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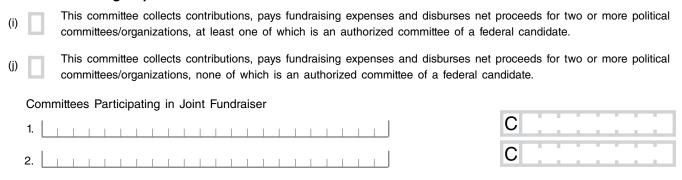
05/30/2022 15 : 01

PAGE	1	/4	

FEC FORM 1		STATEMEN ORGANIZA		Offic	PAGE 1 / 4
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
		E 			
ADDRESS (number a	nd street)	PO Box 529			
(Check if a is changed					
	,	Belt CITY ▲		MT 5941 STATE ▲	2
COMMITTEE'S E-MA		SS			
(Check if a is changed		James.m.boyette13@g	mail.com		
		Optional Second E-Mail Add	ress		
COMMITTEE'S WEB	address	DRESS (URL)			
2. DATE 01	M / D 1 28	D / Y Y Y Y 2022			
3. FEC IDENTIFIC	CATION NU	MBER ► C CO	0802777		
4. IS THIS STATEN	IENT	NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined th	s Statement and to the best of	of my knowledge and belief it i	s true, correct and c	complete.
Type or Print Name of	of Treasurer	Boyette, James, Matthew, ,			
Signature of Treasure	Boyette	e, James, Matthew, ,	[Electronically Filed]	Date 05	30 / Y Y Y Y Y 2022
NOTE: Submission of	false, errone		nay subject the person signing th ION SHOULD BE REPORTED V		enalties of 52 U.S.C. §30109
Office Use Only			For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	י ר	EC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) 🗴 This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
Name of Candidate Boyette, James, Matthew, ,	
Candidate Office Party Affiliation REP Sought: House Senate President	State MT
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 02
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State (Democrat or subordinate) committee of the Republicar	tic, n, etc.) Party
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
Corporation Corporation w/o Capital Stock	Organization
Membership Organization Trade Association Cooper	rative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ed fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	

Joint Fundraising Representative:



Relationship:

Connected Organization

	-																													
	FEC Form 1 (Revised 02	2/2009)																								Ρ	age	ə 3		
٧	Vrite or Type Committee Name																													
	JAMES BOYET	ГΤΕ																												
6.	Name of Any Connected Or NONE	ganizatio	on, A	ffilia	ited	Com	nmi	ttee	, J	oin	t F	uno	Irai	sin	g F	lep	res	ent	ati	ve,	or	Le	ad	ers	hip	PA	C :	Зро	nso	r
	Mailing Address																				1									
																											-			
						Cľ	ΤY					_					S	TA	ΓE						ZIF	P C	OD	E 🔺		

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

E	Boyette, James, Matthew, ,			
Full Name				
Mailing Address	15 macee lane			
	Bozeman		MT 59718	
	CITY ▲		STATE A	ZIP CODE
Title or Position \mathbf{v}				
		Telephone nu	ımber 208 – [859 - 4285

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Boyette, James, Matthew, ,
of Treasurer	
Mailing Address	15 macee lane
	Bozeman MT 59718 Image: Image of the second
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Candidate	Image: Telephone number 208 - 859 - 4285

FEC Form 1 (Revised 02)2/2(009)																			F	Pag	e 4	۱ ــــــــــــــــــــــــــــــــــــ		
Full Name of Designated Agent										ĺ									ĺ							1	
Mailing Address																											
																								L			
						Cľ	ΤY								:	ST/	ΛTE				ZI	РC		ЭЕ			
Title or Position ▼																											
											Tele	eph	ione	e n	umł	ber				· [_							

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	Idaho cer	ntral cred	lit unic	n																
Mailing Address	Ĺ	4400 central :	ave																	
	l																			
	Ĺ	Chubbuck									ID			832	02					
				CI	Y ▲					S	STATI	E 🔺				ZIP	COD	E 🔺		
Name of Bank, De	epository, etc. Truist								1	1	1 1			1		1 1		1 1	1	
Mailing Address	Ľ	214 N. Tryon	St.																	
	L																			
		Charlotte												2820	02					
				CII	Y ▲					ę	STATI	E 🔺				ZIP	COD)E ▲		