FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Montana Democratic Party PO Box 802 ADDRESS (number and street) (Check if address is changed) Helena 59624 MTCITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address holly@campaigncompliance.net is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.montanademocrats.org (Check if address is changed) DATE 01 2024 C00010033 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) 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 FourStar, Lance, , Date 80 01 2024 Signature of Treasurer FourStar, Lance, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate info	rmation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign coinformation below.)	ommittee. (Complete the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	
Name of Candidate	
Party Committee:	
(d) X This committee is a STA (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization of	on line 6.) Its connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT committee. (i.e., nonconnected committee)	a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on li	ne 6.)
(g) This committee is an independent expenditure-only political committee (Super PA	AC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution	on accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses r committees/organizations, at least one of which is an authorized committee of a	-
(j) This committee collects contributions, pays fundraising expenses and disburses recommittees/organizations, none of which is an authorized committee of a federal	net proceeds for two or more political
Committees Participating in Joint Fundraiser	
1.	С

I	FEC Form 1 (Revised 0	2/2009)	Page 3
V	/rite or Type Committee Name		
	Montana Democ	ratic Party	
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
	Tester Victory Fund		
	Mailing Address	PO Box 802	
		1	
		Helena MT 5962	4 _
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
7.		fy by name, address (phone number optional) and position of the person in posse	ssion of committee
	books and records.		
	Giarraputo,	Holly, , ,	
	Full Name		
	Mailing Address	946 Bandmann Trl	
		Missoula MT 59802	2
	Title or Position -	CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	1 202	498 7123
	Comptroller	Telephone number	- 7123
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	name and address of
	Full Name FourStar, L	ance, , ,	
	of Treasurer	PO Pay 200	
	Mailing Address	PO Box 802	
		Helena	4
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	OIT A STATE A	ZIF CODE A
	Treasurer		442 - 9520

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposit xes or maintains funds.	s funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	First Interstate Bank	
Mailing Address	3502 Brooks	
	Missoula MT	59801
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	Amalgamated Bank	
Mailing Address	1825 K St., NW	
	Washington	20006
	CITY ▲ STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	Iraisina Ronrosontativo	or Leadershin DAC Snors
DNC State Party Vic		inaising Representative	
Mailing Address	430 S. Capitol St., SE		
	Washington	DC	20003
Deletienskin	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X Join for by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee × Join for by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management.	Affiliated Committee X Join fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee X Join for by by name, address (phone number – optional) CITY CITY CITY Cries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundrots Victory Fund	raising Representativ	e, or Leadership PAC Spons
Mailing Address	430 South Capitol St., SE		
Polision di la	Washington CITY ▲	DC STATE A	20003 ZIP CODE ▲
Relationship:	OII 1 =	01/112 =	211 0002 =
	Affiliated Committee X Joint fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
Connecte		Fundraising Represent	Leadership PAC Spo
Connected Agent: Identification		Fundraising Represent	Leadership PAC Spo
Connected Agent: Identification Full Name		Fundraising Represent	Leadership PAC Spo
Connected Agent: Identification Full Name		Fundraising Represent	Leadership PAC Spo
Connected Agent: Identification Full Name	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Spo
resignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Connected Pesignated Agent: Identification of Bank, pepository, etc.	city by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
resignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or make the control of the cont	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A
Connected Pesignated Agent: Identification of Bank, pepository, etc.	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A elephone Number the committee deposit	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.	. [FEC ID number	C
3.	. [FEC ID number	C
4.			FEC ID number	C
6. Name	e of Any Connected C	rganization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
Ha	arris Victory Fund			
	Mailing Address	430 SOUTH CAPITOL STREET SE		
		Washington	DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8. Desig	nated Agent: Identify	by name, address (phone number - optional)		
		y name, address (prene namber opinia)		,
	ull Name			
Ft				
Ft	ull Name			
Ft	ull Name			
Fu	ull Name	CITY	STATE A	ZIP CODE A
Fu	ull Name	CITY A	STATE A	ZIP CODE A
9. Banks safety Name	ull Name	CITY CITY Tele Tes: List all banks or other depositories in which the stains funds.	phone Number	s funds, holds accounts, rents
9. Banks safety	Iailing Address TITLE OR POSITION s or Other Depositoric deposit boxes or mair of Bank,	CITY CITY Tele Tes: List all banks or other depositories in which the stains funds.	phone Numbere committee deposit	s funds, holds accounts, rents
9. Banks safety Name	ailing Address TITLE OR POSITION s or Other Depositoric deposit boxes or mair e of Bank, sitory, etc.	CITY CITY Tele Tes: List all banks or other depositories in which the stains funds.	phone Numbere committee deposit	s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h)). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6. Na r	me of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
L ^F	Friends of State Dem	ocratic Parties		
L				
	Mailing Address	114 BEAUCHAMP LANE		
		Lafayette	LA LA	70506
	Relationship:	CITY A	STATE A	ZIP CODE ▲
8. Des		by name, address (phone number - optional)		
——8. Des	Full Name	by name, address (phone number – optional)		
——8. Des		by name, address (phone number – optional)		
——8. Des	Full Name	by name, address (phone number – optional)		
——8. Des	Full Name			
——8. Des	Full Name	CITY A	STATE A	ZIP CODE A
——8. Des	Full Name	CITY A	STATE A	ZIP CODE A
9. Bar safe	Full Name Mailing Address TITLE OR POSITION	CITY A Tel ries: List all banks or other depositories in which tintains funds.	ephone Number	ts funds, holds accounts, rents
Ð. Bar safe Nar	Full Name Mailing Address TITLE OR POSITION Inks or Other Deposito ety deposit boxes or maine of Bank, pository, etc.	CITY A Tel ries: List all banks or other depositories in which tintains funds.	ephone Number	ts funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:			
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3				FEC ID number	C
4				FEC ID number	C
	(A O	A(7) 1 1 0 0			and a death BIO Occurre
	onica Tranel Victory		niπee, Joint Fundra	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	946 Bandmann Trl			
		Missoula		MT	59802
	Relationship:	CITY	A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Co	mmittee X Joint F	undraising Represent	ative Leadership PAC Sponsor
8. Desi ç	gnated Agent: Identify	by name, address (phone nu	mber – optional)		
_					
F	-ull Name				
	Full NameMailing Address				
		<u> </u>			
N	Mailing Address	CITY		STATE A	ZIP CODE A
N		CITY A			ZIP CODE A
N	Mailing Address	CITY		STATE A	ZIP CODE A
9. Bank safety	Mailing Address TITLE OR POSITION To the control of the control o	es: List all banks or other de	Tele	ephone Number	ZIP CODE ZIP CODE st funds, holds accounts, rents
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9. Bank safety Name	TITLE OR POSITION To the control of	es: List all banks or other de	Tele	ephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais	ing i articipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
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ame of Any Connected Cantwell Tester Vict	d Organization, Affiliated Committee, Joint Fเ corv Fund	ndraising Representativ	e, or Leadership PAC Spon
Mailing Address	401 2nd Ave. S.		
	Suite 303		
	Seattle	WA	98104
Relationship:	CITY A	STATE A	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisin	g Participant:		
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2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected , MT NV Victory Fund	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Little Victory Fand			
Mailing Address	611 Pennsylvania Ave., SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ig i ai tioipaitti		
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2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	or Leadershin PAC Snon
Tester Tranel Victory			,, o. 1 000000000000000000000000000000000000
Mailing Address	PO box 558		
	Billings	MT	59102
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X J	oint Fundraising Representa	ative Leadership PAC Si
	Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Page	of	14	

h). Joint Fundraisi	ng rantopanti		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Vyden idia iei a ee			
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Page	of	1-7	

		FEC ID		
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COO DENINGVI VANUA	AVE OF #45400			
600 PENNSYLVANIA	AVE SE #15180			
Washington			DC	20003
	CITY A		STATE A	ZIP CODE ▲
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	600 PENNSYLVANIA Washington ected Organization Affilia	600 PENNSYLVANIA AVE SE #15180 Washington CITY ected Organization Affiliated Committee	600 PENNSYLVANIA AVE SE #15180 Washington CITY ▲	Washington CITY ▲ STATE ▲ ected Organization Affiliated Committee X Joint Fundraising Representa