

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

RECEIVED  
APR 24 AM 9:00  
FEC MAIL CENTER

1. (a) Name of Individual, Organization or Corporation <i>Montana Family Foundation</i>		3. FEC Identification Number <b>C90014358</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <i>PO Box 485</i>		
(c) City, State and ZIP Code <i>Laurel, MT 59044</i>		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year-End Report  
 24-Hour Report  
 48-Hour Report

b) Is this Report an amendment? Yes  No

5. COVERING PERIOD: FROM

10	31	2012
THROUGH		
11	06	2012

6. TOTAL CONTRIBUTIONS ..... **0**

7. TOTAL INDEPENDENT EXPENDITURES ..... **444172**

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 any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
<i>Jeff Laszloffy</i>	<i>Jeff M. Laszloffy</i>	<i>4/18/2013</i>

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

For further information, contact:  
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

13031062508

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Montana Family Foundation

Full Name (Last, First, Middle Initial) of Payee

cc Advertising

Mailing Address

5900 Fort Dr., Ste 302

City

Centreville

State

VA

Zip Code

20121

Date

11 / 01 / 2012

Amount

2000.00

Purpose of Expenditure

Phone calls

Category/  
Type

Office Sought:

House

State: MT

Senate

District: \_\_\_\_\_

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Support Dennis Rehberg

Calendar Year-To-Date Per Election  
for Office Sought

2000.00

Disbursement For:  Primary

General

Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

cc Advertising

Mailing Address

5900 Fort Dr., Ste 302

City

Centreville

State

VA

Zip Code

20120

Date

11 / 01 / 2012

Amount

2000.00

Purpose of Expenditure

Phone calls

Category/  
Type

Office Sought:

House

State: MT

Senate

District: \_\_\_\_\_

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Support Steve Daines

Calendar Year-To-Date Per Election  
for Office Sought

2000.00

Disbursement For:  Primary

General

Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee

Andler LLC

Mailing Address

1100 G Street NW, Ste 805

City

Washington

State

DC

Zip Code

20005

Date

11 / 03 / 2012

Amount

1399.6

Purpose of Expenditure

Phone calls

Category/  
Type

Office Sought:

House

State: MT

Senate

District: \_\_\_\_\_

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Support Dennis Rehberg

Calendar Year-To-Date Per Election  
for Office Sought

2139.96

Disbursement For:  Primary

General

Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures.....

2139.96

(b) SUBTOTAL of Unitemized Independent Expenditures.....

0.00

(c) TOTAL Independent Expenditures.....  
(carry total from last page forward to Line 7)

2139.96

13031062509

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
*Montana Family Foundation*

13031062510

Full Name (Last, First, Middle Initial) of Payee <i>Angler LLC</i>		Date <i>11 / 03 / 2012</i>
Mailing Address <i>1100 G Street, Ste 805</i>		Amount <i>1399.6</i>
City <i>Washington</i>	State <i>DC</i>	
Zip Code <i>20005</i>		
Purpose of Expenditure <i>Phone calls</i>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>MT</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Support Steve Daines</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>21399.6</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Angler LLC</i>		Date <i>11 / 04 / 2012</i>
Mailing Address <i>1100 G Street, Ste 805</i>		Amount <i>8090</i>
City <i>Washington</i>	State <i>DC</i>	
Zip Code <i>20005</i>		
Purpose of Expenditure <i>Phone calls</i>	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <i>MT</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Support Dennis Rehberg</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>22208.6</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Angler LLC</i>		Date <i>11 / 04 / 2012</i>
Mailing Address <i>1100 G Street, Ste 805</i>		Amount <i>8090</i>
City <i>Washington</i>	State <i>DC</i>	
Zip Code <i>20005</i>		
Purpose of Expenditure <i>Phone calls</i>	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>MT</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Support Steve Daines</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>22208.6</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<i>1399.6</i>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<i>4441.72</i>
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	<i>4441.72</i>

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  
4/18/13

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail 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

*Chmp*  
 PREPARER

4/24/13  
 DATE PREPARED

13031062511