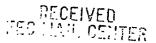
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## STATEMENT OF

FORM 1		ORGANI	IZATION		Office Use Only
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	e Example:If typing, type over the lines.	12FE4M5	general and the second of the
Montana V	/ictory	2010	<u> </u>	1 1 1 1 1	
	<u> </u>	<u> </u>	<u> </u>		
ADDRESS (number a	and street)	3242 Cumm	nins Way	<u>                                     </u>	
(Check if an is changed)		Missoula		MT	59802
		•	CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	address	SS (Please provide only o holly@cam	ne e-mail address) paigncompliance	e.ņet	
COMMITTEE'S WEE	3 PAGE ADI	DRESS (URL)			
(Check if is change					
2. DATE 06	30	2010			
3. FEC IDENTIFIC	CATION NU	JMBER C	S Property Committee Commi		·
4. IS THIS STATE	MENT X	ńEM (N) OŁ	R ^ AMENDED (A)		
I certify that I have	examined th	is Statement and to the	best of my knowledge and believed	ef it is true, correct	and complete.
Type or Print Name	of Treasure	Holly Giar	aputo		
Signature of Treasur	rer	tally		Date 06	30° 2010
NOTE: Submission of			ation may subject the person signing		the penalties of 2 U.S.C. §437g.
Office Use Only			For further information Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100	nission	FEC FORM 1 (Revised 02/2009)

	FE	EC <b>Fo</b> i	rm 1 (Revised 02/2009)	Page <b>2</b>
5.			OMMITTEE	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
	Name Candid		<u> </u>	:
	Candid Party /		Office Sought: House Senate President	State
	(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	Name		This committee supports/opposes only one candidate, and is NOT all authorized committee.	
	Candio			1 1 1 1 1
	Party	· Com	nmittee:	
	(d)			Democratic, epublican, etc.) Party.
	Politi	cal A	ction Committee (PAC):	
	(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 a separate seg committee. (i.e., nonconnected committee)	regated 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.)	
	-			
	Joint	Fund	Iraising Representative:	•
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)	$\boxtimes$	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
		Com	mittees Participating in Joint Fundraiser	
		Com	Calabada of May Dayson	
		1.	FIC ID number C 0	328211
		2.	Montana Democratic Party           FEC ID number C 0 0	010033
		3.	FEC ID number	
		4.		

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CITY

STATE

Telephone number

ZIP CODE

\_|498, |\_|7123 |

Page 3

Full Name of Treasurer

Mailing Address

Title or Position

Treasurer

Missoula

FEC Form 1 (Revised 02/2009)

Montana Victory 2010

Write or Type Committee Name

CITY

STATE

ZIP CODE

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35386

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(3/2005)

## **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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS** Express Mail Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): FECLESS Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER