

SEP 07 1994 CERTIFIED MAIL

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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

PAT

September 7, 1994

Donnald K. Anderson, Clerk of the House
U.S. House of Representatives
Office of Records and Registration
1036 Longworth Office Building
Washington, DC 20515-6612

Re: Statement of Organization for
Montanans for Mudd/Williams
and
Congressman Pat Williams' Campaign
a lot of folks for Pat Williams
FEC I.D. No. C00253344
Amendment to the Statement of Candidacy

Dear Mr. Anderson:

Enclosed is the statement of organization for the committee Montanans for Mudd/Williams. This committee will function as a Joint Fundraising Representative for a fundraiser being held by "a lot of folks for Pat Williams" and "Jack Mudd for U.S. Senate". Also enclosed please find an amendment to Pat Williams' statement of candidacy which designates "Montanans for Mudd/Williams" as an authorized committee to receive and expend funds on behalf of his candidacy.

Please inform us when Montanans for Mudd/Williams is assigned an FEC I.D. Number.

If you have any questions regarding these two documents, either I or Fred Sargeson can be reached at (406) 443-7488.

Sincerely,



Beth Sastre, Treasurer
Montanans for Mudd/Williams



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STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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1. (a) NAME OF COMMITTEE IN FULL <u>Montanans for Mudd/Williams</u>		2. DATE OF THE CLERK'S FILING <u>U.S. HOUSE OF REPRESENTATIVES</u>	
(b) Number and Street Address <u>P.O. Box 1994</u>		3. FEC IDENTIFICATION NUMBER	
(c) City, State and ZIP Code <u>Helena, MT 59624</u>		4. IS THIS STATEMENT AN AMENDMENT? ☐ YES ☒ NO	

5. TYPE OF COMMITTEE (Check one)

- ☐ (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- ☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | | | | |
|-------------------|-----------------------------|---------------|----------------|
| Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (e) The committee is a separate segregated fund.
- ☒ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
A lot of folks for Pat Williams	P.O. Box 1994, Helena MT 59624	Montanans for Mudd/Williams is fundraising representative for a joint fundraiser.
Jack Mudd for U.S. Senate	P.O. Box 9060, Helena MT 59604	

Type of Connected Organization

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records

Full Name	Mailing Address	Title or Position
Beth Satre	P.O. Box 1994 Helena, MT 59624	Treasurer

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Beth Satre	P.O. Box 1994 Helena, MT 59624	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
First Security Bank	1721 11th Ave Helena, MT 59601

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

Beth Satre

Beth Satre

9-6-94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-376-3120

FEC FORM 1
(revised 4/87)

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.

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and Registration

DATE OF RECEIPT

☐ Received from the Senate Office of Public
Records

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and/or DATE OF RECEIPT

JML

PREPARER

9-13-94

DATE PREPARED