

Commissioner of Political Practices
1205 Eighth Avenue
Post Office Box 202401
Helena, MT 59620-2401
Phone: 406-444-2942
Fax : 406-444-1643
www.politicalpractices.mt.gov

FOR OFFICE USE ONLY

RECEIVED
COMMISSIONER OF
POLITICAL PRACTICES

2012 MAY 29 A 8:38

HAND DELIVERED

CERTIFIED MAIL

SIGNED/NOTARIZED

plus CD

Campaign Finance and Practices

Complaint Form (10/09)

Type or print in ink all information on this form except for verification signature

Person bringing complaint (Complainant):

Complete Name Gary DeLorenzo

Complete Mailing Address P.O. Box 847
Eureka MT 59917

Phone Numbers: Work Same Home 406-889-3741

Person or organization against whom complaint is brought (Respondent):

Complete Name Gilbert (Butch) Cate, Jr.

Complete Mailing Address 42 Carpenter Lane
Eureka MT 59917

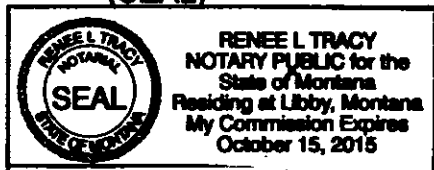
Phone Numbers: ^{Wife's} Work Fax 406-889-3787 Home 406-889-3834
~~#~~ Phone 406-889-3311 Fax 406-889-5834

Please complete the second page of this form and describe in detail the facts of the alleged violation.

State of Montana, County of LEWIS & CLARK

I, Gary DeLorenzo, being duly sworn, state that the information in this Complaint is complete, true, and correct, to the best of my knowledge and belief.

(SEAL)



Gary DeLorenzo
Signature of Complainant

Subscribed and sworn to before me this 25 day of

May, 2012

[Signature]
Notary Public

My Commission Expires:

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.

Chapter 37 Title 13 Elections Part 2
CONTROL of Campaign Practices Campaign Finance

13-37-201 No Campaign Treasurer NONE Filed

13-37-205 Campaign Depositories NONE Filed

13-37-207 Deposit of Contributions - Statement of Campaign Treasurer NONE Filed

13-37-208 Treasurer To Keep Records NONE Filed

13-37-225 Reports of Contributions and Expenditures Required NONE Filed

13-37-229 Disclosure of Contributions NONE Filed

13-37-230 Disclosure of Expenditures Made NONE Filed

13-37-121 INSPECTION of STATEMENTS and REPORTS -
-ISSUANCE of orders of Non compliance

Money SPENT on TV ads and road signs are
proof Mr Cate has NO intention To Comply with
campaign Finance practices After checking A
Affidavit of reporting status on Form C-1-A
dated 3-8-12 and postmarked Mar 12 2012

Complaints must be:

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

THE STATE OF MONTANA

COMMISSIONER OF POLITICAL PRACTICES
1206 Eighth Avenue
Post Office Box 202401
Helena, MT 59620-2401
TELEPHONE: 406-444-2942
FAX NUMBER: 406-444-1843
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POSTMARKED
MAR 12 2012

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Date Received and Postmark Date
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COMMISSIONER OF
POLITICAL PRACTICES

2012 MAR 13 A 9 32

Form C-1-A (Revised 07/11)

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 Gilbert Cate Jr.

COMPLETE DESCRIPTION OF OFFICE SOUGHT County Commissioner Dist #3

PARTY AFFILIATION, if any _____ COUNTY OF RESIDENCE Lincoln

COMPLETE MAILING ADDRESS 42 Carpenter Lane, Eureka, MT 59917
(Including City, State, Zip Code)

COMPLETE STREET ADDRESS 42 Carpenter Lane, Eureka, MT 59917
(Including City, State, Zip Code)

E-Mail Address (Please Print) cate@kermt.com Home Telephone Number 406-889-3834 Work Telephone Number 406-277-4192 Facsimile Number 889-3787

FULL NAME OF CAMPAIGN TREASURER _____
(Must be registered to vote in Montana)

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 _____

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 _____

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

AFFIDAVIT OF REPORTING STATUS (Check one) *If B or C box is checked, a treasurer and bank must be designated.*

A I certify that I will not receive or expend any funds (including personal funds) in support of my candidacy for above office.

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 financial reports (form C-5) according to schedule.

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

Candidate's Signature X Gilbert Cate Jr. Date 3-8-12

Notice: You must follow up with a signed hard copy to DEP



TOBACCO VALLEY COMMUNICATIONS

300 Dewey Avenue Eureka, MT 59917
office: 889-3099 fax: 889-3787

Office Contact:
Donna Cate 889-3099

Sales & Visual Designers
Marita and Kenneth Combs 889-3833

Advertise on Eureka's very own Channel 4-TV



Readerboard of community events, local weather and news

Advertise 4 to 6 times an hour
24 hours a day

Reach over 500 households in and around Eureka

*T.V. ad still runs
CONTACT Marita for
COST copy of Mr. Cate's Bill*

- One week \$20
- Two weeks \$35
- Three weeks \$40
- One month \$50
- 2nd > month \$40
- Simple changes no charge
- Changes, complex pre-arranged
- Changes, frequent pre-arranged
- Scanning \$8
- Image/logo manipulation \$10 for Microsoft Word files with extension [.doc] or time over 10 minutes

*Note
ad says paid for
by Cate for CTV Comm*

ADVERTISEMENT SPECS

- Ads are one or more visual panels placed together and aired as one unit. It takes 2-3 days to create visuals and insert them into the TV script and longer if scanning is included, so it is recommended you provide us with your information as early as possible. The earlier, the more airtime you will receive.
- Few, concise words per panel are more readable and attracting. The visual designer may edit your text to enhance this unless you specify otherwise. Pricing is not according to number of words.
- If you have a business color, your television panels will match it as close as possible.
- Digital clipart, logo or pictures are accepted, in color or black and white. Filename should have extension [.jpg] or [.tif]. Please provide it on PC floppy or email to dcate@interbel.net. Image preparation by visual designer generally takes less than 10 minutes.
- Changes to panels during airtime are possible.

FROM >

Dehorenzo
PO Box 847
Eureka MT
59917

CERTIFIED MAIL



7011 2000 0000 9239 7148

Hasler

05/25/2012

US POSTAGE

FIRST-CLASS MAIL

\$06.35⁰⁰



ZIP 59923
011D11627429

TO >

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BUBBLEMailer