

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

OPERATIONS CENTER

2008 OCT 20 05:10:36

1. NAME OF COMMITTEE (In full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4MS

MOUNTAIN STATES POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

610 Transylvania Court

Check if different than previously reported. (ACC)

Helena

MT

1596011

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000395494

3. IS THIS REPORT

NEW

OR

AMENDED

(A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (Y1)

(a) Quarterly Reports:

Apr 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)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

09/01/2004

through

09/30/2004

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

MONA F. JAMISON

Signature of Treasurer

Mona F. Jamison

Date

10/14/2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §487g.

Office Use Only

FEC FORM 3X (Rev. 02/2003)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

MOUNTAIN STATES POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

07' 01' 2004

To:

09' 30' 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2004</u>		<u>00</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>475200</u>	
(c) Total Receipts (from Line 19).....	<u>107200</u>	<u>582400</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>582400</u>	<u>582400</u>
7. Total Disbursements (from Line 31).....	<u>300000</u>	<u>300000</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>282400</u>	<u>282400</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>00</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>00</u>	

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 20468

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

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MOUNTAIN STATES POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

07' 01' 2004

To:

09' 30' 2004

I. Receipts

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individual/Persons Other

Than Political Committees

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

1,072.00

5,824.00

(ii) Unitemized.....

00

00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1,072.00

5,824.00

(b) Political Party Committees.....

00

00

(c) Other Political Committees

(such as PACs).....

00

00

(d) Total Contributions (add Lines

11(a)(ii), (b), and (c)) (Carry

Totals to Line 33, page 5)..... ▶

1,072.00

5,824.00

12. Transfers From Affiliated/Other

Party Committees.....

00

00

13. All Loans Received.....

00

00

14. Loan Repayments Received.....

00

00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

00

00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

00

00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

00

00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedules H3).....

00

00

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

00

00

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

00

00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

1,072.00

5,824.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

**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	00	00
(ii) Non-Federal Share	00	00
(b) Other Federal Operating Expenditures	1500	1500
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1500	1500
22. Transfers to Affiliated/Other Party Committees	00	00
23. Contributions to Federal Candidates/Committees and Other Political Committees	300000	300000
24. Independent Expenditures (see Schedule E)	00	00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (see Schedule F)	00	00
26. Loan Repayments Made	00	00
27. Loans Made	00	00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	00	00
(b) Political Party Committees	00	00
(c) Other Political Committees (such as PACs)	00	00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	00	00
29. Other Disbursements	00	00
30. Federal Election Activity (2 U.S.C. §431(2))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	00	00
(ii) "Levin" Share	00	00
(b) Federal Election Activity Paid Entirely With Federal Funds	00	00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	00	00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	301500	301500
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	301500	301500

**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) .....	10,720.00	58,240.00
34. Total Contributions Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10,720.00	58,240.00
36. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b)) .....	1,500.00	1,500.00
37. Offsets to Operating Expenditures (from Line 16, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1,500.00	1,500.00

**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)

<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

PAGE 7 OF 7

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)  
**MOUNTAIN STATES POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
~~EDWIN A.~~ **B. CONSKY, EDWIN A.**

Mailing Address  
**3700 E. 3550 SOUTH**

City **SALT LAKE CITY** State **UTAH** Zip Code **84109**

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date  
**100.00**

Date of Receipt  
**07/13/2004**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**ZIMMER, DIANE**

Mailing Address  
**35 ALICE AVENUE**

City **MERRICK** State **N.Y.** Zip Code **11506**

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

Name of Employer: **G.E.** Occupation: **SALES - LONG TERM CARE**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date  
**25.00**

Date of Receipt  
**07/18/2004**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**WINSTON, TOBA**

Mailing Address  
**341 BLUE GROUSE LANE**

City **Stevensville** State **MT.** Zip Code **59870**

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

Name of Employer: \_\_\_\_\_ Occupation: **HOUSEWIFE**

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date  
**36.00**

Date of Receipt  
**07/02/2004**

Amount of Each Receipt this Period  
**36.00**

SUBTOTAL of Receipts This Page (optional) **161.00**

TOTAL This Period (see page this line number only) **161.00**

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

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

FOR LINE NUMBER: PAGE 2 OF 6

(check only one)

<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)  
**MOUNTAIN STATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
A. **LEVY MARTIN LO.**

Mailing Address  
**P.O. Box 4951**

City **SUN VALLEY** State **IDAHO** Zip Code **83353**

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

Name of Employer  
**WOOD RIVER JEWISH COMMUNITY** Occupation **RABBI**

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
**36.00**

Date of Receipt  
**07 23 2004**

Amount of Each Receipt this Period  
**36.00**

Full Name (Last, First, Middle Initial)  
B. **FRIEDLANDER, B.I.**

Mailing Address  
**P.O. BOX 1937**

City **SUN VALLEY** State **IDAHO** Zip Code **83353**

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

Name of Employer  
**VENTURE INSIGHTS GROUP** Occupation **CONSULTANT**

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
**25.00**

Date of Receipt  
**07 23 2004**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
C. **FRIEDLANDER, MARGERY S.**

Mailing Address  
**P.O. BOX 1937**

City **SUN VALLEY** State **IDAHO** Zip Code **83353**

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

Name of Employer  
**Housewife**

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
**25.00**

Date of Receipt  
**07 23 2004**

Amount of Each Receipt this Period  
**25.00**

SUBTOTAL of Receipts This Page (optional) **86.00**

TOTAL This Period (last page line number only) **247.00**

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

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

FOR LINE NUMBER: PAGE 3 OF 5  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (in Full)  
**MOUNTAIN STATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
A. **GOLDBSTEIN, CLAUDIE**

Mailing Address  
**P.O. BOX 5534**

City **Ketchum, IDAHO** State **IDAHO** Zip Code **83340**

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

Name of Employer: **SELF** Occupation: **ANTIQUES DEALER**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date **25.00**

Date of Receipt  
**07 23 2004**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
B. **HELZEL, REBEKAH**

Mailing Address  
**P.O. BOX 6697**

City **Ketchum, IDAHO** State **IDAHO** Zip Code **83340**

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

Name of Employer: Occupation:

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date **50.00**

Date of Receipt  
**07 23 2004**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
C. **HELZEL, LAWRENCE**

Mailing Address  
**P.O. BOX 6697**

City **Ketchum, IDAHO** State **IDAHO** Zip Code **83340**

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

Name of Employer: Occupation:

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date **50.00**

Date of Receipt  
**07 23 2004**

Amount of Each Receipt this Period  
**50.00**

SUBTOTAL of Receipts this Page (optional) **125.00**

TOTAL This Period (last page this line number only) **392.00**



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

Use separate schedule(s) for each category of the Detailed Statement Page	FOR LINE NUMBER: (check only one)	PAGE 4 OF 5
	<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)  
**MOUNTAIN STATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. OPPENHEIMER, ARTHUR F.</b>		Date of Receipt <b>08 02 2004</b>
Mailing Address <b>877 W. MAIN STREET</b>		Amount of Each Receipt this Period <b>100.00</b>
City <b>BOISE, IDAHO</b>	Zip Code <b>83702</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Oppenheim</b>	Occupation <b>CHAIRMAN, CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>100.00</b>	

Full Name (Last, First, Middle Initial) <b>B. FRIEDMAN, SAMUEL B.</b>		Date of Receipt <b>08 20 2004</b>
Mailing Address <b>5171 BROOKVIEW DRIVE</b>		Amount of Each Receipt this Period <b>50.00</b>
City <b>Boynton Beach, Fla.</b>	Zip Code <b>33437</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation <b>Retired</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>50.00</b>	

Full Name (Last, First, Middle Initial) <b>C. FRIEDMAN, GERALDINE</b>		Date of Receipt <b>08 20 2004</b>
Mailing Address <b>5171 BROOKVIEW DRIVE</b>		Amount of Each Receipt this Period <b>50.00</b>
City <b>Boynton Beach, Fla.</b>	Zip Code <b>33437</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation <b>Retired</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>50.00</b>	

SUBTOTAL of Receipts This Page (optional)	<b>200.00</b>
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 LANE NUMBER: PAGE 5 OF 5

<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"/> 17

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NAME OF COMMITTEE (in Full)  
**MOUNTAIN STATES POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**LANGES, Joshua H.**

Mailing Address  
**740 West 232nd Street**

City **Riverdale** State **NY** Zip Code **10463**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  Other (specify) \_\_\_\_\_

Aggregate Year-to-Date **500.00**

Date of Receipt **09/03/2004**

Amount of Each Receipt this Period **500.00**

**B.** 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 \_\_\_\_\_

**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 \_\_\_\_\_

SUBTOTAL of Receipts This Page (optional) **500.00**

TOTAL This Period (last page this line number only) **672.00**

**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"/> 21a	<input type="checkbox"/> 22	<input checked="" 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"/> 29a	<input type="checkbox"/> 29b	<input type="checkbox"/> 30a

Any information implied 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)

**MOUNTAIN STATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Stephanie Hersey**

Date of Disbursement

**01/20/2004**

Mailing Address

**3300 S. HOLLY AVENUE**

City

**SIOUX FALLS, S.D.**

State

Zip Code

**57104**

Purpose of Disbursement

Amount of Each Disbursement this Period

**500.00**

Candidate Name

**Stephanie Hersey**

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **S.Dak.**

District: **At Large**

Full Name (Last, First, Middle Initial)

**B. EARL POMEROY**

Date of Disbursement

**01/06/2004**

Mailing Address

**EARL POMEROY FOR CONGRESS**

City

**PO BOX 746**

**BISMARCK, ND**

State

Zip Code

**58502-0746**

Purpose of Disbursement

Amount of Each Disbursement this Period

**500.00**

Candidate Name

**EARL POMEROY**

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **N.Dak.**

District: **At Large**

Full Name (Last, First, Middle Initial)

**C. Barbara Rubin**

Date of Disbursement

**01/06/2004**

Mailing Address

**100 N. CENTER ST.**

City

**CORNER, WYOMING**

State

Zip Code

**82601**

Purpose of Disbursement

Amount of Each Disbursement this Period

**500.00**

Candidate Name

**Barbara Rubin**

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **WYOMING**

District: **At Large**

SUBTOTAL of Disbursements This Page (optional)

**1500.00**

TOTAL This Period (last page (see line number only)

**3000.00**

**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"/> 21a	<input type="checkbox"/> 22	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30a

PAGE 1 OF 2

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NAME OF COMMITTEE (in full)  
**MOUNTAIN STATES POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial): Mike Simpson

Date of Disbursement: 07/15/2004

Residing Address: 490 Memorial Drive, Suite 103

City: Idaho Falls, Idaho State: Idaho Zip Code: 83402

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: Mike Simpson Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: ID District: 2nd

Amount of Each Disbursement this Period: 500.00

**B.** Full Name (Last, First, Middle Initial): Jim Matheson

Date of Disbursement: 07/15/2004

Residing Address: 677 South 200 West, Suite A

City: SALT LAKE CITY, Utah State: Utah Zip Code: 84101

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: JIM Matheson Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: Utah District: 2nd

Amount of Each Disbursement this Period: 500.00

**C.** Full Name (Last, First, Middle Initial): Rob Bishop

Date of Disbursement: 07/15/2004

Residing Address: 25 W. Parrish Lane

City: Centerville, Utah State: Utah Zip Code: 84014

Purpose of Disbursement: \_\_\_\_\_

Candidate Name: Rob Bishop Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: Utah District: 1

Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional): 1500.00

TOTAL This Period (last page this line number only): 500.00

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 type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 10-15-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<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
<i>Jef</i> PREPARER	10-20-04 DATE PREPARED