailing Address
220 Woodlawn Estates

City **Great Falls** State **MT** Zip Code **59404**

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

Name of Employer (for Individual) **Self** Occupation (for Individual) **Attorney**

Receipt For:
 Primary General
 Other (specify) **Promote PAC**

Aggregate Year-to-Date **100.00**

Date of Receipt
05 / 14 / 2019

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kenck, Clancy

Mailing Address
2813 Queen St.

City **Missoula** State **MT** Zip Code **59801**

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

Name of Employer (for Individual) **N/A** Occupation (for Individual) **Retired**

Receipt For:
 Primary General
 Other (specify) **Promote PAC**

Aggregate Year-to-Date **300.00**

Date of Receipt
06 / 06 / 2019

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

500.00

**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 **2** OF **3**

<input 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)

Montanans for Limited Government

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quackenbush, Sonya

Mailing Address

6610 Linda Vista

City

Missoula

State

MT

Zip Code

59803

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

Primary

General

Other (specify) **Promote PAC**

Aggregate Year-to-Date

50.00

Date of Receipt

06 / 19 / 2019

Amount of Each Receipt this Period

50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Strom, David

Mailing Address

106 Woodbine Pl.

City

Missoula

State

MT

Zip Code

59803

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

Primary

General

Other (specify) **Promote PAC**

Aggregate Year-to-Date

25,000.00

Date of Receipt

05 / 16 / 2019

Amount of Each Receipt this Period

25,000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swanson, Elinor

Mailing Address

1800 43rd St. W.

City

Billings

State

MT

Zip Code

59106

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Warren + Swanson PLLC

Occupation (for Individual)

Attorney

Receipt For:

Primary

General

Other (specify) **Promote PAC**

Aggregate Year-to-Date

7,000.00

Date of Receipt

04 / 23 / 2019

Amount of Each Receipt this Period

500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)

25,550.00

TOTAL This Period (last page this line number only)

25,550.00

NOTICE: ON 05-14-2019

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **3** OF **3**
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Montanans for Limited Government

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yellowstone County Republican Women

Mailing Address
3375 Gregory Dr.

City
Billings State
MT Zip Code
59102

FEC ID number of contributing federal political committee.
C

Name of Employer (for Individual)
N/A Occupation (for Individual)
N/A

Receipt For:
 Primary General
 Other (specify) **Promote PAC**

Aggregate Year-to-Date
200.00

Date of Receipt
05 / 14 / 2019

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.
C

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.
C

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **200.00**

TOTAL This Period (last page this line number only).....▶ **26250.00**

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Montanans for Limited Government

A. Full Name (Last, First, Middle Initial) **Kent, Edna**

Mailing Address **Box 1443**

City **Florence** State **MT** Zip Code **59833**

Purpose of Disbursement **Reimbursement for Facebook Ad to promote PAC \$105.06; Web host \$39.99**

Candidate Name **N/A** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Promote PAC**

Date of Disbursement **04/30/2019**

FEC Identification Number **C**

Amount of Each Disbursement this Period **145.05**

Memo Item

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

Mailing Address **Box 1443**

City **Florence** State **MT** Zip Code **59833**

Purpose of Disbursement **Reimbursement Webhost \$39.99 FB ad to promote PAC \$108.33, Postage \$6.80**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Promote PAC**

Date of Disbursement **06/06/2019**

FEC Identification Number **C**

Amount of Each Disbursement this Period **155.12**

Memo Item

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

Mailing Address **1920 McKinney Ave, 7th Floor**

City **Dallas** State **TX** Zip Code **75201**

Purpose of Disbursement **Fee for processing online donations**

Candidate Name **N/A** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

Date of Disbursement **04/30/2019**

FEC Identification Number **C**

Amount of Each Disbursement this Period **246.8**

Memo Item

SUBTOTAL of Disbursements This Page (optional) **324.77**

TOTAL This Period (last page this line number only) **324.77**

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt
7/31/19 8/5/19

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

PREPARER *mm* 8/5/19
 (3/2015) DATE PREPARED

ORIGINAL FILED IN 100-108010-1000