

BEFORE THE COMMISSIONER OF
POLITICAL PRACTICES OF THE STATE OF MONTANA

Jeffrey A. Mangan, Commissioner of Political Practices To John Hollowell No. NC-19-001	ORDER OF NONCOMPLIANCE
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WHEREAS, the above-named individual, John Hollowell, was a candidate for Mayor of Miles City, Montana in 2015 and 2019 as evidenced by an examination of his Statements of Candidate filed with the Commissioner of Political Practices;

WHEREAS, Tanniel Kuchynka, is listed as the duly appointed Treasurer for both his 2015 and 2019 campaigns as evidenced by an examination of the Statement of Candidate filed with the Commissioner of Political Practices;

WHEREAS, a General Election was held on November 5, 2019; and

WHEREAS, Raelee Hollowell contacted the COPP via email on November 7, 2019, two days after the General Election, regarding reporting election expenses; and

WHEREAS, the candidate failed to properly report campaign activity by:

- As last reported on January 14, 2016, Mr. Hollowell's 2015 campaign had a remaining positive balance of \$253.82, the COPP

did not receive his 2015 closing campaign finance report, nor were the biannual reports filed as required by Mont. Code Ann. §§ 13-37-226(2)(d) and 13-37-228;

- Failing to properly dispose of excess 2015 campaign funds in an amount no less than \$253.82 as required per Montana law by donating funds to a charity or returning the funds to contributors, Mont. Code Ann. § 13-37-240;
- Failing to timely report and disclose 2019 campaign contributions and expenditures, including at least one (1) expenditure of \$559.18 on yard signs on October 9, 2019, and an initial contribution received from the 2015 campaign in the amount of \$573.40;
- Using those carryover 2015 campaign funds to pay for 2019 campaign activities, Mont. Code Ann. §13-37-128.

In order to come into compliance, Mr. Hollowell or his treasurer shall;

- Properly account for the 2015 campaign's financial contribution of \$573.40 to the 2019 campaign, an amount \$319.58 greater than what Mr. Hollowell's final 2015 campaign finance report disclosed as having cash in bank;
- File a 2015 a campaign finance report closing his 2015 campaign, properly reporting any additional contributions received by the 2015 campaign that would bring the cash in bank total from the previously disclosed \$253.82 to the actual amount of \$573.40, as

well as the disbursement of all surplus campaign funds according to Mont. Code Ann. § 13-37-240 and Mont. Admin. R. 44.11.701;

- File the required Campaign Finance (C5) reports for the 2019 campaign.

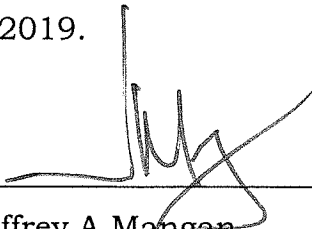
A copy of the June 24, 2019 Statement of Candidate is attached, as is the revised Statement of Candidate filed on November 7, 2019; the November 7, 2019 email; and a copy of the final campaign finance reports filed by Mr. Hollowell in 2015. Also attached is the 2019 campaign finance report filed on November 14, 2019, as well as the complete 2019 City Candidate Reporting Calendar.

IT IS FURTHER ORDERED, pursuant to 13-37-121, MCA, that John Hollowell is and is declared to be in NONCOMPLIANCE with the provisions of sections Mont. Code Ann. §§ 13-37-225, 226, 229 and 13-37-240, and Mont. Admin. R. 44.11.302 and 44.11.702; and

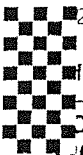
IT IS FURTHER ORDERED, that a County Attorney or the Commissioner may, on failure by John Hollowell to submit appropriate campaign finance report/s accounting for the unreported activity within 5 days after receiving this Order of Noncompliance, including the proper disposal of a minimum of \$253.82 to charity or 2015 donors, may initiate a civil action pursuant to sections 13-37-124 and 13-37-128, MCA; and

FURTHER, if John Hollowell is aggrieved by the issuance of this Order of Noncompliance, it may seek judicial review in District Court pursuant to section 13-37-122, MCA.

DATED this 02 day of December 2019.



Jeffrey A Mangan
Commissioner of Political Practices
Of the State of Montana
P. O. Box 202401
1209 8th Avenue
Helena, MT 59620
Phone: (406)-444-3919



THE STATE OF MONTANA

COMMISSIONER OF POLITICAL PRACTICES

1209 Eighth Avenue
Post Office Box 202401
Helena, MT 59620-2401
TELEPHONE: 406-444-2942
FAX NUMBER: 406-444-1643
WEBSITE: www.politicalpractices.mt.gov

FOR OFFICE USE ONLY
Date Received and Postmark Date

RECEIVED
2019 FEB 22
10:15 AM

Form C-1-A (Revised 01/18)

Statement of Candidate

TO BE FILED by CANDIDATE for COUNTY, MUNICIPAL or SCHOOL OFFICE

ORIGINAL FILING AMENDED FILING

TYPE OR PRINT IN INK ALL INFORMATION WITH EXCEPTION OF SIGNATURE

FULL NAME OF CANDIDATE John L Hollowell III

COMPLETE DESCRIPTION OF OFFICE SOUGHT Mayor of Miles City

PARTY AFFILIATION, if any _____ COUNTY OF RESIDENCE Custer

COMPLETE MAILING ADDRESS 708 S. Stacy Ave, Miles City MT 59301
(Including City, State, Zip Code)

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

E-Mail Address (Please Print) _____ Home Telephone Number 406 234 9326 Work Telephone Number 406 853 1469 Facsimile Number _____

FULL NAME OF CAMPAIGN TREASURER Tanneil Kuchunka

COMPLETE MAILING ADDRESS 504 S Lake, Miles City, MT 59301
(Including City, State, Zip Code)

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

E-Mail Address (Please Print) tanneilkuchunka@jphn.com Home Telephone Number (406) 852-0940 Work Telephone Number _____ Facsimile Number _____

FULL NAME OF DEPUTY TREASURER, if any _____
(Must be registered to vote in Montana)

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

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

CAMPAIGN ACCOUNT INFORMATION

FULL NAME OF BANK First Interstate Bank (John Hollowell For Mayor: Acct)

COMPLETE ADDRESS PO Box 1237, Miles City, MT 59301
(Including City, State, Zip Code)

AFFIDAVIT OF REPORTING STATUS (Check one) a treasurer and bank must be designated.

- B I certify that I expect the total amount of contributions or expenditures will not exceed \$500 (including personal funds); however, if more than \$500 is received and/or expended, within 5 days of reaching this threshold I will file an initial financial report (form C-5) and I will file additional financial reports according to schedule.
- C I expect to receive contributions and/or make expenditures exceeding \$500 (including personal funds). I will file an initial financial report (form C-5) according to schedule.

CERTIFICATION: I declare under penalty of perjury and under the laws of the state of Montana that the foregoing is true, complete and correct.

Candidate's Signature [Signature]

Date Jan 24, 2019

Statement of Candidate (C1 or C1-A)

Candidate Information

Candidate Full Name: Hollowell, John L
Mailing Address: 708 S Stacy Ave Miles City, MT 59301
Physical Address: 708 S Stacy Ave Miles City, MT 59301
Home Phone: (406) 234-9326
Alternate Phone:
Campaign Email Address: johnhollowell.mayor@yahoo.com
Election Year: 2019
Candidate Type: City
Office Sought: Mayor
Resident County: Custer
Political Party: Unknown
Current Status: In Process
Date Filed: 11/07/2019
Amended Date:
D1 Received Date:
C118 Received Date:
Reporting Status: Will spend more than \$500
Bank Full Name: First Interstate Bank
Bank Address: PO Box 1237 Miles City, MT 59301

Campaign Treasurer Information

Treasurer Full Name: Kuchynka, Tanniel M
Mailing Address: 504 S Lake Miles City, MT 59301
Physical Address: 504 S Lake Miles City, MT 59301
Home Phone: (406) 852-0940
Alternate Phone:
Home or Personal Email Address: tanneilkuchynka@yahoo.com

Deputy Treasurer Information

Cook, Scott

From: CPP Help
Sent: Thursday, November 07, 2019 4:44 PM
To: Cook, Scott
Subject: FW: [EXTERNAL] Questions

Follow Up Flag: Follow up
Flag Status: Flagged

From: John Hollowell <johnhollowell.mayor@yahoo.com>
Sent: Thursday, November 7, 2019 3:47 PM
To: CPP Help <cpphelp@mt.gov>
Subject: [EXTERNAL] Questions

Hello there! I am trying to clean up the account for John Hollowell. So John ran for mayor of Miles City in 2015. We have individual donations given during this election which I believe was filed. There was an amount left over as he went into office for his 4 year term. When we began the campaign for 2019 I know there was 573.40 available in the account. When I ordered signs we did not have a debit card to order yard signs so I used our own debit card to pay for the yard signs (559.18) and that money in the account was used to pay our account back (559.18). I reported this transaction on the C-5 for September 27th through October 15th schedule (hopefully I did this correctly). John did receive a donation in the amount of 100.00 which I recorded in the current C-5 report. Now there is currently 14.22 in excess in the account that is not accounted for in the electronic reports. I am not sure what to do with that. Sorry for the mess, I am not privy to this stuff but I am learning...thanks to your office 😊

Thank you for your guidance!

Raelee Hollowell

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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2016 JAN 14 A 10:42

COMMISSIONER OF
POLITICAL PRACTICES

FORM C-5 (Revised 08/08)

CANDIDATE CAMPAIGN FINANCE REPORT

FINAL REPORT!

ORIGINAL FILING

OR

AMENDED FILING

REPORTING PERIOD: From 10/23/15 To 11/7/15

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

John Hollowell
FULL NAME OF CANDIDATE
108 S Stacy Ave, Miles City, MT 591301
COMPLETE MAILING ADDRESS
(Include City, State, Zip Code)

COMPLETE DESCRIPTION
OF OFFICE SOUGHT
(Required)

<input type="checkbox"/>	Initial Report
<input checked="" type="checkbox"/>	Periodic Report
<input type="checkbox"/>	Closing Report
<input type="checkbox"/>	No transactions in period

CASH SUMMARY: MONEY RECEIVED AND SPENT

- CASH IN BANK - Balance from previous report.....
- RECEIPTS - Total received and deposited this period from Schedule A.....
- CORRECTIONS - Addition or subtraction from Schedule D (Circle: + or --)
Subtotal.....
- EXPENDITURES - Total paid out this period from Schedule B.....
- CASH IN BANK - Ending balance this report.....

PRIMARY	
\$	100.42
\$	660.00
+	
-- \$	
\$	
-- \$	506.60
\$	253.82

GENERAL	
\$	
\$	
+	
-- \$	
\$	
-- \$	
\$	

CERTIFICATION

I, Tanneil Kuchynka, Treasurer, 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.

Tanneil Kuchynka
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 the Commissioner of Political Practices.

TYPE OR PRINT CLEARLY IN INK

SCHEDULE A. Receipts - This Reporting Period (continued)	Date Received Required	In-Kind Description & Value		Cash or Check Amount		Total to Date Amount	
		PRIMARY	GENERAL	PRIMARY	GENERAL	PRIMARY	GENERAL
9. Individual Contributors of 9/30/2016							
5. Political Action Committee Contributions Committee's full registered name and complete mailing address REQUIRED							
Nancy Mitchell Registered Name 1700 Tompa St. Address Miles City MT 59301 City, State, Zip Code	10/24 Retired				\$ 50 ⁰⁰		\$ 50 ⁰⁰
Jeff Williams Registered Name 1021 W 8th Ave Address Miles City MT 59301 City, State, Zip Code	10/24 Physician/Doctor Holy Rosary Healthcare				\$ 170 ⁰⁰		\$ 170 ⁰⁰
Terri Schmidt Registered Name PO Box 1348 Address Miles City MT 59301 City, State, Zip Code	10/24 Retired				\$ 100 ⁰⁰		\$ 100 ⁰⁰
Becky Stanton Registered Name 333 Arrowhead St Address Miles City MT 59301 City, State, Zip Code	10/23 Retired				\$ 170 ⁰⁰		\$ 170 ⁰⁰
Ron Stanton Registered Name 333 Arrowhead St Address Miles City MT 59301 City, State, Zip Code	10/23 Retired				\$ 170 ⁰⁰		\$ 170 ⁰⁰
TOTAL RECEIPTS THIS PAGE					\$ 660 ⁰⁰		

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

TYPE OR PRINT CLEARLY IN INK

SCHEDULE B. Expenditures - This Reporting Period	Purpose	Date	Amount	
			PRIMARY	GENERAL
1. PETTY CASH Expenditures (TOTAL THIS PERIOD)				
2. All Other Expenditures Full name and complete mailing address of each payee <u>REQUIRED</u>				
Miles City Star Name Main Street Address Miles City, MT 59301 City, State, Zip Code	Newspaper Ads	10/27		\$500 ⁰⁰
XXXXXXXXXX Name XXXXXXXXXX Address XXXXXXXXXX City, State, Zip Code	XXXXXXXXXX			
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 ALL of Schedule B (Sections 1 & 2) in this total				\$500 ⁰⁰

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

#0772 P. 005/008
CridCo_water
01/14/2016 10:39 406 232 2151

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

FOR OFFICE USE ONLY
Date Received and Postmark Date

FORM C-5 (Revised 08/08)

CANDIDATE CAMPAIGN FINANCE REPORT

ORIGINAL FILING



OR

AMENDED FILING

REPORTING PERIOD: From

To

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

<p><u>John Hollowell</u> FULL NAME OF CANDIDATE</p> <p><u>708 S. Stacy Ave, Miles City, MT, 59301</u> COMPLETE MAILING ADDRESS <small>(Include City, State, Zip Code)</small></p>	<p>COMPLETE DESCRIPTION OF OFFICE SOUGHT (Required)</p>	<p><input checked="" type="checkbox"/> Initial Report <input type="checkbox"/> Periodic Report <input type="checkbox"/> Closing Report <input type="checkbox"/> No transactions in period</p>
<p>CASH SUMMARY: MONEY RECEIVED AND SPENT</p> <p>1. CASH IN BANK – Balance from previous report.....</p> <p>2. RECEIPTS – Total received and deposited this period from Schedule A.....</p> <p>3. CORRECTIONS – Addition or subtraction from Schedule D (Circle: + or -)</p> <p style="text-align: right;"><i>Subtotal</i>.....</p> <p>4. EXPENDITURES – Total paid out this period from Schedule B.....</p> <p>5. CASH IN BANK – Ending balance this report.....</p>	<p style="text-align: center;">PRIMARY</p> <p>\$ _____</p> <p>\$ <u>810⁰⁰ TR</u></p> <p>+ _____</p> <p>- \$ _____</p> <p>\$ _____</p> <p>- \$ <u>609⁵⁸</u></p> <p>\$ <u>200⁴² TR</u></p>	<p style="text-align: center;">GENERAL</p> <p>\$ _____</p> <p>\$ <u>810⁰⁰ TR</u></p> <p>+ _____</p> <p>- \$ _____</p> <p>\$ _____</p> <p>- \$ <u>609⁵⁸</u></p> <p>\$ <u>200⁴² TR</u></p>

I, Tanneil Kuchynka, Treasurer, 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.

Tanneil Kuchynka
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 the Commissioner of Political Practices.

#0772 P. 006/008

CridCo_Water

01/14/2016 10:39 406 232 2151

TYPE OR PRINT CLEARLY IN INK

SCHEDULE A. Receipts - This Reporting Period (continued)							
9. Individual Contributors of \$35 or More <i>REQUIRED:</i> ONE NAME ONLY FOR EACH CONTRIBUTION Full name, complete mailing address, occupation, & employer		In-Kind Description & Value PRIMARY GENERAL		Cash or Check Amount PRIMARY GENERAL		Total to Date Amount PRIMARY GENERAL	
Susan M Stanton <small>Name</small> 317 Arrowhead Dr. <small>Address</small> Miles City, MT 59301 <small>City, State, Zip Code</small>		Retired <small>Occupation</small> <small>Employer</small>		(9/18) \$250 ⁰⁰		\$250 ⁰⁰	
Ricky Tanneil Kuchynka <small>Name</small> 504 S Lake <small>Address</small> Miles City, MT 59301 <small>City, State, Zip Code</small>		Teacher <small>Occupation</small> CCDS <small>Custer District</small> <small>Employer</small>		(9/18) \$100 ⁰⁰		\$100 ⁰⁰	
Iris E. Spence <small>Name</small> 23 Arrowhead Dr. <small>Address</small> Miles City, MT 59301 <small>City, State, Zip Code</small>		Retired <small>Occupation</small> <small>Employer</small>		(10/19) \$10 ⁰⁰		\$10 ⁰⁰	
Barb Cole <small>Name</small> 101 S Custer Ave <small>Address</small> Miles City, MT 59301 <small>City, State, Zip Code</small>		Retired <small>Occupation</small> <small>Employer</small>		(10/15) \$50 ⁰⁰		\$50 ⁰⁰	
Travis Silver <small>Name</small> P.O. Box 313 <small>Address</small> Miles City, MT 59301 <small>City, State, Zip Code</small>		U.S. Coast Guard <small>Occupation</small> U.S. Coast Guard <small>Employer</small>		(10/16) \$100 ⁰⁰		\$100 ⁰⁰	
TOTAL RECEIPTS THIS PAGE				\$510 ⁰⁰			
TOTAL RECEIPTS THIS REPORTING PERIOD <small>include ALL of Schedule A (Sections 1 - 9) in this total</small>				\$810 ⁰⁰			

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

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CridCo_Water

01/14/2016 10:39 405 232 2151

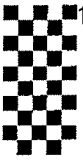
SCHEDULE A. Receipts - This Reporting Period (continued)						
9. Individual Contributors of \$35 or More <i>REQUIRED: ONE NAME ONLY FOR EACH CONTRIBUTION</i> Full name, complete mailing address, occupation, & employer	In-Kind Description & Value		Cash or Check Amount		Total to Date Amount	
	PRIMARY	GENERAL	PRIMARY	GENERAL	PRIMARY	GENERAL
Name: <u>TANIS EVART</u> Address: <u>600 S. Center Ave.</u> <u>Miles City, MT 59301</u> City, State, Zip Code	Occupation: <u>Rad Tech</u> Employer: <u>Holy Rosary Healthcare</u>			(10/18) \$100 ⁰⁰		\$100 ⁰⁰
Name: <u>Dan Hollowell</u> Address: <u>1008 Pondosa</u> <u>Miles City, MT 59301</u> City, State, Zip Code	Occupation: <u>Self-Employed</u> Employer: <u>Self</u>			(10/20) \$100 ⁰⁰		\$100 ⁰⁰
Name: <u>Polly Peterson</u> Address: <u>40 Green Acres Dr</u> <u>Miles City, MT 59301</u> City, State, Zip Code	Occupation: <u>Teacher</u> Employer: <u>MSU-Bozeman</u>			(10/29) \$100 ⁰⁰		\$100 ⁰⁰
Name: _____ Address: _____ City, State, Zip Code: _____	Occupation: _____ Employer: _____					
Name: _____ Address: _____ City, State, Zip Code: _____	Occupation: _____ Employer: _____					
TOTAL RECEIPTS THIS PAGE						\$300 ⁰⁰
TOTAL RECEIPTS THIS REPORTING PERIOD <i>Include ALL of Schedule A (Sections 1 - 9) in this total</i>						\$910 ⁰⁰

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED

TYPE OR PRINT CLEARLY IN INK

SCHEDULE B. Expenditures – This Reporting Period	Purpose	Date	Amount	
			PRIMARY	GENERAL
1. PETTY CASH Expenditures (TOTAL THIS PERIOD)				
2. All Other Expenditures Full name and complete mailing address of each payee REQUIRED				
<u>Super Cheap Signs, Com</u> <small>Name</small> <u>9200 Waterford Centre Blvd. / Suite 100</u> <small>Address</small> <u>Austin, TX 78758</u> <small>City, State, Zip Code</small>	Campaign Yard Signs	10/14/15		\$489 ⁵⁸
<u>Sue Stanton</u> <small>Name</small> <u>317 Arrowhead Dr.</u> <small>Address</small> <u>Miles City, MT 59301</u> <small>City, State, Zip Code</small>	max donation refund (\$80 ⁰⁰) webpage domain (\$12 ⁰⁰)	10/20/15		\$92 ⁰⁰
<u>First Interstate Bank</u> <small>Name</small> <u>(Harland Clarke Check Order)</u> <small>Address</small> <u>Miles City, MT 59301</u> <small>City, State, Zip Code</small>	check order for account	10/7/15		\$28 ⁰⁰
<small>Name</small> <small>Address</small> <small>City, State, Zip Code</small>				
<small>Name</small> <small>Address</small> <small>City, State, Zip Code</small>				
TOTAL EXPENDITURES THIS PAGE--INCLUDING PETTY CASH				\$591⁵⁸ \$609 ⁵⁸
TOTAL EXPENDITURES THIS REPORTING PERIOD ALL of Schedule B (Sections 1 & 2) in this total				

IF ADDITIONAL PAGES ARE NEEDED, THIS FORM MAY BE REPRODUCED



Faxed 12/1/15
Hardcopy Mailed
Faxed 1/14/16
Hardcopy Mailed

John Hollowell for Mayor

c/o Tanneil Kuchynka, Treasurer
504 S Lake, Miles City, MT 59301

Phone: 406-232-1492
E-mail:
tanneilkuchynka@yahoo.com

facsimile transmittal

To: Elyssa Spaeth
From: Tanneil Kuchynka
Re: John Hollowell C-5
Cc: Finance Report

Fax: (406) 444-1613
Date: ~~12/9/15~~ Refaxed 1/14/16 TK
Pages: 7 to follow

- Urgent
- For review
- Please comment
- Please reply
- Please recycle

Final Report 10/18-11/18
Elyssa, (No new activity)
Corrections have been made.
Thank you,
Tanneil
(I am sending a hard copy by mail.)

confidential

Candidate Campaign Finance Report (C-5)

Candidate Information

Date Filed: 11/07/2019
 D1 Received Date:
 C118 Received Date:

Original Filing for: 10/16/2019 - 11/15/2019
 Report Type: Initial
 Receive and File Date: 11/14/2019
 Report Status: Filed

Hollowell, John L
 708 S Stacy Ave, Miles City, MT 59301

Election Year: 2019

Resident County: Custer
 (406) 234-9326
 johnhollowell.mayor@yahoo.com

Office Sought: Mayor
 Political Party: Unknown

Candidate Type: City
 Candidate Status: In Process

Treasurer:
 Kuchynka, Taniel M
 504 S Lake Miles City, MT 59301

Bank Information:
 First Interstate Bank
 PO Box 1237 Miles City, MT 59301

Summary Report

Cash Summary: Money Received and Spent

		Primary	General
1. Cash in Bank - Balance from previous report		\$0.00	\$0.00
2. Receipts - Total Received and deposited this period	+	<u>\$0.00</u>	<u>\$673.40</u>
	Subtotal	\$0.00	\$673.40
3. Expenditures - Total paid out this period	-	<u>\$0.00</u>	<u>\$559.18</u>
4. Cash in Bank - Ending Balance this report		\$0.00	\$114.22

Candidate Contributions

Election	Description	In-Kind Value	Cash/Check Amount	Total to Date
General	Carry over of previous campaign balance	\$0.00	\$573.40	<u>\$0.00(P)</u> <u>\$1,132.58(G)</u>
General	Yard signs (100)	\$559.18	\$0.00	<u>\$0.00(P)</u> <u>\$1,132.58(G)</u>

Loans

Entity	Occupation/ Employer	Election Date	In-Kind Description	Value	Cash/Check Amount	Total to Date
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Fundraisers

Entity	Election Purpose	Date	In-Kind Description	Value	Cash/Check Amount	Total to Date
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Committee Contributions

Entity	Committee Type	Election Date	In-Kind Description	Value	Cash/Check Amount	Total to Date
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Individual Contributors (Total Contributions < \$35: \$0.00) (Primary Contributions < \$35: \$0.00) (General Contributions < \$35: \$0.00)

Entity	Occupation/ Employer	Election	In-Kind	Cash/Check		Total to Date
			Description	Value	Amount	
Eckart, Tanis R 609 N. Center, Miles City, MT 59301	Radiology Technician Holy Rosary Healthcare	General		\$0.00	\$100.00	\$0.00(P)
						\$100.00(G)

Expenditures: Petty Cash

Election	Purpose	Date	Amount
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Expenditures: Other

Entity	Election	Purpose	Date	Amount
Hollowell, John L 708 S Stacy Ave, Miles City, MT 59301	General	Reimbursement for yard sign	10/15/2019	\$559.18

Debts

Entity	Election	Type	Purpose	Date	Debt Amount	Balance Due
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Payments Only

Entity	Type	Debt Amount	Date	Paid Amount	Balance Due
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2019 City Candidates

Candidate Finance Report Calendar Primary and General Elections

Report form C-5 must be filed for each reporting period to disclose all transactions, if any that occurred during the specific reporting period.

Filing Deadline	Reporting Period
August 6, 2019	C-5: Pre-Primary/Date of first contribution through August 1 st
August 24 th -September 10 th (C-7 primary election reporting period)	Primary candidates must file a C-7 (within 48 hours) any time a contribution of \$100 or more is received between August 24 th and September 10 th
August 29, 2019	C-5: August 2 nd through August 24 th
August 31 st -September 10 th	Clean Campaign Period (for primary)
--September 10: Primary Election--	
September 30, 2019	C-5: Post Primary/August 25 th through September 25 th If not nominated in Primary
October 1, 2019	C-5: Pre-General/August 25 th through September 26 th If going through to General
October 16 th -November 5 th (C-7 and C-7E general election reporting period)	Candidates must file a C-7 (within 48 hours) any time a contribution of \$100 or more is received between October 16 and November 5 th
	Candidates must file a C-7E (within 48 hours) any time an expenditure or debt of \$100 or more is made between October 16 and November 5 th
October 20, 2019	C-5: September 27 th through October 15 th
October 26 th -November 5 th	Clean Campaign Period (for general)
--November 5: General Election--	
Starting November 2019, all candidates—regardless of candidate type (e.g. statewide, district, city, etc.) will follow the exact same C-5 reporting calendars. All candidate campaign finance reports will be due on the same dates.	
November 20, 2019	C-5: Post General/October 16 th through November 15 th <i>(May also be the closing report if all debts are paid and no more campaign activity is anticipated; otherwise a closing report must be filed later.)</i>
March 10, 2020	C-5: Required only if 2019 campaign account still open, covers November 16 through March 5, 2020.
September 10, 2020	C-5: Required only if 2019 campaign account still open, covers March 6 through September 6 th