

# 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

Daines Montana Victory Committee

ADDRESS (number and street) PO Box 1618

Check if different than previously reported. (ACC)

Helena

MT

59624

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00506865

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 [MM] / [DD] / [YYYY] in the State of [ ]

(d) 30-Day POST-Election Report for the:

- General (30G)     Runoff (30R)     Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [03] / [01] / [2019] through [03] / [31] / [2019]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Warehime, Shirley, J.,

Type or Print Name of Treasurer

Signature of Treasurer Warehime, Shirley, J.,

[Electronically Filed]

Date [04] / [16] / [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.

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Daines Montana Victory Committee**

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="2019"/>	<input type="text" value="328.68"/>	<input type="text" value="328.68"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="694.78"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="84600.00"/>	<input type="text" value="86100.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="85294.78"/>	<input type="text" value="86428.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="41313.15"/>	<input type="text" value="42447.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43981.63"/>	<input type="text" value="43981.63"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Daines Montana Victory Committee

Report Covering the Period: From: 03 / 01 / 2019 To: 03 / 31 / 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).....	84600.00	84600.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	84600.00	84600.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	84600.00	86100.00
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)).....▶	84600.00	86100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	84600.00	86100.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	513.15	1647.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	513.15	1647.05
22. Transfers to Affiliated/Other Party Committees.....	30000.00	30000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	10800.00	10800.00
(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)).....	10800.00	10800.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	41313.15	42447.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41313.15	42447.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	84600.00	86100.00
34. Total Contribution Refunds (from Line 28(d)) .....	10800.00	10800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	73800.00	75300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	513.15	1647.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	513.15	1647.05

**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 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)  
**Daines Montana Victory Committee**

**A. Boich, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 Ocean Dr  
 Apt 303  
 City Miami Beach State FL Zip Code 33139-7210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15200.00

Date of Receipt 03 / 29 / 2019  
**Transaction ID : AAC525DCEB3724030856**  
 Amount of Each Receipt this Period 20600.00  
 Memo Item

**B. Boich, Wayne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 Ocean Dr  
 Apt 303  
 City Miami Beach State FL Zip Code 33139-7210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Boich Companies Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15200.00

Date of Receipt 03 / 29 / 2019  
**Transaction ID : A596675DF03614D14B80**  
 Amount of Each Receipt this Period 20600.00  
 Memo Item

**C. Catsimatidis, John, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 817 5th Ave Fl 14  
 City New York State NY Zip Code 10065-7280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Red Apple Group Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5700.00

Date of Receipt 03 / 15 / 2019  
**Transaction ID : A2D5418DB9BA244A380C**  
 Amount of Each Receipt this Period 5700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	46900.00
<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: (check only one)	PAGE 7 OF 12
<input checked="" 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)  
**Daines Montana Victory Committee**

**A. Catsimatidis, Margo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 817 5th Ave, FI 14  
 City New York State NY Zip Code 10065-7280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MVC Advertising Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5700.00

Date of Receipt 03 / 15 / 2019  
**Transaction ID : A2692F7CD51B4452EB3A**  
 Amount of Each Receipt this Period 5700.00  
 Memo Item

**B. Forrester, Carolyn, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 720 South Price Rd  
 City Saint Louis State MO Zip Code 63124-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Atma Adventures, LLC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 31 / 2019  
**Transaction ID : ABB7DA022FEF04B72A59**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Forrester, Carolyn, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 720 South Price Rd  
 City Saint Louis State MO Zip Code 63124-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Atma Adventures, LLC  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 31 / 2019  
**Transaction ID : A435BE83C85294B1584C**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15700.00
<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 8 OF 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**Daines Montana Victory Committee**

**A. Forrester, M, Rankine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 720 South Price Rd  
 City Saint Louis State MO Zip Code 63124-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Intoximeters, Inc.  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **10000.00**

Date of Receipt **03 / 31 / 2019**  
**Transaction ID : AB736CE18154641B1941**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**B. Forrester, M, Rankine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 720 South Price Rd  
 City Saint Louis State MO Zip Code 63124-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Intoximeters, Inc.  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **10000.00**

Date of Receipt **03 / 31 / 2019**  
**Transaction ID : ABBACDC49D2AE4524975**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**C. Forrester, Margretta, Van Evera, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 431-D North Polo Dr  
 City Saint Louis State MO Zip Code 63105-5900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **10000.00**

Date of Receipt **03 / 31 / 2019**  
**Transaction ID : AA3171F1D7C5846EF8A5**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>15000.00</b>
<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: (check only one)	PAGE 9 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Daines Montana Victory Committee**

**A. Forrester, Margretta, Van Evera, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 431-D North Polo Dr  
 City Saint Louis State MO Zip Code 63105-5900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 31 / 2019  
**Transaction ID : AB148C3BAA5F7482DA64**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Huempfner, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 Jack Leg Lane  
 City Bozeman State MT Zip Code 59715-0619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dakota Wall Systems Occupation (for Individual) Bookkeeper  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 29 / 2019  
**Transaction ID : AE5732FAD0616491C8A2**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Huempfner, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 Jack Leg Lane  
 City Bozeman State MT Zip Code 59715-0619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dakota Wall Systems Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 29 / 2019  
**Transaction ID : A93BC133FC44B4471923**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	84600.00

**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"/> 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

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)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial)

**A. Special Projects**

Mailing Address 400 N California St

City Helena State MT Zip Code 59601-4968

Purpose of Disbursement  
Bookkeeping and Compliance Reporting

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 16 / 2019

FEC Identification Number

C   
**Transaction ID : BB05441540/**  
Amount of Each Disbursement this Period  
 462.21

Memo Item

Full Name (Last, First, Middle Initial)

**B. Valley Bank**

Mailing Address PO Box 5269

City Helena State MT Zip Code 59604-5269

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 29 / 2019

FEC Identification Number

C   
**Transaction ID : B24785A7E47**  
Amount of Each Disbursement this Period  
 50.94

Memo Item

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

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C   
Amount of Each Disbursement this Period

Memo Item

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

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

513.15  
 513.15

**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 checked="" 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"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Daines Montana Victory Committee**

Full Name (Last, First, Middle Initial) <b>A. Steve Daines for Montana</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2019
Mailing Address PO Box 1598		FEC Identification Number C 000491357 <b>Transaction ID : B4406C64CE</b>
City Helena	State MT	Zip Code 59624
Purpose of Disbursement 1st Quarter 2019 Primary and General Distribution		Amount of Each Disbursement this Period 30000.00
Candidate Name <b>Steve Daines for Montana</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30000.00

**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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Daines Montana Victory Committee**

**A. Boich, Cynthia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 125 Ocean Dr  
Apt 303

City Miami Beach State FL Zip Code 33139-7210

Purpose of Disbursement Refund Excess Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 29 / 2019

FEC Identification Number: C

Transaction ID : B170390437E

Amount of Each Disbursement this Period: 5400.00

Memo Item

**B. Boich, Wayne, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 125 Ocean Dr  
Apt 303

City Miami Beach State FL Zip Code 33139-7210

Purpose of Disbursement Refund Excess Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 29 / 2019

FEC Identification Number: C

Transaction ID : BB1BE5E495

Amount of Each Disbursement this Period: 5400.00

Memo Item

**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: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10800.00