

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) ☐ 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? ☐ Yes ☐ 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

/ /
 THROUGH
 / /

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES

17320.68

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

[Electronically Filed]

Patrick Collins

Patrick Collins

10/23/2012

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 EXPENDITURESPAGE 2 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee Summit Property Management, LLC		Date MM / DD / YYYY 10 / 22 / 2012	
Mailing Address 500 N. Higgins, #208		Amount 1600.00	
City Missoula	State MT	Zip Code 59807	
Purpose of Expenditure Missoula Office Rent		Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 1086883.18		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group		Date MM / DD / YYYY 10 / 22 / 2012	
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 3600.00	
City Alexandria	State VA	Zip Code 22311	
Purpose of Expenditure Chase Postcard 1		Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 1086883.18		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee ERCS, LLC		Date MM / DD / YYYY 10 / 22 / 2012	
Mailing Address P.O. Box 21254		Amount 1300.00	
City Billings	State MT	Zip Code 59104	
Purpose of Expenditure Billings Office Rent		Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 1086883.18		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		6500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee CenturyLink		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address P.O. Box 29040		Amount 430.68
City Phoenix	State AZ	Zip Code 85038
Purpose of Expenditure Phone and Internet	Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: ☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought 1086883.18		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____
Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 1110 W Kent Ave		Amount 5000.00
City Missoula	State MT	Zip Code 59801-6614
Purpose of Expenditure Additional Business Reply Mail Payment	Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: ☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought 1086883.18		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____
Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 4490.00
City Alexandria	State VA	Zip Code 22311
Purpose of Expenditure Chase Postcard 2	Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: ☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought 1086883.18		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____
(a) SUBTOTAL of Itemized Independent Expenditures.....		9920.68
(b) SUBTOTAL of Unitemized Independent Expenditures.....		
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee Carson Pfingston		Date MM / DD / YYYY 10 / 22 / 2012	
Mailing Address P.O. Box 175		Amount 900.00	
City Billings	State MT	Zip Code 59103-0175	
Purpose of Expenditure Monthly Travel Stipend		Category/ Type	Office Sought: ☐ House ☒ Senate ☐ President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 1086883.18		Disbursement For: ☐ Primary ☒ General ☐ Other (specify) _____	

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

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

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

(a) SUBTOTAL of Itemized Independent Expenditures.....	900.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	17320.68