

THE STATE OF MONTANA

COMMISSIONER OF POLITICAL PRACTICES

1205 Eighth Avenue  
 Post Office Box 202401  
 Helena, MT 59620-2401  
 TELEPHONE: 406-444-2942  
 FAX NUMBER: 406-444-1643  
 WEBSITE: www.politicalpractices.mt.us

**COPY**

FORM C-6  
 POLITICAL COMMITTEE FINANCE REPORT

ORIGINAL FILING  OR AMENDED FILING

TYPE OR PRINT IN INK ALL INFORMATION ON THIS FORM EXCEPT CERTIFICATION SIGNATURE

Yes I-154 (Protect Our Homes Montana)  
 PO Box 7  
 Winifred, MT 59489

Initial Report	
Periodic Report	X
Closing Report	
No transactions in period	

REPORTING PERIOD	
From	07/06/2006
To	08/05/2006

CASH SUMMARY: MONEY RECEIVED AND SPENT

1. CASH IN BANK - Balance from previous report	\$9,102.09
2. RECEIPTS - Total received and deposited this period from Schedule A	\$5,900.00
3. CORRECTIONS - Addition or subtraction from Schedule D (+ or -)	\$0.00
<i>Subtotal</i>	\$15,002.09
4. EXPENDITURES - Total paid out this period from Schedule B	\$14,989.84
5. CASH IN BANK - Ending balance this report	\$12.25

CERTIFICATION

I, Don Crabbe, Deputy Treasurer certify the foregoing report of campaign finances with all attachments is complete to the best of my knowledge, in accordance with Montana Code Annotated Title 13, chapter 37.

*Don Crabbe*  
 Signature

NOTE: Report MUST BE SIGNED by the candidate or candidate's treasurer whose name is on the Statement of candidate form on file in the office of Commissioner of Political Practices.

FOR OFFICE USE ONLY  
 Date Received and Postmark Date

AUG 7 10 16 AM '06

HAND DELIVERED

*Don Crabbe*

SCHEDULE A. Receipt - This Reporting Period		In-Kind Description	Value	Cash or Check Amount	Total to Date Amount
<b>1. Contributions Less Than \$35 Each</b>			\$0.00	\$0.00	\$0.00
		<b>TOTAL CONTRIBUTIONS THIS PAGE</b>	\$0.00	\$0.00	

**SCHEDULE A.**  
**Receipt - This Reporting Period**

2. Loans Creditor's full name/complete mailing address. <i>REQUIRED</i>	Occupation & Employer <i>REQUIRED</i>	Loan Date <i>Required</i>	Description	In-Kind		Total to Date Amount
				Value	Cash or Check Amount	
No Loans this period				\$0.00 ✓	\$0.00 ✓	\$0.00

TOTAL LOANS THIS PAGE

SCHEDULE A. Receipt - This Reporting Period		Date <i>Required</i>	Description	In-Kind Value	Cash or Check Amount	Total to Date Amount
3. Interest, Rebates, Refunds, Fundraisers, and Other Miscellaneous Receipts (Describe)						
No records this reporting period				\$0.00	\$0.00	\$0.00
<b>TOTAL MISCELLANEOUS RECEIPTS THIS PAGE</b>				\$0.00	\$0.00	\$0.00

**SCHEDULE A.**  
**Receipts - This Reporting Period (continued)**

**4. Political Action Committee Contributions**  
 Committee's full registered name and complete mailing address **REQUIRED**

No records this reporting period

		Description	In-Kind Value	Cash or Check Amount	Total to Date Amount
	Date Received <i>REQUIRED</i>				
			\$0.00	\$0.00	\$0.00
			\$0.00	\$0.00	

**TOTAL RECEIPTS THIS PAGE**

SCHEDULE A. Receipts - This Reporting Period (continued)		In-Kind Description	Value	Cash or Check Amount	Total to Date Amount
<b>5. Political Party Committee Contributions</b> Full name & complete mailing address <i>REQUIRED</i>	Date Received <i>Required</i>				
No records this reporting period		\$0.00	\$0.00	\$0.00	\$0.00

**TOTAL RECEIPTS THIS PAGE**

**SCHEDULE A.**  
**Receipts - This Reporting Period** (continued)

6. Incidental Committee Contributions Committee's full registered name and complete mailing address <i>REQUIRED</i>	Date Received <i>Required</i>	Description	In-Kind		Cash or Check Amount	Total to Date Amount
			Value	Value		
Montanans In Action PO Box 7 Winifred, MT 59489	07/31/2006				\$4,550.00	\$166,950.00
Montanans In Action PO Box 7 Winifred, MT 59489	08/01/2006				\$100.00	\$166,950.00
Montanans In Action PO Box 7 Winifred, MT 59489	08/02/2006				\$250.00	\$166,950.00
Montanans In Action PO Box 7 Winifred, MT 59489	08/04/2006				\$1,000.00	\$166,950.00
<b>TOTAL RECEIPTS THIS PAGE</b>					\$5,900.00	

SCHEDULE A. Receipts - This Reporting Period (continued)		Description	In-Kind Value	Cash or Check Amount	Total to Date Amount
<b>7. Other Political Committee Contributions</b> Committee's full registered name and complete mailing address <i>REQUIRED</i>	Date Received <i>Required</i>				
No Committee Contributions This Period			\$0.00	\$0.00	\$0.00

\$0.00	\$0.00
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**TOTAL RECEIPTS THIS PAGE**

**SCHEDULE A. Receipts - This Reporting Period** (continued)

**8. Individual Contributions of \$35 or More**  
**REQUIRED: ONE NAME ONLY FOR EACH CONTRIBUTION**  
 Full name, complete mailing address, occupation, & employer

Trevis Butcher PO Box 7 Winifred, MT 59489		Office & Travel - July			
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**TOTAL RECEIPTS THIS PAGE**

\$1,000.00	\$0.00	\$10,000.00
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**TOTAL RECEIPTS THIS REPORTING PERIOD**  
 Include ALL of Schedule A (Sections 1-9) in this total

\$1,000.00	\$0.00	\$5,900.00
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