THE STATE OF MONTANA

Commissioner of Political Practices 1209 Eighth Avenue Post Office Box 202401 Helena, MT 59620-2401

Phone: 406-444-2942 Fax: 406-444-1643

My Commission Expires:

www.politicalpractices.mt.gov

POSTMARKED

APR 2 9 2022

FOR OFFICE USE ONLY DECLIVED 2002 MAY -2 A 10-15 CHAND DELIVERED SIGNED/NOTARIZED

Campaign Finance and Practices

Complaint Form (08/17)

, , , , , , , , , , , , , , , , , , ,	
Type or print in ink all information on this form except for verification signature	
Person bringing complaint (Complainant):	
Complete Name	Vera Pederson
Complete Mailing Address	POBOX 888
ĺ	Big Timber MT 59011
Phone Numbers: Work	406-932-5152 Home 406-930-1418
Person or organization against whom complaint is brought (Respondent):	
Complete Name	Catherine McKenzie
Complete Mailing Address	70 Box 1637
	Big Timber, MT 59011
Phone Numbers: Work	Home 932-6227
Please complete the second page of this form and describe in	
detail the facts of the alledged violation.	
Verification by oath or affirmation	
State of Montana, County of Sweet Grass	
1, Vere Pederson	, being duly sworn, state that the information in this
Complaint is complete, true, and correct, to the best of my knowledge and belief.	
	Vua Lederon
(SEAL)	Signature of Complainant
CHARLENE M RASNICI NOTARY PUBLIC for the State of Montans	Subscribed and sworn to before me this 27 day of
* SEAL * Residing at Big Timber, Month My Commission Expires	$\frac{April}{Channer M Rannielle}$
November 1, 2024	1 (Charles M Harrisk)

Notary Public

Statement of facts:

Describe in detail the alleged violation(s) and cite the statute or statutes you believe have been violated. Please attach copies of documentary evidence to support the facts alleged in your statement.

If the space provided below is insufficient, you may attach additional pages as necessary.

Violation of MCA 13-35-225

Political signs do not have party name or symbol on them. See attached pictures.

Complaints must be:

- signed
- notarized
- delivered in person or by mail.

T