

HAND DELIVERED

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CAMPAIGN FINANCE COMPLAINT 2014 OCT 31 A 10:35

COMMISSIONER OF
POLITICAL PRACTICES

This Complaint is filed by Bowen Greenwood, Executive Director of the Montana State Republican State Central Committee, by and on behalf of the membership of the Montana Republican State Central Committee, PO Box 935, Helena, MT 59624

This Complaint is filed against Morrison, Sherwood, Wilson & Deola, a law firm located in Helena, Montana located at PO Box 557, 59624.

Morrison, Sherwood, Wilson & Deola (MSWD) have violated various provisions of Montana's campaign practice laws. To wit: MSWD has failed to register as a political committee, failed to file any campaign reports as required by law, and failed to identify its contributors and expenditures. See, MCA sections 13-37-201-, 225 and 226.

Foundational Facts:

1. Montanans for Liberty and Justice is a political committee located in Helena, Montana, 32 S. Ewing, Suite 304, Helena, MT 59601.
2. Montanans for Liberty and Justice has filed two C-2s with the COPP. Both of those C-2s indicated the primary purpose of the committee is to 'support candidates'. A copy of those C-2s are appended hereto as Exhibit "A"
3. The physical address of Montanans for Liberty and Justice is the same as that of the Montana Trial Lawyers Association.
4. On or about October 23, 2014, Montanans for Liberty and Justice filed by and through its Deputy Treasurer Mary Correia Taylor, a Form C-6 political committee finance report. A copy of that report is appended as Exhibit "B".
5. MSWD is identified on that report as having contributed \$10,000.00 to Montanans for Liberty and Justice.
6. MSWD is, according to the Montana Secretary of State's a professional limited liability partnership (PLL). See, Exhibit "C" appended hereto.
7. The Firm's attorneys as listed on MSWD's webpage are appended hereto as Exhibit "D".
8. The Current Commissioner of Political Practices, Jon Motl, is listed as one of the Firm's attorneys.
9. As a matter of law, at least two people are required to form a PLLP. The owners of a PLLP are called partners, and they must submit articles of formation to state or local government officials.

10. Montanans for Liberty and Justice has clearly, as indicated by the Form C-6 appended hereto, made political expenditures in support of Mike Wheat's candidacy for position of State Supreme Court Justice.
11. As demonstrated by Exhibit "A" detailing the \$10,000.00 contribution, MSWD as an entity that has two or more individuals that has clearly made a contribution to support a committee that is organized to "support candidates".
12. A review of the Montanans for Liberty and Justice Form C-5 filings indicates that all of the group's expenditures have made to support and promote Mike Wheat's campaign.
13. In this way, Montanans for Liberty and Justice is really acting as a particular candidate support committee for Mike Wheat – not an independent committee. This Committee appears to have been formed to skirt Montana's contribution limits to individual candidates, i.e. to Mike Wheat.

VIOLATIONS:

- a. As discussed in Motl's decision in Clark v. Datsopoulos, Macdonald and Lind (DML), P.C. and T.J. McDermott, No. COPP 2014-CFP-033A, when a law office makes a contribution in support of a political committee that law office also becomes a political committee pursuant to Montana law.
- b. By making a single contribution from the law firm's checking accounting to a political committee that is organized to support candidates, MSWD has, as did DML, satisfied Montana's definition of Political Committee set forth in MCA Section 13-1-101(22).
- c. By meeting the definition of political committee, MSWD is required to register as a political committee with the Montana COPP pursuant to MCA Section 13-37-201. MSWD has not done so. This is a violation of Montana law.
- d. In addition, MSWD is also required to submit filings detailing their contributions, contributors, and expenses. MSWD has not done so. This is a separate violation of Montana law.
- e. As noted by Commissioner Jon Motl is listed as an attorney for MSWD on MSWD's webpage.
- f. Excusable neglect cannot be applied to absolve MSWD's clear violations of Montana law. If anything, the fact that MSWD is a law firm that has extensive experience in the area of campaign finance law in Montana, necessitates that they be held to a higher standard.
- g. Further, the de minimis principle cannot be applied in this instance because the large amount of the contribution, \$10,000.00 is clearly not a de minimis amount of money.

CONFLICT OF INTEREST:

Jon Motl, the appointed Commissioner of Political Practices, is listed as an attorney on MSWD's webpage. See, Exh. "D" hereto.

Mr. Motl has long time affiliations with MSWD, including being a named partner at that law firm prior to his appointment as Commissioner.

Pursuant to MCA 13-37-111(5), Motl is clearly conflicted as to this Complaint, and Motl's consideration and ruling on the same will not only give rise to an appearance of impropriety, it will constitute a clear conflict of interest.

The Commissioner's clear conflict of interest requires that a deputy commissioner be appointed to handle and rule on this complaint. See, MCA Section, 13-37-111 this matter prevents him from issuing an unbiased opinion and would also call into question the impartiality of any substitute he might select to rule on the complaint.

RELIEF REQUESTED:

- That MSWD be determined to have violated Montana's campaign finance laws in that the law firm and its attorneys have failed to register, disclose, and timely file as required by Montana law;
- That a civil penalty be assessed against MSWD;
- That MSWDs' violations be referred to the Lewis and Clark County Attorney's Office for possible civil/criminal prosecution; and
- That Motl recuse himself as the Complaint involves his own law firm.

Verification

State of Montana, County of Lewis & Clark

I, Bowen Greenwood, state that the information in this Complaint is complete, true, and correct, to the best of my knowledge and belief.



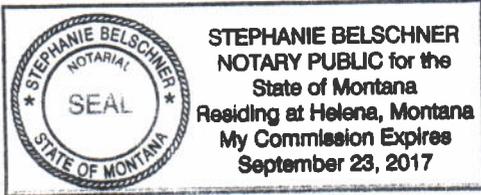
Signature of Complainant

Subscribed before me this 31st day of

October, 2014.



Notary Public



My Commission Expires: September 23, 2017

EXHIBIT

A

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.gov

POSTMARKED

AUG 27 2014

FOR OFFICE USE ONLY
Date Received and Postmark Date

RECEIVED
2014 AUG 28 A 9:51
POLITICAL PRACTICES

FORM C-2 (Revised 06/12)
STATEMENT OF ORGANIZATION

TO BE FILED BY (Check One):

- POLITICAL ACTION COMMITTEE
- POLITICAL PARTY COMMITTEE
- BALLOT ISSUE COMMITTEE
- INCIDENTAL COMMITTEE
- OTHER

ORIGINAL FILING

AMENDED FILING

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

FULL NAME OF COMMITTEE (Refer to Montana Code Annotated § 13-37-210, Naming and Labeling Statute)
Montanans For Liberty and Justice

COMPLETE MAILING ADDRESS 32 S. Ewing, #304, Helena, MT 59601
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS same
(Including City, State, Zip Code)

Incorporated: (Check one) YES NO

FULL NAME OF COMMITTEE TREASURER Anita Roessmann

COMPLETE MAILING ADDRESS P.O. Box 318, Helena, MT 59624
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS 209 Seventh, Helena, MT 59601
(Including City, State, Zip Code)

anitaroessmann@gmail.com 406-461-5350 406-439-3926 406-530-6050
E-mail Address (Please Print) **Home Telephone Number** **Work Telephone Number** **Facsimile Number**
* attach list if necessary

FULL NAME OF DEPUTY TREASURER(S), if any * _____

COMPLETE MAILING ADDRESS _____
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS _____
(Including City, State, Zip Code)

_____ _____ _____ _____
E-mail Address (Please Print) **Home Telephone Number** **Work Telephone Number** **Facsimile Number**
* attach list if necessary

COMMITTEE ACCOUNT INFORMATION

FULL NAME OF BANK Valley Bank

COMPLETE ADDRESS 321 Fuller Ave., Helena, MT 59601
(Including City, State, Zip Code)

SECONDARY COMMITTEE ACCOUNT(S) INFORMATION, if any (attach list if necessary)

FULL NAME OF BANK _____

COMPLETE ADDRESS _____
(Including City, State, Zip Code)

ADDITIONAL OFFICERS (attach list if necessary)

OFFICERS FULL NAME _____ TITLE _____

COMPLETE MAILING ADDRESS _____
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS _____
(Including City, State, Zip Code)

E-Mail Address (Please Print) _____ Home Telephone Number _____ Work Telephone Number _____ Facsimile Number _____

OFFICERS FULL NAME _____ TITLE _____

COMPLETE MAILING ADDRESS _____
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS _____
(Including City, State, Zip Code)

E-Mail Address (Please Print) _____ Home Telephone Number _____ Work Telephone Number _____ Facsimile Number _____

PURPOSE OF COMMITTEE and/or	SUPPORT	OPPOSE	DATE OF ELECTION
Support candidates and issues affecting the justice system.			November 2014, 2016, ...
NAME(S) OF CANDIDATE(S) or BALLOT ISSUE (S)	SUPPORT	OPPOSE	DATE OF ELECTION

CERTIFICATION

I hereby verify that the foregoing statements are true and correct.

Antia Roemmann
 Officer's Signature

Treasurer _____
 Title

August 27, 2014
 Date

For County, Municipal, or School committees only: Please check this box if contributions/expenditures will not exceed \$500. (If \$500 is exceeded, filing of campaign finance reports will be required.)

Notice: you must follow up with a signed hard copy to CPP. Delivery receipt of this form will appear in your email. For further guidance, contact CPP at (406) 444-2942. (Internet Explorer is recommended)

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.gov

POSTMARKED

OCT 10 2014

FOR OFFICE USE ONLY
Date Received and Postmark Date

RECEIVED

2014 OCT 14 A 9:49

COMMISSIONER OF
POLITICAL PRACTICES

FORM C-2 (Revised 06/12)

STATEMENT OF ORGANIZATION

TO BE FILED BY (Check One):

- POLITICAL ACTION COMMITTEE
- POLITICAL PARTY COMMITTEE
- BALLOT ISSUE COMMITTEE
- INCIDENTAL COMMITTEE
- OTHER

ORIGINAL FILING

AMENDED FILING

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

FULL NAME OF COMMITTEE (Refer to Montana Code Annotated § 13-37-210, Naming and Labeling Statute)

Montanans For Liberty and Justice

COMPLETE MAILING ADDRESS 32 S. Ewing, #304, Helena, MT 59601
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS same
(Including City, State, Zip Code)

Incorporated: (Check one) YES NO

FULL NAME OF COMMITTEE TREASURER Anita Roessmann

COMPLETE MAILING ADDRESS P.O. Box 318, Helena, MT 59624
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS 209 Seventh, Helena, MT 59601
(Including City, State, Zip Code)

anitaroessmann@gmail.com	406-461-5350	406-439-3926	406-530-6050
E-Mail Address (Please Print)	Home Telephone Number	Work Telephone Number	Facsimile Number

FULL NAME OF DEPUTY TREASURER(S), if any * Mary Correia Taylor

COMPLETE MAILING ADDRESS P.O. Box 838, Helena, MT 59624
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS 32 S. Ewing, Suite 306, Helena, MT 59601
(Including City, State, Zip Code)

mtla@mt.net	406-442-9867	406-443-3124	406-530-6050
E-Mail Address (Please Print)	Home Telephone Number	Work Telephone Number	Facsimile Number * attach list if necessary

COMMITTEE ACCOUNT INFORMATION

FULL NAME OF BANK Valley Bank

COMPLETE ADDRESS 321 Fuller Ave., Helena, MT 59601
(Including City, State, Zip Code)

SECONDARY COMMITTEE ACCOUNT(S) INFORMATION, if any (attach list if necessary)

FULL NAME OF BANK

COMPLETE ADDRESS
(Including City, State, Zip Code)

ADDITIONAL OFFICERS (attach list if necessary)

OFFICERS FULL NAME Stephen Doherty TITLE NA

COMPLETE MAILING ADDRESS 405 S. 1st Street W Missoula 59801-1850
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS same
(Including City, State, Zip Code)

smithdoherty@aol.com Home Telephone Number _____ Work Telephone Number (406) -544-7181 Facsimile Number _____

OFFICERS FULL NAME Allen Smith Jr. TITLE NA

COMPLETE MAILING ADDRESS P.O. Box 838, Helena, MT 59624
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS 32 S. Ewing, Suite 309, Helena, MT 59601
(Including City, State, Zip Code)

monttla@mt.net Home Telephone Number 406-439-3124 Work Telephone Number 406-443-3124 Facsimile Number 406-530-6050

PURPOSE OF COMMITTEE and/or	SUPPORT	OPPOSE	DATE OF ELECTION
Support candidates and issues impacting the justice system.			November 2014, 2016, ...
NAME(S) OF CANDIDATE(S) or BALLOT ISSUE (S)	SUPPORT	OPPOSE	DATE OF ELECTION

CERTIFICATION

I hereby verify that the foregoing statements are true and correct.

Amber Rasmussen
Officer's Signature

Treasurer _____
Title

10/10/2014
Date

For County, Municipal, or School committees only: Please check this box if contributions/expenditures will not exceed \$500. (If \$500 is exceeded, filing of campaign finance reports will be required.)

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EXHIBIT

B

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.gov

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Date Received and Postmark Date

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2014 OCT 23 P 4: 45

COMMISSIONER OF
POLITICAL PRACTICES

FORM C-6 (Revised 04/08)

POLITICAL COMMITTEE FINANCE REPORT

ORIGINAL FILING

AMENDED FILING

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

Montanans for Liberty and Justice

FULL REGISTERED NAME OF COMMITTEE

32 S. Ewing, Suite 304, Helena, MT 59601

COMPLETE MAILING ADDRESS

(Include City, State, Zip Code)

REPORTING PERIOD

From June 19, 2014

To October 18, 2014

Initial Report

Periodic Report

Closing Report

No transactions in period

CASH SUMMARY: MONEY RECEIVED AND SPENT

- CASH IN BANK – Balance from previous report..... \$ 0.00
- RECEIPTS – Total received and deposited this period from Schedule A..... + \$ 302,800.00
- CORRECTIONS – Addition or subtraction from Schedule D..... (Circle: + or -) -- \$ 302,800.00
Subtotal \$ 266,271.77
- EXPENDITURES – Total paid out this period from Schedule B..... -- \$ 36,528.23
- CASH IN BANK – Ending balance this report..... \$

CERTIFICATION

1, Mary Correia Taylor

Name

Deputy Treasurer

Title

certify the foregoing report of campaign finances with all attachments is complete and correct to the best of my knowledge, in accordance with Montana Code Annotated Title 13, chapter 37.

Signature

NOTE: Report **MUST BE SIGNED** by an officer whose name is on the Statement of Organization form on file in the office of the Commissioner of Political Practices.

SCHEDULE A.
Receipts – This Reporting Period (continued)

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

	Date Received Required	Description	In-Kind Value	Cash or Check Amount	Total to Date Amount
Montana Law-PAC Registered Name PO Box 838 Address Helena, MT 59624 City, State, Zip Code	8/29/2014 9/12/2014 9/29/2014 10/10/2014 10/15/2014 10/17/2014			500.00 50,000.00 100,000.00 47,000.00 10,000.00 28,000.00	235,500.00
Registered Name Address City, State, Zip Code					
Registered Name Address City, State, Zip Code					
Registered Name Address City, State, Zip Code					
Registered Name Address City, State, Zip Code					
TOTAL RECEIPTS THIS PAGE				235,500.00	

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

TYPE OR PRINT CLEARLY IN INK

SCHEDULE A.
Receipts – This Reporting Period (continued)

8. Corporate Contributions (PAC's & Ballot Issues Only)
 Full name and mailing address. **REQUIRED**
for Independent Expenditures Only!

PLEASE SEE ATTACHED

	Date Received Required	Description	In-Kind Value	Cash or Check Amount	Total to Date Amount
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
TOTAL RECEIPTS THIS PAGE					

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

TYPE OR PRINT CLEARLY IN INK

SCHEDULE A.
Receipts – This Reporting Period (continued)

	Date Received	Description In-Kind Value	Cash or Check Amount	Total to Date Amount
5. Political Party Committee Contributions Full name and complete mailing address REQUIRED	Date Required			
Name _____ Address _____ City, State, Zip Code _____				
Name _____ Address _____ City, State, Zip Code _____				
Name _____ Address _____ City, State, Zip Code _____				
6. Incidental Committee Contributions Full name and complete mailing address REQUIRED	Date Required			
Name _____ Address _____ City, State, Zip Code _____				
7. Other Political Committee Contributions Full name and complete mailing address REQUIRED	Date Required			
Name _____ Address _____ City, State, Zip Code _____				

TOTAL RECEIPTS THIS PAGE

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

TYPE OR PRINT CLEARLY IN INK

SCHEDULE A. Receipts – This Reporting Period (continued)

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

PLEASE SEE ATTACHED

		In-Kind	Cash or Check	Total to Date
		Description	Value	Amount
PLEASE SEE ATTACHED				
Name _____	Occupation _____			
Address _____	Employer _____			
City, State, Zip Code _____				

Name _____	Occupation _____			
Address _____	Employer _____			
City, State, Zip Code _____				

Name _____	Occupation _____			
Address _____	Employer _____			
City, State, Zip Code _____				

Name _____	Occupation _____			
Address _____	Employer _____			
City, State, Zip Code _____				

TOTAL RECEIPTS THIS PAGE				
TOTAL RECEIPTS THIS REPORTING PERIOD				
Include ALL of Schedule A (Sections 1 – 9) in this total				

TOTAL RECEIPTS THIS REPORTING PERIOD
Include ALL of Schedule A (Sections 1 – 9) in this total

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

SCHEDULE B. Expenditures – This Reporting Period		Purpose	Date	PRIMARY Amount	GENERAL Amount
1. PETTY CASH Expenditures (TOTAL THIS PERIOD)					
2. All Other Expenditures Full name and complete mailing address of each payee REQUIRED					
PLEASE SEE ATTACHED					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
TOTAL EXPENDITURES THIS PAGE--INCLUDING PETTY CASH					

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

SCHEDULE B. Expenditures -- This Reporting Period 3. Independent Expenditures Full name and complete mailing address of each payee REQUIRED	Purpose	Candidate/ Issue	Date	PRIMARY	Amount GENERAL
PLEASE SEE ATTACHED Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					

TOTAL EXPENDITURES THIS PAGE--INCLUDING PETTY CASH

TOTAL EXPENDITURES THIS REPORTING PERIOD Include all of Schedule B (Sections 1 - 3) In this total

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

SCHEDULE B. Expenditures – This Reporting Period

4. Corporate Independent Expenditures
Full name and complete mailing address of each payee **REQUIRED**

	Purpose	Candidate/ Issue	Date	PRIMARY	Amount GENERAL
<p>PLEASE SEE ATTACHED</p> <p>Name _____</p> <p>Address _____</p> <p>City, State, Zip Code _____</p>					
<p>Name _____</p> <p>Address _____</p> <p>City, State, Zip Code _____</p>					
<p>Name _____</p> <p>Address _____</p> <p>City, State, Zip Code _____</p>					
<p>Name _____</p> <p>Address _____</p> <p>City, State, Zip Code _____</p>					
<p>Name _____</p> <p>Address _____</p> <p>City, State, Zip Code _____</p>					

TOTAL EXPENDITURES THIS PAGE--INCLUDING PETTY CASH

TOTAL EXPENDITURES THIS REPORTING PERIOD Include all of Schedule B (Sections 1 -4 in this total

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

SCHEDULE B. Expenditures – This Reporting Period 4. Corporate Independent Expenditures Full name and complete mailing address of each payee REQUIRED	Purpose	Candidate/ Issue	Date	PRIMARY	Amount GENERAL
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					
Name _____ Address _____ City, State, Zip Code _____					

TOTAL EXPENDITURES THIS PAGE--INCLUDING PETTY CASH

TOTAL EXPENDITURES THIS REPORTING PERIOD (include all of Schedule B (Sections 1-4) in this total)

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

SCHEDULE C. Debts and Loans Not Yet Paid

Full name and complete mailing address of each creditor <i>REQUIRED</i>		Purpose	Date Incurred	Balance Due PRIMARY GENERAL
Montana Law-PAC Name P.O. Box 838 Address Helena, MT 59624 City, State, Zip Code		Debt - Phone charges (Verizon)	9/16/2014 10/16/2014	43.73 44.07
Montana Trial Lawyers Association Name P.O. Box 838 Address Helena, MT 59624 City, State, Zip Code		Debt - credit card fees	9/29/2014 10/02/2014 10/06/2014 10/09/2014 10/14/2014 10/17/2014	56.25 112.50 157.50 43.88 14.06 23.06
_____ Name _____ Address _____ City, State, Zip Code		Debt - postage	10/01/2014 10/10/2014 10/13/2014 10/16/2014 10/16/2014	.48 .96 .96 .48 1.44

SCHEDULE D. Utilize this section to report corrections to receipts, contributions, and expenditures reported on a prior report.

Originally Reported on SCHEDULE DATE	As Originally Reported	Explain Correction

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

TYPE OR PRINT CLEARLY IN INK

SCHEDULE C. Debts and Loans Not Yet Paid

Full name and complete mailing address of each creditor REQUIRED	Purpose	Date Incurred	Balance Due PRIMARY GENERAL
Montana Trial Lawyers Association Name P.O. Box 838 Address Helena, MT 59624 City, State, Zip Code	Debt - Shipping charges	9/30/2014 10/2/2014	38.41 38.41
Montana Trial Lawyers Association Name P.O. Box 838 Address Helena, MT 59624 City, State, Zip Code	Debt - Purchase domain name (Godaddy)	10/07/2014	90.93
Name _____ Address _____ City, State, Zip Code _____			

SCHEDULE D. Utilize this section to report corrections to receipts, contributions, and expenditures reported on a prior report.

Originally Reported on SCHEDULE	As Originally Reported	Explain Correction
DATE		

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

SCHEDULE A. Receipts - June 19 - October 18, 2014

8 Corporate Contributions	Description	In-Kind	Amount	Cash/Check	Totals to Date
Kohler Family Trust 34153 Misty Lagoon Polson 59860				\$ 500.00	\$ 500.00
Lamb and Carey Law 2601 Broadway Helena, MT 59601				\$ 5,000.00	\$ 5,000.00
MEA-MFT COPE 1232 E. 6th Helena, MT 59601				\$ 10,000.00	\$ 10,000.00
Montana Trial Lawyers Assoc. P.O. Box 838 Helena, MT 59624	Donation of services of Al Smith for professional services: 133 hrs @50.95		\$ 6,776.35		
Montana Trial Lawyers Assoc. P.O. Box 838 Helena, MT 59624	Donation of general office services (bookkeeping, etc.)		\$ 587.46		
Montana Trial Lawyers Assoc. P.O. Box 838 Helena, MT 59624	Donation of office space-\$800; supplies-\$10; copies-\$5		\$ 815.00		
Montana Trial Lawyers Assoc. P.O. Box 838 Helena, MT 59624	In-kind contribution from Montana Law-PAC pursuant to 44.10.321(2)(a)(ii) ARM to pay a debt for broadcast buy/production.		\$ 110,000.00		
Morrison Sherwood Wilson & Deola P.O. Box 557 Helena, MT 59624-0557				\$ 10,000.00	\$ 10,000.00
TOTAL RECEIPTS THIS PAGE			\$ 118,178.81	\$ 25,500.00	

8 Corporate Contributions	Description	In-Kind	Amount	Cash/Check	Totals to Date
Slack Davis 2705 Bee Cave Road, Suite 220 Austin, TX 78746				\$ 1,000.00	\$ 1,000.00
Western Justice Associates PLLC 303 W Mendenhall, Suite 1 Bozeman, MT 59715				\$ 2,500.00	\$ 2,500.00
TOTAL RECEIPTS THIS PAGE				\$ 3,500.00	
TOTAL RECEIPTS Section 8 Corporate Contributions			\$ 118,178.81	\$ 29,000.00	

SCHEDULE A - Receipts

9. Individual Contributors	Occupation & Employer	Description	In-Kind	Amount	Cash/Check	Totals to Date
Bakie, Gwen PO Box 577 Spirit Lake, ID 83869	Self-employed Libby Creek Ranchers			\$ 1,000.00	\$ 1,000.00	
Barrett, Evan 807 W Silver St Butte, MT 59701	Outreach Director, Highlands College of Montana Tech			\$ 100.00	\$ 100.00	
Bishop, Randall 1631 Zimmerman Trail, Suite 1 Billings MT 59102	Attorney, Bishop & Heenan			\$ 2,500.00	\$ 2,500.00	
Blank, Diana IMA 103 Village Downtown Blvd Bozeman 59715	Information requested			\$ 5,000.00	\$ 5,000.00	
Blewett III, Alexander P.O. Box 2807 Great Falls, MT 59403	Attorney Hoyt & Blewett			\$ 10,000.00	\$ 10,000.00	
Duval, Frank PO Box 687 Verdale, WA 99037	Retired			\$ 1,000.00	\$ 1,000.00	
Freeman, Lee P.O. Box 1295 Livingston, MT 59047	Rancher			\$ 500.00	\$ 500.00	
Gallik_David 1124 Billings Avenue Helena, MT 59624	Attorney David B. Gallik Law Office			\$ 1,000.00	\$ 1,000.00	
TOTAL RECEIPTS THIS PAGE					\$ 21,100.00	

SCHEDULE A - Receipts

9. Individual Contributors	Occupation & Employer	Description	In-Kind	Amount	Cash/Check	Totals to Date
Jones, Rita 34179 Misty Lagoon Polson, MT 59860	Retired			\$ 1,000.00	\$ 1,000.00	\$ 1,000.00
Kutzman, John P.O. Box 8131 Missoula, MT 59802	Attorney Paoli Kutzman			\$ 1,500.00	\$ 1,500.00	\$ 1,500.00
Legare, David P. P.O. Box 1080 Billings MT 59103	Attorney, Legare Law Firm			\$ 1,000.00	\$ 1,000.00	\$ 1,000.00
Matlisky, Jacob 817 Holter Street Helena, MT 59601	Project Director, MT Votes			\$ 25.00	\$ 25.00	\$ 25.00
McGarvey, Allan 345 First Avenue East Kalispell, MT 59901	Attorney McGarvey, Heberling, Sullivan & Lacey			\$ 2,000.00	\$ 2,000.00	\$ 2,000.00
Minow, Terry 502 Lower Valley Road, Boulder MT 59632	Political Director MEA-MFT			\$ 50.00	\$ 50.00	\$ 50.00
Newman, Svein 300 N. 25th St., #408 Billings, MT 59101	Lead Organizer, League of Rural Voters			\$ 25.00	\$ 25.00	\$ 25.00
Roy O'Connor 125 Bank St Ste 300 Missoula, Mt 59802	Investor			\$ 1,000.00	\$ 1,000.00	\$ 1,000.00
Schweitzer, Brian 96 Piney Pt Rd. Anaconda, MT 59711	Rancher			\$ 1,000.00	\$ 1,000.00	\$ 1,000.00
TOTAL RECEIPTS THIS PAGE					\$ 7,600.00	

SCHEDULE A - Receipts

9. Individual Contributors	Occupation & Employer	Description	In-Kind	Amount	Cash/Check	Totals to Date
Shockley, Marilee PO Box 608 Victor, MT 59875	Retired				\$ 200.00	\$ 200.00
Stern, Eric PO Box 1132 Helena, MT 59624	Deputy SOS State of Montana				\$ 400.00	\$ 400.00
Sullivan, Roger 345 First Avenue East Kalispell, MT 59901	Attorney McGarvey, Heberling, Sullivan & Lacey				\$ 5,000.00	\$ 5,000.00
Weinberg, Daniel 1524 West Lakeshore Drive Whitefish, MT 59937	Retired				\$ 3,000.00	\$ 3,000.00
Total Zadick Nancy 1901 Whispering Ridge Dr. Great Falls, mT 59405	Retired				\$ 1,000.00	\$ 1,000.00
TOTAL RECEIPTS THIS PAGE					\$ 9,600.00	
TOTAL RECEIPTS THIS REPORTING PERIOD Include ALL of Schedule A (Sections 1 - 9) in this total					\$ 302,800.00	

SCHEDULE B. Expenditures - 2014 - Pre General

Name & Address	Purpose	Date	Amount		
			Primary	General	
Harland Clarke - Valley Bank of Helena 321 Fuller Helena, MT 59601	Printed checks	9/10/2014		\$ 27.00	
Valley Bank of Helena 321 Fuller Helena, MT 59601	Wire transfer fee	10/10/2014		\$ 20.00	
Valley Bank of Helena 321 Fuller Helena, MT 59601	Wire transfer fee	10/15/2014		\$ 20.00	
Valley Bank of Helena 321 Fuller Helena, MT 59601	Wire transfer fee	10/15/2014		\$ 10.00	
Helena Stamp Works 637 Helena Avenue Helena, MT 59601	Endorsement stamp	9/23/2014		\$ 25.50	
Montana Trial Lawyers Association P.O. Box 838 Helena, MT 59624	Reimburse credit card fee	9/29/2014		\$ 56.25	
TOTAL EXPENDITURES THIS PAGE					\$158.75

3 Independent Expenditures	Purpose	Candidate/Issue	Date	Amount	
				Primary	General
Moxie Media 3301 Burke Ave N, Ste. 360 Seattle, WA 98103	Printing	Wheat	9/29/2014		\$ 18,691.81
Lake Research Partners 4722 12th Ave Northeast, Suite 101 Seattle, WA 98105	Polling	Wheat	10/01/2014		\$ 10,282.80
Moxie Media 3301 Burke Ave N, Ste. 360 Seattle, WA 98103	Production & Postage	Wheat	10/02/2014		\$ 115,388.41
Fletcher Rowley 1720 West End Avenue Suite 630 Nashville, TN 37203	Broadcast buy	Wheat	10/10/2014		\$ 72,000.00
Patinkin Research Strategies 760 Timberline Drive Lake Oswego, OR 97034	Research	Wheat	10/14/2014		\$ 750.00
Fletcher Rowley 1720 West End Avenue Suite 630 Nashville, TN 37203	Broadcast buy	Wheat	10/15/2014		\$ 20,000.00
TOTAL EXPENDITURES THIS PAGE					\$237,113.02
TOTAL EXPENDITURES THIS REPORTING PERIOD Include all of Schedule B (Sections 1 -3)					\$ 237,271.77

4. Corporate Independent Expenditures	Purpose	Candidate/Issue	Date	Amount Primary General	
Moxie Media 3301 Burke Ave N, Ste. 360 Seattle, WA 98103	Printing	Wheat	9/29/2014		\$ 29,000.00
TOTAL EXPENDITURES THIS PAGE					\$ 29,000.00
TOTAL EXPENDITURES THIS REPORT include all of Schedule B (Sections 1-4) in this total					\$ 266,271.77

EXHIBIT

C



MONTANA SECRETARY OF STATE LINDA MCCULLOCH

Business Entity Search

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Name: MORRISON, SHERWOOD, WILSON & DEOLA, PLLP

ID #: P187532

Status: ACTIVE

Status Reason: GOOD STANDING

Status Dates

Filing Date: 02/14/2011

Expiration Date: 02/14/2016

Additional Info

Counties: ALL

Purpose Code: PRACTICE OF LAW

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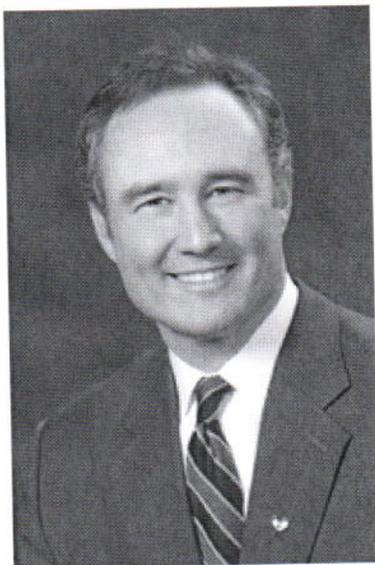
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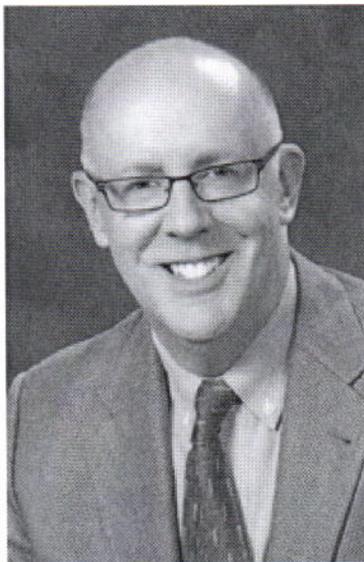
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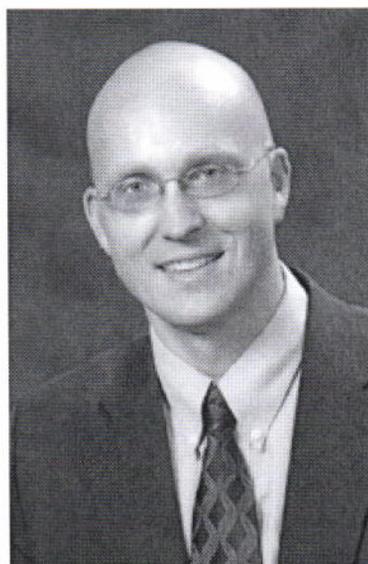
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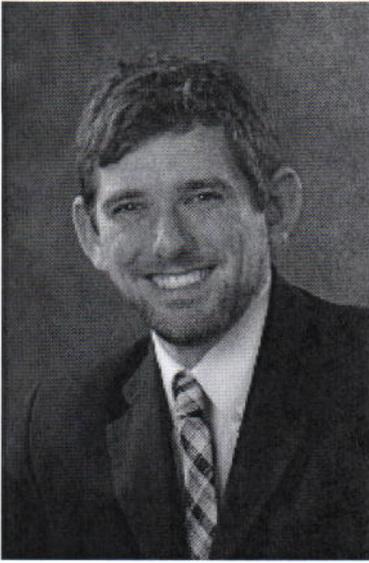
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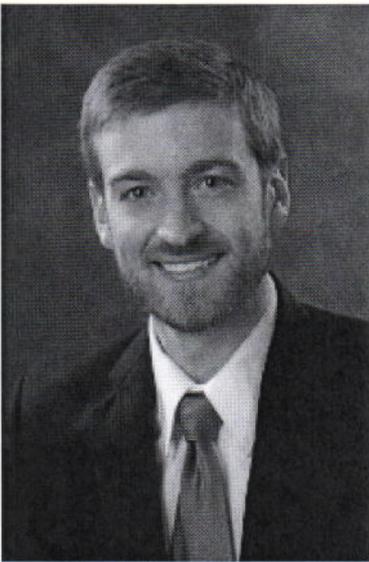
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