14031251504

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. 12FE4M5

Montanans for Limited Government

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

☐ Check if different than previously reported. (ACC)

Lolo — MT — 59847-

2. FEC IDENTIFICATION NUMBER ▼ C00563155

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 05/12/2014 through 05/13/2014

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 Kathryn Kay

Signature of Treasurer Kathryn Kay Date 06/26/2014

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

Office Use Only							

FEC FORM 3X Rev. 12/2004

FE6AN026

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Montanans for Limited Government

Report Covering the Period: From: 05 / 12 / 2014 To: 05 / 13 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		
(b) Cash on Hand at Beginning of Reporting Period	1145.41	
(c) Total Receipts (from Line 19)	0.00	35,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1145.41	35,000.00
7. Total Disbursements (from Line 31)	1075.00	34,297.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70.41	702.41
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☐ 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

FEGAN026

14031251505

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name: Montanans for Limited Government

Report Covering the Period: From: 05 12 2014 To: 05 13 2014

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	35,000.00
(ii) Unitemized	0	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	0	35,000.00
(b) Political Party Committees	0	0
(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) ▶	0	35,000.00
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)) ▶	0	35,000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	0	35,000.00

FE6AN008

14031251506

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	10750.00	34297.59
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10750.00	34297.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	10750.00	34297.59

14031251507

FEXAN026

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	35000.00
34. Total Contribution Refunds (from Line 26(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	35000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	0	0

14031251508

FE6A/4026

14031251509

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 5
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Montanans for Limited Government

FEC IDENTIFICATION NUMBER: C00563155

Check if ☐ 24-hour report ☒ 48-hour report ☐ New report ☒ Amends report filed on 05/14/2014

Full Name of Payee: Town Square Media
Mailing Address: 3250 S. Reserve
City: Missoula **State:** MT **Zip Code:** 59801
Purpose of Expenditure: Radio Advertising
Category/Type: 004
Date of Public Distribution/Dissemination: 05/20/2014
Amount: 4,130.00
Date of Disbursement or Obligation:
Name of Federal Candidate: Champ Edmunds
☒ Support ☐ Oppose
Office Sought: ☐ House District: ☐ President ☒ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought: 6,769.00
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee: Town Square Media
Mailing Address: 3250 S. Reserve
City: Missoula **State:** MT **Zip Code:** 59801
Purpose of Expenditure: Radio Advertising
Category/Type: 004
Date of Public Distribution/Dissemination:
Amount: 1,770.00
Date of Disbursement or Obligation:
Name of Federal Candidate: Matt Rosendale
☐ Support ☐ Oppose
Office Sought: ☒ House District: MT ☐ President ☐ Senate State:
Calendar Year-To-Date Per Election for Office Sought: 2,901.00
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 5,900.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 5
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Montanans for Limited Government

FEC IDENTIFICATION NUMBER ▼ C00563155

Check if ☐ 24-hour report ☒ 48-hour report ☐ New report ☒ Amends report filed on 05 / 14 / 2014

Full Name of Payee: Bee Broadcasting
Mailing Address: P.O. Box 5409
City: Kalispell **State:** MT **Zip Code:** 59903
Purpose of Expenditure: Radio Advertising
Category/Type: 004
Date of Public Distribution/Dissemination: 05 / 13 / 2014
Amount: 2835.00
Date of Disbursement or Obligation: 05 / 12 / 2014
Name of Federal Candidate: Champ Edmunds
☒ Support ☐ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: ___ State: MT
Calendar Year-To-Date Per Election for Office Sought: 2835.00
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee: Bee Broadcasting
Mailing Address: P.O. Box 5409
City: Kalispell **State:** MT **Zip Code:** 59903
Purpose of Expenditure: Radio Advertising
Category/Type:
Date of Public Distribution/Dissemination: 05 / 13 / 2014
Amount: 1215.00
Date of Disbursement or Obligation: 05 / 12 / 2014
Name of Federal Candidate: Matt Rosendale
☒ Support ☐ Oppose
Office Sought: ☒ House ☐ President ☐ Senate District: MT State: ___
Calendar Year-To-Date Per Election for Office Sought: 1215.00
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 4050.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date ___ / ___ / ___

FEC Schedule E (Form 3X) Rev. 09/2013

14031251510

14031251511

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 5
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Montanans for Limited Government

FEC IDENTIFICATION NUMBER ▼ C00563155

Check if ☐ 24-hour report ☒ 48-hour report ☐ New report ☒ Amends report filed on 05 / 14 / 2014

Full Name of Payee: Pete Denedt
Mailing Address: 147 New Meadows Dr.
City: Missoula **State:** MT **Zip Code:** 59808
Purpose of Expenditure: Consulting for Radio Ads
Category/Type: 004
Date of Public Distribution/Dissemination: / /
Amount: 245.00
Date of Disbursement or Obligation: 05 / 12 / 2014
Name of Federal Candidate: Champ Edmunds
☒ Support ☐ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: State: MT
Calendar Year-To-Date Per Election for Office Sought: 245.00
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee: Pete Denedt
Mailing Address: 147 New Meadows Dr.
City: Missoula **State:** MT **Zip Code:** 59808
Purpose of Expenditure: Consulting for Radio Ads
Category/Type: 004
Date of Public Distribution/Dissemination: / /
Amount: 105.00
Date of Disbursement or Obligation: 05 / 12 / 2014
Name of Federal Candidate: Matt Rosendale
☒ Support ☐ Oppose
Office Sought: ☒ House ☐ President ☐ Senate District: MT State:
Calendar Year-To-Date Per Election for Office Sought: 105.00
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 350.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 5
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Montanans for Limited Government

FEC IDENTIFICATION NUMBER: C00563155

Check if ☐ 24-hour report ☒ 48-hour report ☐ New report ☒ Amends report filed on 05 / 14 / 2014

Full Name of Payee: Brad Molnar, BAM Communications
Mailing Address: Box 517
City: Laurel State: MT Zip Code: 59044
Purpose of Expenditure: Prep of advertising
Category/Type: 004
Date of Public Distribution/Dissemination: / /
Amount: 300.00
Date of Disbursement or Obligation: 05 / 13 / 2014
Name of Federal Candidate: Champ Edmunds
☒ Support ☐ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: ___ State: MT
Calendar Year-To-Date Per Election for Office Sought: 35000
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee: Kenneth Kay
Mailing Address: P.O. Box 1209
City: Lolo State: MT Zip Code: 59847
Purpose of Expenditure: Office expenses, copies long distance telephone
Category/Type: 001
Date of Public Distribution/Dissemination: / /
Amount: 70.00
Date of Disbursement or Obligation: 05 / 13 / 2014
Name of Federal Candidate: Champ Edmunds
☒ Support ☐ Oppose
Office Sought: ☐ House ☐ President ☒ Senate District: ___ State: MT
Calendar Year-To-Date Per Election for Office Sought: 70.00
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 42000
(b) SUBTOTAL of Unitemized Independent Expenditures ▶
(c) TOTAL Independent Expenditures ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date / /

FEC Schedule E (Form 3X) Rev. 09/2013

14031251512

14031251513

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Montanans for Limited Government

FEC IDENTIFICATION NUMBER ▼ C00563155

Check if ☐ 24-hour report ☒ 48-hour report ☐ New report ☒ Amends report filed on 05 / 14 / 2014

Full Name of Payee: Kenneth Kay
Mailing Address: P.O. Box 1209
City: Lolo State: MT Zip Code: 59847
Purpose of Expenditure: Office expenses, copies long distance telephone
Category/Type: 001
Date of Public Distribution/Dissemination: / /
Amount: 30.00
Date of Disbursement or Obligation: 05 / 13 / 2014
Name of Federal Candidate: Matt Rosendale
☒ Support ☐ Oppose
Office Sought: ☒ House District: MT ☐ President ☐ Senate State:
Calendar Year-To-Date Per Election for Office Sought: 30.00
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee:
Mailing Address:
City: State: Zip Code:
Purpose of Expenditure:
Category/Type:
Date of Public Distribution/Dissemination: / /
Amount:
Date of Disbursement or Obligation: / /
Name of Federal Candidate:
☐ Support ☐ Oppose
Office Sought: ☐ House District: ☐ President ☐ Senate State:
Calendar Year-To-Date Per Election for Office Sought:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 30.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 10,750.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kathryn Kay
Signature

Date 06 / 26 / 2014

FEC Schedule E (Form 3X) Rev. 09/2013

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.

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N/A PREPARER	N/A DATE PRERARED

(8/2013)

14031251514