



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**True Companies Responsible Government 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="2014"/>	<input type="text" value="5417.85"/>	<input type="text" value="5417.85"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2432.85"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="885.00"/>	<input type="text" value="9900.00"/>
(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="3317.85"/>	<input type="text" value="15317.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3100.00"/>	<input type="text" value="15100.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="217.85"/>	<input type="text" value="217.85"/>
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

**True Companies Responsible Government Committee**

Report Covering the Period: From:  /  /  To:  /  /

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).....	795.00	8170.00
(ii) Unitemized .....	90.00	1730.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	885.00	9900.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	885.00	9900.00
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))..... ▶	885.00	9900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	885.00	9900.00

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2000.00	2000.00
29. Other Disbursements .....	1100.00	3100.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	3100.00	15100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3100.00	15100.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	885.00	9900.00
34. Total Contribution Refunds (from Line 28(d)) .....	2000.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	-1115.00	7900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)  
**A. Mr. Roger Barton**

Mailing Address 1019 Surrey Ct.

City Casper State WY Zip Code 82609

FEC ID number of contributing federal political committee. **C**

Name of Employer True Oil LLC Occupation Chief Geologist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : SA11AI.6221**

Amount of Each Receipt this Period  
**120.00**

Payroll deduction

Full Name (Last, First, Middle Initial)  
**B. Mr. Kevin Bowen**

Mailing Address 1337 South Jefferson St.

City Casper State WY Zip Code 82601

FEC ID number of contributing federal political committee. **C**

Name of Employer Equitable Oil Purchasing Co. Occupation Sales Rep.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : SA11AI.6222**

Amount of Each Receipt this Period  
**150.00**

Payroll deduction

Full Name (Last, First, Middle Initial)  
**C. Mr. Marlin Hanson**

Mailing Address 7101 Third Ave. East

City Williston State ND Zip Code 58801

FEC ID number of contributing federal political committee. **C**

Name of Employer Black Hills Trucking, Inc. Occupation Terminal Superintendent

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : SA11AI.6224**

Amount of Each Receipt this Period  
**75.00**

Payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **345.00**

**TOTAL** 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 10
<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

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NAME OF COMMITTEE (In Full)  
**True Companies Responsible Government Committee**

**A. Mr. Paul Kunz**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 282

City Moorcroft	State WY	Zip Code 82721
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FEC ID number of contributing federal political committee. **C**

Name of Employer Eighty-Eight Oil LLC	Occupation Field Representative
------------------------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2014

**Transaction ID : SA11AI.6226**

Amount of Each Receipt this Period  

60.00
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Payroll deduction

**B. Ms JoAnn True**  
Full Name (Last, First, Middle Initial)

Mailing Address 4075 Placid Dr.

City Casper	State WY	Zip Code 82604
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FEC ID number of contributing federal political committee. **C**

Name of Employer True Oil LLC	Occupation Geologist
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2014

**Transaction ID : SA11AI.6228**

Amount of Each Receipt this Period  

120.00
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Payroll deduction

**C. Mr. Shane True**  
Full Name (Last, First, Middle Initial)

Mailing Address 4075 Placid Dr.

City Casper	State WY	Zip Code 82604
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FEC ID number of contributing federal political committee. **C**

Name of Employer True Oil LLC	Occupation Geologist
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2014

**Transaction ID : SA11AI.6229**

Amount of Each Receipt this Period  

60.00
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Payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>240.00</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: PAGE 8 OF 10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**True Companies Responsible Government Committee**

**A. Mr. Scott Wells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 653 Grant Ave.  
 City Casper State WY Zip Code 82601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer True Oil LLC Occupation Internal Auditor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 27 / 2014  
**Transaction ID : SA11AI.6230**  
 Amount of Each Receipt this Period 90.00  
 Payroll deduction

**B. Mr. Ken White Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1117 South Oakcrest  
 City Casper State WY Zip Code 82601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer True Oil LLC Occupation Treasurer & Human Resources Mgr.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 27 / 2014  
**Transaction ID : SA11AI.6231**  
 Amount of Each Receipt this Period 120.00  
 Payroll deduction

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.00
<b>TOTAL</b> This Period (last page this line number only).....▶	795.00

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

### A. Beauprez for Colorado

Mailing Address PO Box 727

City Lafayette State CO Zip Code 80026

Purpose of Disbursement  
Refund of Colorado gubernatorial campaign contribution

Candidate Name  
**Bob Beauprez**

Office Sought:  House  Senate  President  
State: CO District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2014

Transaction ID : SB28C.6232

Amount of Each Disbursement this Period

2000.00
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### B.

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

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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### 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

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

2000.00
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2000.00
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**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**True Companies Responsible Government Committee**

Full Name (Last, First, Middle Initial)

**A. Bob Beauprez**

Mailing Address PO Box 727

City Lafayette State CO Zip Code 80026

Purpose of Disbursement  
Colorado gubernatorial campaign contribution

011

Category/  
Type

Candidate Name

**Bob Beauprez**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2014			

**Transaction ID : SB29.6234**

Amount of Each Disbursement this Period

1100.00
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Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

1100.00
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**TOTAL** This Period (last page this line number only)..... ▶

1100.00
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