

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ZINKE FOR MT-01

ADDRESS (number and street)

PO BOX 30844

Check if different
than previously
reported. (ACC)

BETHESDA

MD

20824

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00798454

3. IS THIS
REPORT☐ NEW
(N)

OR

☐ AMENDED
(A)

STATE ▼ DISTRICT

MT

01

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)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

04

D D /

01

Y Y Y Y /

2023

through

M M /

04

D D /

30

Y Y Y Y /

2023

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

Martin, Steven, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Martin, Steven, , ,

[Electronically Filed]

Date

M M /

05

D D /

09

Y Y Y Y /

2023

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name
ZINKE FOR MT-01

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2023

To:

M M / D D / Y Y Y Y
04 / 30 / 2023

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3102.71	3102.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3102.71	3102.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

ZINKE FOR MT-01

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2023

To:

MM / DD / YYYY
04 / 30 / 2023**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)15. OTHER RECEIPTS
(Dividends, Interest, etc.)16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3102.71	3102.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	517.34	517.34
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3620.05	3620.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3086.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	533.34
25. SUBTOTAL (add Line 23 and Line 24).....	3620.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3620.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d
☒ 12	☐ 13a	☐ 13b	☐ 14
			☐ 15

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)
ZINKE FOR MT-01

A. Full Name (Last, First, Middle Initial) TAKE BACK THE HOUSE 2022			Date of Receipt M M / D D / Y Y Y Y Y 04 / 21 / 2023	
Mailing Address PO BOX 30844			Transaction ID : SA12.4207	
City	State	Zip Code		
BETHESDA	MD	20824		
FEC ID number of contributing federal political committee.		C C00766782	Amount of Each Receipt this Period 533.34	
Name of Employer		Occupation		
Receipt For: 2022 ☐ Primary ☒ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 533.34	☐ Memo Item Final Transfer of 2022 General Funds - All Donors Previously Disclosed	

B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period	
Name of Employer		Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼	☐ Memo Item	

C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period	
Name of Employer		Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼	☐ Memo Item	

SUBTOTAL of Receipts This Page (optional)..... ▶	533.34
TOTAL This Period (last page this line number only)..... ▶	533.34

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
ZINKE FOR MT-01

Full Name (Last, First, Middle Initial)

A. CFS Compliance

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2023

FEC Identification Number

C

Amount of Each Disbursement this Period

3092.71

Transaction ID : SB17.4202

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3092.71

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

3092.71

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☒ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
ZINKE FOR MT-01

Full Name (Last, First, Middle Initial) A. ZINKE FOR CONGRESS				Date of Disbursement MM / DD / YYYY 04 / 26 / 2023	
Mailing Address PO BOX 1597					
City HELENA		State MT	Zip Code 59624		FEC Identification Number C C00778159
Purpose of Disbursement Transfer to Affiliated Committee 2022 Funds			Category/ Type 008		Amount of Each Disbursement this Period 517.34
Candidate Name ZINKE, RYAN K, , ,		Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2022 ☐ Primary ☒ General ☐ Other (specify) ▼	
State: MT District: 01				Transaction ID : SB18.4200 ☐ Memo Item	
Full Name (Last, First, Middle Initial) B.				Date of Disbursement MM / DD / YYYY	
Mailing Address					
City		State	Zip Code		FEC Identification Number C
Purpose of Disbursement			Category/ Type		Amount of Each Disbursement this Period
Candidate Name		Office Sought: ☐ House ☐ Senate ☐ President		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	
State: District:				Memo Item	
Full Name (Last, First, Middle Initial) C.				Date of Disbursement MM / DD / YYYY	
Mailing Address					
City		State	Zip Code		FEC Identification Number C
Purpose of Disbursement			Category/ Type		Amount of Each Disbursement this Period
Candidate Name		Office Sought: ☐ House ☐ Senate ☐ President		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	
State: District:				Memo Item	
SUBTOTAL of Disbursements This Page (optional).....▶				517.34	
TOTAL This Period (last page this line number only).....▶				517.34	