

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

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

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.		3. FEC Identification Number C C90005786
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800		
(c) City, State and ZIP Code Washington DC 20036-		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input 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

M M	/	D D	/	Y Y Y Y
08	/	24	/	2012

THROUGH

M M	/	D D	/	Y Y Y Y
08	/	28	/	2012

6. TOTAL CONTRIBUTIONS **0.00**

7. TOTAL INDEPENDENT EXPENDITURES **22800.00**

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 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
Patrick Collins	<i>Patrick Collins</i>	08/29/2012

[Electronically Filed]

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 08 / 24 / 2012
Mailing Address Attn: Dan McCourt 1110 West Kent Ave		Amount 2800.00 Transaction ID : AA7F04706461147DB9E5
City Missoula	State MT	
Zip Code 59801	Category/ Type	Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure Additional Business Reply Mail Postage		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 772600.93		

Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 08 / 28 / 2012
Mailing Address Attn: Dan McCourt 1110 West Kent Ave		Amount 20000.00 Transaction ID : A7FB1641FB11548D2A72
City Missoula	State MT	
Zip Code 59801	Category/ Type	Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure ESTIMATE: Additional Business Reply Mail Payment		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 792600.93		

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	22800.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	22800.00
(carry total from last page forward to Line 7)		