

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Matt Rosendale for Montana

ADDRESS (number and street)

PO Box 4907



Check if different than previously reported. (ACC)

Helena

MT

59604-4907

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00548289

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

MT

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2019

through

M M / D D / Y Y Y Y  
03 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Galt, Errol, , Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

Galt, Errol, , Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
04 / 15 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 23

Write or Type Committee Name

Matt Rosendale for Montana

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	9

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	3800.00	3820.00
(b) Total Contribution Refunds (from Line 20(d)) .....	2700.00	75190.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	1100.00	- 71370.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	25876.32	239197.34
(b) Total Offsets to Operating Expenditures (from Line 14).....	1890.00	1890.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	23986.32	237307.34
8. Cash on Hand at Close of Reporting Period (from Line 27).....	52424.98	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	157831.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Matt Rosendale for Montana

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	9

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	9

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

## (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

3800.00

3900.00

(ii) Unitemized.....

0.00

- 80.00

(iii) TOTAL of contributions from individuals ▶

3800.00

3820.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

3800.00

3820.00

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

97.18

39420.29

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

1890.00

1890.00

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

35.74

68.32

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

5822.92

45198.61

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 23

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25876.32	239197.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	51863.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	51863.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2700.00	75190.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2700.00	75190.00
21. OTHER DISBURSEMENTS .....	1000.00	1000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	29576.32	367250.34

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	76178.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5822.92
25. SUBTOTAL (add Line 23 and Line 24).....	82001.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	29576.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	52424.98

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Matt Rosendale for Montana**

Full Name (Last, First, Middle Initial)

**MAROUS, NORM, , ,**

**A.**

Mailing Address 4644 WOODMERE ROAD

City

SANTA MARIA

State

CA

Zip Code

93455-6677

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 18 2019

Transaction ID : SA11A.30645

Amount of Each Receipt this Period

- 2700.00

☐ Memo Item

CONTRIBUTION

CHARGED BACK

Full Name (Last, First, Middle Initial)

**KENNEALLY, MICHAEL, E., ,**

**B.**

Mailing Address 3355 BLACKTAIL LOOP RD

City

BUTTE

State

MT

Zip Code

59701-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOWN PUMP, INC

Occupation

BUSINESSMAN

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 11 2019

Transaction ID : SA11A.30652

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

**KENNEALLY, JAMES, M., ,**

**C.**

Mailing Address 600 SOUTH MAIN STREET

City

BUTTE

State

MT

Zip Code

59701-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOWN PUMP, INC

Occupation

BUSINESSMAN

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2019

Transaction ID : SA11A.30647

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

DEBT RETIREMENT

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Matt Rosendale for Montana**

Full Name (Last, First, Middle Initial)

**KENNEALLY, THOMAS, P., ,**

**A.** Mailing Address 1201 ANTIMONY ST

City  
BUTTE

State  
MT

Zip Code  
59701-8707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOWN PUMP, INC

Occupation  
BUSINESSMAN

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2019

Transaction ID : SA11A.30648

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

**USHER, BARRY, M., MR.,**

**B.** Mailing Address 6900 S. FRONTAGE

City  
BILLINGS

State  
MT

Zip Code  
59101-6220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BEARTOOTH HARLEY DAVIDSON

Occupation  
OWNER

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2019

Transaction ID : SA11A.30646

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2500.00

3800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 23

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)

**Matt Rosendale for Montana**

Full Name (Last, First, Middle Initial)

**WINSOME LEADERS I**

**A.**

Mailing Address 901 N WASHINGTON ST  
SUITE 700

City

ALEXANDRIA

State

VA

Zip Code

22314-1535

FEC ID number of contributing  
federal political committee.

**C** C00674770

Name of Employer

Occupation

Receipt For: 2018

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

36327.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 24 / 2019

Transaction ID : SA12.30653

Amount of Each Receipt this Period

97.18

☐ Memo Item

TRANSFER OF NET JFC PROCEEDS

ALL CONTRIBUTIONS PREVIOUSLY ITEMIZED

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

97.18

**TOTAL** This Period (last page this line number only)..... ▶

97.18

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 23

☐ 11a ☐ 11b ☐ 11c ☒ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**Matt Rosendale for Montana**

Full Name (Last, First, Middle Initial)

**MUSTARD SEED**

**A.**

Mailing Address 435 E MAIN ST STE 250

City

GREENWOOD

State

IN

Zip Code

46143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 23 / 2019

Transaction ID : SA14

Amount of Each Receipt this Period

1890.00

☐

Memo Item

REFUND CREDIT CARD MERCHANT  
FEE/FUNDRAISING FEE

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1890.00

1890.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. BB&T BANK**

Mailing Address 1901 FORT MEYER DR

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : SB17002

☐ Memo Item**B. USPS**

Mailing Address 8300 NE UNDERGROUND DR. PILLAR 210

City  
KANSAS CITYState  
MOZip Code  
64144-0001Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

6.55

Transaction ID : SB17001

☐ Memo Item**C. CMDI**

Mailing Address 1593 SPRING HILL RD STE 400

City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17003

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1223.55

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17004

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DC TREASURER**

Mailing Address 1275 K ST NW

City  
WASHINGTONState  
DCZip Code  
20035Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

291.04

Transaction ID : SB17005

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BB&T BANK**

Mailing Address 1901 FORT MEYER DR

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	2		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17006

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

571.04

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. ANEDOT.COM**

Mailing Address PO BOX 84314

City  
BATON ROUGEState  
LAZip Code  
70884Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17007

☐ Memo Item**B. IRS**

Mailing Address PO BOX 12192

City  
COVINGTONState  
KYZip Code  
41012Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

39.46

Transaction ID : SB17010

☐ Memo Item**C. MT UNEMPLOYMENT INSURANCE DIVISION**

Mailing Address PO BOX 6339

City  
HELENAState  
MTZip Code  
59604-6339Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

1769.92

Transaction ID : SB17008

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1824.38

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. WI DEPARTMENT OF REVENUE**

Mailing Address PO BOX 59

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2019

City  
MADISONState  
WIZip Code  
53785Purpose of Disbursement  
PAYROLL TAXES

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

377.85

Transaction ID : SB17009

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. BB&T BANK**

Mailing Address 1901 FORT MEYER DR

Date of Disbursement

M M	D D	Y Y Y Y
02	01	2019

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
BANK FEE

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

17.00

Transaction ID : SB17011

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address PO BOX 650448

Date of Disbursement

M M	D D	Y Y Y Y
02	06	2019

City  
DALLASState  
TXZip Code  
75265Purpose of Disbursement  
CREDIT CARD PAYMENT - SEE DETAIL

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

120.00

Transaction ID : SB17012

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

514.85

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 8300 NE UNDERGROUND DR. PILLAR 210

Date of Disbursement

M M	D D	Y Y Y Y
02	06	2019

City  
KANSAS CITYState  
MOZip Code  
64144-0001Purpose of Disbursement  
RENT

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

120.00

Transaction ID : SB17012CC001

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. INTUIT**

Mailing Address 2700 COAST AVE

Date of Disbursement

M M	D D	Y Y Y Y
02	06	2019

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
SUBSCRIPTION

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17013

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. BB&T VISA**

Mailing Address PO BOX 580340

Date of Disbursement

M M	D D	Y Y Y Y
02	19	2019

City  
CHARLOTTEState  
NCZip Code  
28258Purpose of Disbursement  
CREDIT CARD PAYMENT - SEE DETAIL

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17014

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

185.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17014CC001

☒ Memo Item**B. EWING, JONATHAN, , ,**

Mailing Address 152 STONEWAY TRAIL

City  
MADISONState  
ALZip Code  
35758Purpose of Disbursement  
VEHICLE RENTAL/MILEAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

2263.93

Transaction ID : SB17015

☐ Memo Item**C. HERTZ**

Mailing Address 225 BRAE BLVD

City  
PARK RIDGEState  
NJZip Code  
07656Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

1904.89

Transaction ID : SB17015EW001

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2263.93

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. RIGHTSIDE COMPLIANCE**

Mailing Address PO BOX 341027

City  
AUSTINState  
TXZip Code  
78734Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	20	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

10683.20

Transaction ID : SB17016

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE GOBER GROUP PLLC**

Mailing Address PO BOX 341016

City  
AUSTINState  
TXZip Code  
78734Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	20	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

6723.00

Transaction ID : SB17017

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BB&T BANK**

Mailing Address 1901 FORT MEYER DR

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	21	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17018

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

17626.20

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 8300 NE UNDERGROUND DR. PILLAR 210

Date of Disbursement

M M	D D	Y Y Y Y
02	22	2019

City  
KANSAS CITYState  
MOZip Code  
64144-0001Purpose of Disbursement  
POSTAGE

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

33.00

Transaction ID : SB17019

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. AIRBNB**

Mailing Address 888 BRANNON ST

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2019

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
TRAVEL

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1252.37

Transaction ID : SB17022

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. DELTA AIR**

Mailing Address 1901 TERMINAL CIRCLE

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2019

City  
BILLINGSState  
MTZip Code  
59105Purpose of Disbursement  
TRAVEL

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.00

Transaction ID : SB17021

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

1314.37

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. TRIPCHARGES.COM**

Mailing Address 200 W SECOND STREET

City  
WINSTON-SALEMState  
NCZip Code  
27101Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

56.00

Transaction ID : SB17020

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BB&T BANK**

Mailing Address 1901 FORT MEYER DR

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	01	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : SB17023

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEWState  
CAZip Code  
94043Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	05	2019

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17024

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

133.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. BB&T BANK**

Mailing Address 1901 FORT MEYER DR

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2019

FEC Identification Number

C

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17025

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

220.00

**TOTAL** This Period (last page this line number only).....▶

25876.32

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 23

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. GUENTHER, JACK, , ,**

Mailing Address 153 TREELINE PARK STE 300

City  
SAN ANTONIOTState  
TXZip Code  
78209Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20A001

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2700.00

**TOTAL** This Period (last page this line number only).....▶

2700.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 23

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

**A. LEWIS & CLARK COUNTY REPUBLICAN CENTRAL COMMITTEE**

Mailing Address 316 N PARK

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2019

City  
HELENAState  
MTZip Code  
59601

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION TO NON-FEDERAL COMMITTEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21001

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

1000.00

**TOTAL** This Period (last page this line number only).....▶

1000.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 21 OF 23

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4371

Matt Rosendale for Montana

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

Rosendale, Matt, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO Box 4907

City

State

ZIP Code

Helena

MT

59604-4907

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

200000.00

0.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 09 M

D 05 D

Y 2013 Y

M M

D D

Y NONE Y

NONE

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

0.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 22 OF 23

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.51518

Matt Rosendale for Montana

LOAN SOURCE Full Name (Last, First, Middle Initial)

ROSENDALE, MATT, , ,

☐ Memo Item

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 4907

City

HELENA

State

MT

ZIP Code

59604-4907

☒ Personal Funds of the Candidate

Original Amount of Loan

32831.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

32831.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 05 M

D 15 D

Y 2018 Y

M M

D D

Y NONE Y

NONE

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

32831.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 23 OF 23

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.51518\_B

Matt Rosendale for Montana

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

ROSENDALE, MATT, , ,

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
PO BOX 4907

City

HELENA

State

MT

ZIP Code

59604-4907

☒ Personal Funds of the Candidate

Original Amount of Loan

125000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

125000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 10 M /

D 10 D /

Y 2018 Y

M M /

D D /

Y NONE Y

NONE

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

125000.00

**TOTALS** This Period (last page in this line only).....▶

157831.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.