REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

Montana Tax Committee for Rural Electrification

ADDRESS (number and street) Check if different than previously reported

PO Box 1306

CITY, STATE and ZIP CODE

Great Falls, MT 59403

FEC IDENTIFICATION NO. C00139360

FEC 3 9 27 AM '94

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

X January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Dates:

February

March 20

April

May 20

Twelve Day Report Dates:

Election on:

In-field Dates Report:

(b) Is this Report an Amendment? YES NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year Date
5	Covering Period 31 July 93 through 31 Dec 93		
6	(a) Cash on Hand January 1, 1993		16431.10
	(b) Cash on Hand at Beginning of Reporting Period	$ 16006.10	
	(c) Total Receipts (from Line 19)	$ 4298.11	5573.11
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 20304.21	22004.21
	Total Disbursements (from Line 30)	$ 450.00	2150.00
7	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 5 d)	$ 19854.21	19854.21
	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$	
13	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$	

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

SAM T. DOWNEN

Signature of Treasurer

31 Jan 94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing to [illegible]

FEC FORM 3X

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: [illegible]

REPORT COVERING PERIOD FROM 31 July 93 TO 31 Dec 93

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
Itemized (Use Schedule A)	1000 00	2275
ii. Unitemized	3298 11	3298 11
iii. Total (add i and ii) ➤	4298 11	5573 11
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	4298 11	5573 11
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	4298 11	5573 11
20. Total Federal Receipts (subtract line 18 from line 19) ➤	4298 11	5573 11
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H):		
Federal Share		
i. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (Add a i, a ii, and b) ➤		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	450 00	1300 00
24. Independent Expenditures (Use Schedule E)		850 00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c) ➤		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	450 00	2150 00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	450 00	2150 00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	4298 11	5573 11
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans) (subtract line 33 from 32)	4298 11	5573 11
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤		
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤		

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOLLOW NUMBER

All 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): Utah Victory Committee for Laird Stabenfeldt

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code: Sugarloaf 194, Helena, MT 59601	Contribution. Disbursement for: [ ] Primary [ ] General [X] Other (specify)	12/1/93	$700.00
B. Full Name, Mailing Address and ZIP Code: Mont. Rep. Party, Helena, MT 59601	Contribution. Disbursement for: [ ] Primary [ ] General [X] Other (specify)	12/1/93	$250.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) . . . $450.00

TOTAL This Period (last page this line number only) . . . $450.00

14-3-3-3-5-4

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full): Front Action Committee for Rural Electrification

A. Full Name, Mailing Address and ZIP Code Martina Membership 1000 $10.00 each Receipt For: Primary / General Other (specify): Membership	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 1 Sept 93 thru 31 Dec 93	Amount of Each Receipt this Period $1000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: Primary / General Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: Primary / General Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: Primary / General Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: Primary / General Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: Primary / General Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: Primary / General Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	$1000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 2-1-94
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER

2-8-94
DATE PREPARED

FEC FORM 70-2 (12/92)