

**FEC FORM 3X**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2022 JAN 13 PM 2:08  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. **12FE4M5**  
Montanans for Limited Government

ADDRESS (number and street) P.O. Box 1154  
 Check if different than previously reported. (ACC) Helena MT 59847-1154

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

**CC0563155**

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |
- Election on   /   /         in the State of

- (d) 30-Day Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|
- Election on   /   /       in the State of

5. Covering Period        through

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 Kathryn Kay

Signature of Treasurer Kathryn Kay Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

NON-PROFIT ORGANIZATION

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

*Montanans for Limited Government*

Report Covering the Period: From:

*10* / *01* / *2021*

To:

*12* / *31* / *2021*

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <i>2021</i>  |                         | <i>10,143.52</i>                  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <i>11,706.06</i>        |                                   |
| (c) Total Receipts (from Line 19).....   | <i>3,500.00</i>         | <i>4,085.00</i>                   |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....      | <i>12,056.06</i>        | <i>14,228.52</i>                  |
| 7. Total Disbursements (from Line 31).....   | <i>2,646.00</i>         | <i>3,437.06</i>                   |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                 | <i>11,791.46</i>        | <i>11,791.46</i>                  |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | <i>0</i>                |                                   |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | <i>0</i>                |                                   |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
1050 First Street, N.E.  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

NON-FEDERAL CAMPAIGN COMMUNICATIONS

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

*Montanans for Limited Government*

Report Covering the Period: From:

*MM DD YYYY*  
*10 01 2021*

To:

*MM DD YYYY*  
*12 31 2021*

**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).....

*3,500.00*

*4,085.00*

(ii) Unitemized.....

*0*

*0*

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

*3,500.00*

*4,085.00*

(b) Political Party Committees.....

*0*

*0*

(c) Other Political Committees (such as PACs).....

*0*

*0*

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

*3,500.00*

*4,085.00*

12. Transfers From Affiliated/Other Party Committees.....

*0*

*0*

13. All Loans Received.....

*0*

*0*

14. Loan Repayments Received.....

*0*

*0*

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

*0*

*0*

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

*0*

*0*

17. Other Federal Receipts (Dividends, Interest, etc.).....

*0*

*0*

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

*0*

*0*

(b) Levin Funds (from Schedule H5).....

*0*

*0*

(c) Total Transfers (add 18(a) and 18(b))..

*0*

*0*

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

*3,500.00*

*4,085.00*

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

*3,500.00*

*4,085.00*

NON-FEDERAL CONTRIBUTION

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

**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 .....  |        |          |
| (ii) Non-Federal Share.....  | 264.06 | 3,437.06 |
| (b) Other Federal Operating Expenditures .....   |        |          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 264.06 | 3,437.06 |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0      | 0        |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0      | 0        |
| 24. Independent Expenditures (use Schedule E) .....  | 0      | 0        |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0      | 0        |
| 26. Loan Repayments Made.....  | 0      | 0        |
| 27. Loans Made.....  | 0      | 0        |
| 28. Refunds of Contributions To:   |        |          |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0      | 0        |
| (b) Political Party Committees .....   | 0      | 0        |
| (c) Other Political Committees (such as PACs).....   | 0      | 0        |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0      | 0        |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0      | 0        |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |        |          |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |        |          |
| (i) Federal Share .....  | 0      | 0        |
| (ii) "Levin" Share.....  | 0      | 0        |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0      | 0        |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0      | 0        |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 264.06 | 3,437.06 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 264.06 | 3,437.06 |

NON-FEDERAL DONATIONS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/<br>Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 350.00                        | 4,085.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0                             | 0                                 |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 350.00                        | 4,085.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 2,640.06                      | 3,437.06                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....                | 0                             | 0                                 |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 2,640.06                      | 3,437.06                          |

NON-FEDERAL CAMPAIGN FINANCIAL DISBURSEMENTS

**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                        | OF |
| <input 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)  
**Montenans for Limited Government**

|   |                    |   |
|---|--------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>A. <b>Mehaffie, Nancy</b>  |                    | Date of Receipt<br><b>11/08/2021</b>                |
| Mailing Address<br><b>18 Farrenkopf Ln.</b>   |                    | Amount of Each Receipt this Period<br><b>200.00</b> |
| City<br><b>Thompson Falls</b>   | State<br><b>MT</b> |   |
| Zip Code<br><b>59873</b>  |                    | Memo Item<br><input type="checkbox"/>               |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                    |   |
| Name of Employer (for Individual)<br><b>NIA</b>   |                    | Aggregate Year-to-Date<br><b>200.00</b>             |
| Occupation (for Individual)<br><b>Retired</b>   |                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>Promote PAC</b> |                    |   |

|   |                    |   |
|---|--------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>B. <b>Johnson, E. Andy</b>   |                    | Date of Receipt<br><b>12/13/2021</b>                |
| Mailing Address<br><b>3470 Quincy St.</b>   |                    | Amount of Each Receipt this Period<br><b>100.00</b> |
| City<br><b>Butte</b>  | State<br><b>MT</b> |   |
| Zip Code<br><b>59701</b>  |                    | Memo Item<br><input type="checkbox"/>               |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                    |   |
| Name of Employer (for Individual)<br><b>NIA</b>   |                    | Aggregate Year-to-Date<br><b>100.00</b>             |
| Occupation (for Individual)<br><b>Retired</b>   |                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>Promote PAC</b> |                    |   |

|   |                    |  |
|---|--------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>C. <b>Young, Virginia</b>  |                    | Date of Receipt<br><b>12/17/2021</b>               |
| Mailing Address<br><b>621 E. Raymond</b>  |                    | Amount of Each Receipt this Period<br><b>50.00</b> |
| City<br><b>Glendive</b>   | State<br><b>MT</b> |  |
| Zip Code<br><b>59330</b>  |                    | Memo Item<br><input type="checkbox"/>              |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                    |  |
| Name of Employer (for Individual)<br><b>Key Janitorial Services</b>   |                    | Aggregate Year-to-Date<br><b>50.00</b>             |
| Occupation (for Individual)<br><b>Janitorial Service</b>  |                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>Promote PAC</b> |                    |  |

|   |               |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶           | <b>350.00</b> |
| TOTAL This Period (last page this line number only).....▶ | <b>350.00</b> |

NONPROFIT CORPORATION

**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)

PAGE OF

|                              |                              |                              |                             |                              |
|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)

Montanans for Limited Government

Full Name (Last, First, Middle Initial)

A. Kent, Edna

Date of Disbursement

10 / 29 / 2021

Mailing Address

P.O. Box 1443

FEC Identification Number

C

City

Florence

State

MT

Zip Code

59833

Amount of Each Disbursement this Period

252.00

Purpose of Disbursement

Reimb. for 3 mos. phone

Candidate Name

N/A

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Date of Disbursement

11 / 10 / 2021

Mailing Address

1340 Poydras St. Suite 1770

FEC Identification Number

C

City

New Orleans

State

LA

Zip Code

70112

Amount of Each Disbursement this Period

8.30

Purpose of Disbursement

Fee for accepting online donation

Candidate Name

N/A

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot

Date of Disbursement

12 / 15 / 2021

Mailing Address

1340 Poydras St. Suite 1770

FEC Identification Number

C

City

New Orleans

State

LA

Zip Code

70112

Amount of Each Disbursement this Period

4.30

Purpose of Disbursement

Fee for accepting online donation

Candidate Name

N/A

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Memo Item

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

264.60

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

264.60

000 1107  
L010, 447 59847

Federal Election Commission  
1050 First St, NE  
Washington D.C. 20463

RECEIVED  
FEC MAIL CENTER  
2022 JAN 13 AM 2:07



NONN1 041 N4 1 0M 00N0N00000



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

|  |   |
|--|---|
| <input type="checkbox"/> Hand Delivered                                    | Date of Receipt                                     |
| <input checked="" type="checkbox"/> USPS First Class Mail                  | Date of Receipt                                     |
| Postmarked<br><i>N/A</i>   | <i>1/13/22</i>                                      |
| <input type="checkbox"/> USPS Registered/Certified                         | Postmarked (R/C)                                    |
| <input type="checkbox"/> USPS Priority Mail                                | Postmarked  |
| <input type="checkbox"/> USPS Priority Mail Express                        | Postmarked  |
| <input type="checkbox"/> Postmark Illegible                                |   |
| <input type="checkbox"/> No Postmark                                       |   |
| <input type="checkbox"/> Overnight Delivery Service (Specify):             | Shipping Date                                       |
|  | Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt                                     |
| <input type="checkbox"/> Received from Senate Public Records Office        | Date of Receipt                                     |
| <input type="checkbox"/> Received from Electronic Filing Office            | Date of Receipt                                     |
| <input type="checkbox"/> Other (Specify):                                  | Date of Receipt or Postmarked                       |

*SPM*  
 PREPARER *1/24/22*  
 (3/2015) DATE PREPARED

NON-FUNCTIONAL COMPONENT