

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

1. NAME OF COMMITTEE (in full)

RECEIVED  
FEC MAIL ROOM

2002 JUL 20 A 11:18

Nancy Keenan For Montana

ADDRESS (number and street)  Check if different than previously reported.  
502 Ivy Circle

CITY, STATE and ZIP CODE STATE/DISTRICT  
Alexandria, VA 22302

2. FEC IDENTIFICATION NUMBER  
C00345736

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

## 4. TYPE OF REPORT

- April 15 Quarterly Report  12 Day Pre-Election Report for the \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- July 15 Quarterly Report  30-Day Post-Election Report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_
- October 15 Quarterly Report  Termination Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

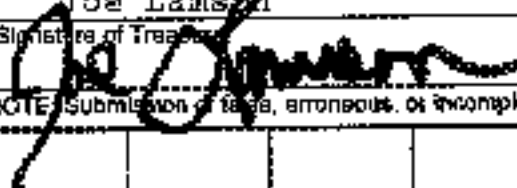
## SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period <u>01/01/2002</u> through <u>06/30/2002</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$12,850.00	\$12,850.00
(b) Total Contribution Refunds (From Line 20(d))	\$18,851.63	\$18,851.63
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$-8,001.63	\$-8,001.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$0.00	\$0.00
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$0.00	\$0.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$4,050.21	
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)	\$25,768.00	

For further information:  
Federal Election Commission  
560 E Street NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

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  
Joe Lamsal

Signature of Treasurer  Date 7/16/02

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

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**Detailed Summary Page**  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full) Nancy Keenan For Montana	Report Covering the Period: From: 01/01/2002 To: 06/30/2002	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$12,850.00	
(ii) Unitemized	\$0.00	
(iii) Total of contributions from Individuals	\$12,850.00	\$12,850.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	\$12,850.00	\$12,850.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	\$0.00	\$0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate	\$17,016.00	\$17,016.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$17,016.00	\$17,016.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	\$0.00	\$0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	\$0.00	\$0.00
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	\$29,866.00	\$29,866.00
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b>	\$0.00	\$0.00
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	\$0.00	\$0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate	\$7,500.00	\$7,500.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$7,500.00	\$7,500.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees	\$18,251.63	\$18,251.63
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$18,251.63	\$18,251.63
<b>21. OTHER DISBURSEMENTS</b>	\$0.00	\$0.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	\$28,351.63	\$28,351.63
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		\$535.84
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		\$29,866.00
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>		\$30,401.84
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)</b>		\$28,351.63
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>		\$4,050.21

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
detailed mailing pagePAGE 1 OF 2  
FOR LINE NUMBER  
11(a)(1)

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)  
Nancy Keenan For Montana

A. Full Name, Mailing Address and Zip Code Michael Liebelson 9215 Bridger Canyon Rd Bozeman, MT 59715-	Name of Employer Decon Holdings, LLC Occupation Manager	Date (month, day, year) 04/04/2002	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
B. Full Name, Mailing Address and Zip Code Tom Scott PO Box 30876 Billings, MT 59107-	Name of Employer First Interstate Bank Occupation Executive	Date (month, day, year) 03/10/2002	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code Patricia Cobber 33 Hawk Dr PO Box 3425 Great Falls, MT 59403-	Name of Employer Self Occupation Attorney	Date (month, day, year) 03/15/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code Lucy Bayton 531 Power St Helena, MT 59601-4115	Name of Employer Self Occupation Veterinarian	Date (month, day, year) 03/19/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code Mark O'Keefe 531 Power St Helena, MT 59601-	Name of Employer State of Montana Occupation State Auditor	Date (month, day, year) 03/17/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code J. J. Prill 194 Sussex St San Francisco, CA 94131-2935	Name of Employer Self Occupation Housewife	Date (month, day, year) 04/17/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code Raymond Prill 194 Sussex St San Francisco, CA 94131-	Name of Employer Gordon-Prill Drapes Occupation President	Date (month, day, year) 04/17/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)

\$7,000.00

TOTAL This Period (last page this line number only)

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate subtotals for each category of the detailed Summary Page.	PAGE	OF
	3	7
FOR LINE NUMBER		
11(a) (i)		

Any information received 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)  
Nancy Keenan For Montana

A. Full Name, Mailing Address and Zip Code William Crivello 711 North Rodney Helena, MT 59601-	Name of Employer Crawford and Company Occupation Manager	Date (month, day, year) 03/23/2002	Amount of Each Receipt this Period 850.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
B. Full Name, Mailing Address and Zip Code Donna Stone 1780 Green Bay Rd Ste 202 Highland Park, IL 60035-	Name of Employer Occupation Homemaker	Date (month, day, year) 03/26/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code Thomas Stone 1780 Green Bay Rd Ste 202 Highland Park, IL 60035-	Name of Employer Saul, Stone & Co. Occupation CEO	Date (month, day, year) 03/26/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	-1,000.00	
D. Full Name, Mailing Address and Zip Code Tarcy Pelster 201 East 79th St Apt 17F New York, NY 10021-0844	Name of Employer Self Occupation Attorney	Date (month, day, year) 03/23/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code William Pelster 201 East 79th St Apt 17F New York, NY 10021-0844	Name of Employer Skadden Arps Occupation partner	Date (month, day, year) 03/11/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code Paul Brainerd 2033 First Ave Seattle, WA 98121-	Name of Employer Occupation Retired	Date (month, day, year) 03/10/2002	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)

\$5,850.00

TOTAL This Period (last page this line number only)

\$12,850.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
33a		

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)  
Nancy Keenan For Montana

A. Full Name, Mailing Address and Zip Code Nancy Keenan 502 Ivy Circle Alexandria, VA 22302-	Name of Employer Self	Date (month, day, year) 03/05/2002	Amount of Each Receipt this Period 17,016.00
	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 17,016.00		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)	\$17,016.00
TOTAL This Period (last page this line number only)	\$17,016.00

2012 RELEASE UNDER E.O. 14176

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

<small>(See separate schedules) for each category of the Detailed Summary Page</small>	PAGE	OF
	1	1
SCR LINE NUMBER 19a		

All information copied from such Reports and Statements may not be said or used by any person for the purpose of soliciting contributions or for nonpolitical purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Nancy Keenan For Montana

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Valley Bank 3030 North Montana Ave. Helena, MT 59601-	Repay Loan  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/18/2002	7,500.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period

THE OFFICE OF THE ATTORNEY GENERAL

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$7,500.00
<b>TOTAL</b> This Period (last page this line number only)	\$7,500.00

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

See separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 1 OF 3  
FOR LINE NUMBER  
20a

Any information copied from state records 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)

Nancy Keenan For Montana

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Roland 2800 1st Avenue North Great Falls, MT 59401-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/05/2002	1,000.00
Paul Brainerd 2033 First Ave Seattle, WA 98121-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/07/2002	1,000.00
Patricia Cotter 13 Hawk Dr PO Box 3425 Great Falls, MT 59403-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/07/2002	1,000.00
William Crivello 711 North Rodney Helena, MT 59601-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/07/2002	850.00
Wade Bahood 1016 West 5th St Missoula, MT 59711-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/03/2002	500.00
Lucy Dayton 531 Power St Helena, MT 59604-6115	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/05/2002	1,000.00
Richard Fields 590 Madison Ave 32nd Floor New York, NY 10022-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/07/2002	1,439.13

SUBTOTAL of Disbursements This Page (optional)

\$6,789.13

TOTAL This Period (last page this line number only)

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the detailed Summary Page	PAGE	OF
	2	3
FOR LINE NUMBER 20a		

All 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 your constituents.

## NAME OF COMMITTEE (In Full)

Nancy Keenan For Montana

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joachim Gfoeller 405 Park Ave 15th Floor New York, NY 10022-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	03/05/2002	1,000.00
Michael Liebelson 8215 Bridger Canyon Rd Borwman, MT 59715-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	03/07/2002	1,500.00
David Mock 9993 South 3100 East Sandy, UT 84092-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	03/05/2002	1,000.00
Mark O'Keefe 531 Power St Helena, MT 59601-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	03/15/2002	1,000.00
Terry Peister 201 East 79th St Apt 17F New York, NY 10021-0844	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	03/07/2002	1,000.00
William Peister 201 East 79th St Apt 17F New York, NY 10021-0844	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	03/05/2002	1,000.00
J. J. Brill 194 Sussex St San Francisco, CA 94131-2935	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)	03/05/2002	1,000.00

SUBTOTAL of Disbursements This Page (optional)

\$7,500.00

TOTAL This Period (last page this line number only)



## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the detailed summary page

PAGE 3 OF 3  
FOR LINE NUMBER 20a

Any information copied from these 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)  
Nancy Keenan For Montana

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Raymond Brill 194 Sussex St San Francisco, CA 94131-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/05/2002	1,000.00
Tom Scott PO Box 30876 Billings, MT 59107-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/05/2002	500.00
Farwell Smith PO Box 64 McLeod, MT 59062-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/05/2002	62.50
Donna Stone 1780 Green Bay Rd Ste 202 Highland Park, IL 60035-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/05/2002	1,000.00
Thomas Stone 1780 Green Bay Rd Ste 202 Highland Park, IL 60035-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/07/2002	1,000.00
Thomas Stone 1780 Green Bay Rd Ste 202 Highland Park, IL 60035-	Refund of Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/05/2002	1,000.00
		/ /	

SUBTOTAL of Disbursements This Page (optional)

54,562.50

TOTAL This Period (last page this line number only)

\$10,851.63

**SCHEDULE C**

**LOANS**

NAME OF COMMITTEE (In Full) Nancy Keenan For Montana			
A. Full Name, Mailing Address and ZIP Code of Loan Recipient Nancy Keenan 302 Ivy Circle Alexandria, VA 22302-	Original Amount of Loan \$25,766.00	Conclusive Payment To Date \$0.00	Balance Outstanding at Close of This Period \$25,766.00
Situation: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Interest: Date Entered 03/17/2001 Date Due 03/15/2001 Interest Rate _____ (rate) Secured (N)			
List All Endorsers or Guarantors (if any) to Item A			
Full Name, Mailing Address and Zip Code	None of Employer		
	Occupation		
	Amount Guaranteed (date listed by)		
	\$0,000,000		

<b>SUBTOTAL</b> This Period This Page (optional)	\$25,766.00
<b>TOTAL</b> This Period (last page this line number only)	\$25,766.00

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Federal Election Commission

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