

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

Blackwolf for Montana

ADDRESS (number and street)

PO Box 210

Check if different than previously reported. (ACC)

Hays

MT

59527

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00919936

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MT

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 /

D D /

Y Y Y Y 2025

through

M M /

D D /

Y Y Y Y 2025

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

Azure, Jarrett, , ,

Signature of Treasurer

Azure, Jarrett, , ,

Date

M M /

D D /

Y Y Y Y 2026

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Blackwolf for Montana

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

	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))....	13506.00	13598.00
(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))	13506.00	13598.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4830.16	4922.16
(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))	4830.16	4922.16
8. Cash on Hand at Close of Reporting Period (from Line 27)	8675.84	
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Blackwolf for Montana

Report Covering the Period: From: / / To: / /

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).....	11800.00	11800.00
(ii) Unitemized	1706.00	1706.00
(iii) TOTAL of contributions from individuals	13506.00	13506.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	92.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13506.00	13598.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	13506.00	13598.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4830.16	4922.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
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) ►	4830.16	4922.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13506.00
25. SUBTOTAL (add Line 23 and Line 24).....	13506.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4830.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8675.84

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 11
(check only one)
 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)
Blackwolf for Montana

A. Full Name (Last, First, Middle Initial)
Craig, Todd, , ,

Mailing Address 303 Main Street South, # 1004

City: Harlem State: MT Zip Code: 59526

FEC ID number of contributing federal political committee: C

Name of Employer: Not Employed Occupation: Not Employed

Receipt For: 2042
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 10 / 20 / 2025

Transaction ID : SA11AI.4140

Amount of Each Receipt this Period: 300.00

Memo Item
* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City: Somerville State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: C C00401224

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2161.00

Date of Receipt: 10 / 20 / 2025

Transaction ID : SA11AI.4140.0

Amount of Each Receipt this Period: 300.00

Memo Item
total earmarked through conduit limit

C. Full Name (Last, First, Middle Initial)
Fort Belknap Indian Community

Mailing Address 158 Tribal Way

City: Harlem State: MT Zip Code: 59527

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 11 / 13 / 2025

Transaction ID : SA11AI.4310

Amount of Each Receipt this Period: 3500.00

Memo Item
Contribution from tribe

SUBTOTAL of Receipts This Page (optional) ▶ 3800.00

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

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)		PAGE 6 OF 11	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

A. Full Name (Last, First, Middle Initial)
Fort Belknap Indian Community

Mailing Address 158 Tribal Way

City: Harlem State: MT Zip Code: 59527

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 7000.00

Date of Receipt: 11 / 13 / 2025

Transaction ID : SA11AI.4311

Amount of Each Receipt this Period: 3500.00

Memo Item
Contribution from tribe

B. Full Name (Last, First, Middle Initial)
Island Mountain Development Group

Mailing Address 353 Old Hays Rd

City: Hays State: MT Zip Code: 59527

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 11 / 25 / 2025

Transaction ID : SA11AI.4308

Amount of Each Receipt this Period: 3500.00

Memo Item
Impermissible contribution to be refunded

C. Full Name (Last, First, Middle Initial)
Valerie, Barbie, , ,

Mailing Address 805 N Mandan St

City: Bismarck State: ND Zip Code: 58501

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:
NextEra Energy Tribal Relations

Receipt For: 2034
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 16 / 2025

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period: 1000.00

Memo Item
* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional) ▶ 8000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 11
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1436.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2025

Transaction ID : SA11AI.4124.0

Amount of Each Receipt this Period
1000.00

Memo Item
total earmarked through conduit limit

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) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	11800.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Best Buy		M M / D D / Y Y Y Y 11 / 17 / 2025
Mailing Address 7601 Penn Ave S		FEC Identification Number
City Richfield	State MN	Zip Code 55423
Purpose of Disbursement Office Equipment		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2026	Amount of Each Disbursement this Period
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	100.00
State: District:		Transaction ID : SB17.4240
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Cavaliers		M M / D D / Y Y Y Y 12 / 05 / 2025
Mailing Address 321 3rd St		FEC Identification Number
City Havre	State MT	Zip Code 59501
Purpose of Disbursement Accidental personal payment to be reimbursed		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2026	Amount of Each Disbursement this Period
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	445.00
State: District:		Transaction ID : SB17.4249
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Exxon Mobile		M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 22777 Springwoods Village Parkway		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2026	Amount of Each Disbursement this Period
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	45.10
State: District:		Transaction ID : SB17.4227
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	590.10
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Exxon Mobile		M M / D D / Y Y Y Y 11 / 14 / 2025
Mailing Address 22777 Springwoods Village Parkway		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4232	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Exxon Mobile		M M / D D / Y Y Y Y 11 / 16 / 2025
Mailing Address 22777 Springwoods Village Parkway		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4235	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Exxon Mobile		M M / D D / Y Y Y Y 12 / 05 / 2025
Mailing Address 22777 Springwoods Village Parkway		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4250	
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	244.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Exxon Mobile		M M / D D / Y Y Y Y 12 / 05 / 2025
Mailing Address 22777 Springwoods Village Parkway		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Travel		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	<input type="text" value="33.90"/>
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4251
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Innonative Solutions		M M / D D / Y Y Y Y 11 / 02 / 2025
Mailing Address 4545 East River Rd Suite 100		FEC Identification Number
City West Henrietta	State NY	Zip Code 14586
Purpose of Disbursement Website Services		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	<input type="text" value="2000.00"/>
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4200
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Little River Trading Post		M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 148 Assiniboine Ave		FEC Identification Number
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Travel		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	<input type="text" value="50.15"/>
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4225
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="2084.05"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

A. Little River Trading Post

Full Name (Last, First, Middle Initial)

Mailing Address 148 Assiniboine Ave

City Harlem State MT Zip Code 59526

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 26 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17.4241

Memo Item

B. Little River Trading Post

Full Name (Last, First, Middle Initial)

Mailing Address 148 Assiniboine Ave

City Harlem State MT Zip Code 59526

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 26 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 40.00

Transaction ID : SB17.4242

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 115.00

TOTAL This Period (last page this line number only) ▶ 3033.15