FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 8
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5
Matt Rosenda	le for Montana	
ADDRESS (number and stre	PO Box 4907	
(Check if addres		
is changed)	Helena	MT 59604-4907
		STATE ZIP CODE
COMMITTEE'S E-MAIL AE	DRESS	
(Check if addrest is changed)		M
	Optional Second E-Mail Address	
COMMITTEE'S WEB PAGI		
2. DATE 09	25 / Y Y Y Y 2020	
3. FEC IDENTIFICATIO	NNUMBER ► C C00548289	
4. IS THIS STATEMENT	NEW (N) OR AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it	t is true, correct and complete.
Type or Print Name of Trea	asurer HOBBS, CABELL, , ,	
Signature of Treasurer	HOBBS, CABELL, , , [Electronically Filed]	Date 09 25 2020
NOTE: Submission of false,	erroneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

		—
	FEC Fo	Page 2
		COMMITTEE
Ca	ndidate	e Committee:
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	ne of ndidate	Rosendale, Matt, , Mr.,
	ndidate ty Affiliati	ion REP Office Sought: X House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	ne of ndidate	
Pa	rty Con	nmittee:
(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Pol	litical A	Action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joir	nt Func	draising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4.	FEC ID number

FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

Matt Rosendale for Montana

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

CRUZ ZU FOR ZU VI				
Mailing Address	PO BOX 341027			
	AUSTIN		TX 7873	34
	CITY		STATE	ZIP CODE
	ted Organization	Joint Fundraisir	ng Representative	Leadership PAC Sponsor
Custodian of Records: lo				
books and records.	lentify by name, address (phone number -	- optional) and pos	ition of the person in	possession of committee
books and records.	lentify by name, address (phone number -	- optional) and pos	ition of the person in	possession of committee
books and records.	, CABELL, , ,	- optional) and pos	ition of the person in	possession of committee
books and records.		- optional) and pos	ition of the person in	possession of committee
books and records. HOBBS Full Name	, CABELL, , ,	- optional) and pos	ition of the person in	possession of committee
books and records. HOBBS Full Name	, CABELL, , ,	- optional) and pos	MT 596	

Telephone number	

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	GALT, ERROL, , ,
Mailing Address	4071 RANCH LANE
	MARTINSDALE
	CITY STATE ZIP CODE
Title or Position TREASURER	Telephone number 406 572 3312

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Full Name of Designated Agent	HOBBS, CA	ABELL, , ,																						
Mailing Address		PO BOX 49	07																					
														Ľ	MT		5	960	4			- [
					С	ITY								ST/	AT E					ZIP	СС	DDE		
Title or Position											eph													

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

EAGLE	E BANK		
Mailing Address	2001 K ST NW		
			20006
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address	1909 K ST NW		
			20006
	CITY	STATE	ZIP CODE

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5(g) or (h).	Joint	Fundraising	Participant:
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1. [FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor DAINES ROSENDALE 2020

Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	└ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │	22314
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																															
Mailing Address																				1		1							1	1	
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														Te	lep	hor	ne	Nu	mbe	ər				 - L				- [

Name of Bank, WELLS Depository, etc.	5 FARGO		
Mailing Address	8302 WOODMONT AVE		
		MD	
	CITY A	STATE A	ZIP CODE

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5(g) or (h).	Joint	Fundraising	Participant:
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1. [FEC ID number	
2.	FEC ID number C	
3.	FEC ID number	
4.	FEC ID number	

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor FREEDOMWORKS VICTORY 2020

Mailing Address	PO BOX 26141				
-					
				VA 223	313
Relationship:		CITY 🔺		STATE A	ZIP CODE
Connected	Organization	ated Committee	× Joint Fundraising	Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name				
Mailing Address				
TITLE OR POSITION	7	CITY A	STATE A	ZIP CODE
		Telephon	ne Number	

Name of Bank, Depository, etc.									1			1			1									
Mailing Address																								
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5(g)	or(h). Joint Fundraisin	g Participant:		
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	3.		FEC ID number	C
	4.		FEC ID number	C
6	Nome of Any Connected	Organization, Affiliated Committee, Joint Fundra	ioing Donrocontativ	a ar Loodorshin DAC Shonoor
6.	GT FARM TEAM	-	asing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE 🔺	ZIP CODE
			STATE	
8.	Connected			
8.	Connected	d Organization Affiliated Committee X Joint		
8.	Designated Agent: Identify	d Organization Affiliated Committee X Joint		
8.	Designated Agent: Identify	d Organization Affiliated Committee X Joint		
8.	Designated Agent: Identify	d Organization Affiliated Committee X Joint		
8.	Designated Agent: Identify	Affiliated Committee		
8.	Connected Connec	Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor

Name of Bank, Depository, etc.																							
Mailing Address																							
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5(g) or (h).	Joint	Fundraising	Participant:
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1.	FEC ID number	С
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3.	FEC ID number	C
4.	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor ROSENDALE VICTORY FUND 2020

Mailing Address	1390 CHAIN BRIDGE ROAD #515	
	MCLEAN	VA 22101
Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
Connected	Organization Affiliated Committee	X Joint Fundraising Representative

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																													
Mailing Address																													
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