

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

11

D D / Y Y Y Y

24

2020

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

2020

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

01

D D / Y Y Y Y

29

2021

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Matt Rosendale for Montana

Report Covering the Period: From: / / To: / /

	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))....	4595.47	7557.97
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4595.47	7557.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	51840.21	216506.80
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	51840.21	216506.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	262839.04	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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: / / To: / /

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).....	2330.00	5130.00
(ii) Unitemized	1265.47	1427.97
(iii) TOTAL of contributions from individuals ▶	3595.47	6557.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4595.47	7557.97
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	18494.15	18494.15
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.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.22	0.22
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	23089.84	26052.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 32

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	51840.21	216506.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	97831.00	97831.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	97831.00	97831.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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)).....	0.00	0.00
21. OTHER DISBURSEMENTS	5600.00	5600.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	155271.21	319937.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	395020.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	23089.84
25. SUBTOTAL (add Line 23 and Line 24).....	418110.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	155271.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	262839.04

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

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

FOR LINE NUMBER: PAGE 5 OF 32
(check only one)
 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

A. Full Name (Last, First, Middle Initial)
GARRITY, MICHAEL, J., ,
 Mailing Address 2230 DEER PARK COURT
 City BOZEMAN State MT Zip Code 59715-2229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2020
Transaction ID : SA11A.65533
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GILLIS, JOHN, , MR.,
 Mailing Address 2303 NELSON RD
 City BOZEMAN State MT Zip Code 59718-8741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2020
Transaction ID : SA11A.65530
 Amount of Each Receipt this Period
 1500.00
 Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAMS, KENT, B., ,
 Mailing Address 4177 HIGHWAY 78
 City COLUMBUS State MT Zip Code 59019-7535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2020
Transaction ID : SA11A.65532
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶
TOTAL This Period (last page this line number only) ▶

2750.00

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

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

FOR LINE NUMBER: PAGE 6 OF 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3405.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2020

Transaction ID : SA11C.65546244

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. Full Name (Last, First, Middle Initial)
ORCUTT, CARLA, , ,

Mailing Address 316 SOUTH 9TH STREET

City HAMILTON State MT Zip Code 59840-2652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2020

Transaction ID : SA11A.65630

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3405.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2020

Transaction ID : SA11C.65546245

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 32
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3405.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2020

Transaction ID : SA11C.65546246

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. Full Name (Last, First, Middle Initial)
ALTMAN, ALAN, , ,

Mailing Address 2 GROVE ISLE DR. APT 502

City MIAMI State FL Zip Code 33133-4102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRIME NURSING CARE PHYSICIAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 07 / 2020

Transaction ID : SA11A.65742

Amount of Each Receipt this Period
- 20.00

Memo Item CONTRIBUTION
CHARGED BACK

C. Full Name (Last, First, Middle Initial)
GROVER, SANJIV, , ,

Mailing Address 2 MOSS LANDING

City LAGUNA NIGUEL State CA Zip Code 92677-1006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLIANTGROUP CPA

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2020

Transaction ID : SA11A.65633

Amount of Each Receipt this Period
- 1000.00

Memo Item CONTRIBUTION
CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ▶ - 1020.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 32
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3405.25

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 08 / 2020

Transaction ID : SA11C.65542159

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. Full Name (Last, First, Middle Initial)
MOSBY, STEVE, M., DR.,

Mailing Address 310 WENDELL AVE SUITE 3

City LEWISTOWN State MT Zip Code 59457-2267

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED DENTIST

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 02 / 2020

Transaction ID : SA11A.65545

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

C. Full Name (Last, First, Middle Initial)
GOLDWATER, BARRY, M., MR., JR.

Mailing Address 3219 E CAMELBACK RD STE 552

City PHOENIX State AZ Zip Code 85018-2307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF INFORMATION REQUESTED PER BEST EFF

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2020

Transaction ID : SA11A.65540

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 32
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
FRANK, SHANE, , ,

Mailing Address 105 FERNDAL ST

City BELLAIRE State TX Zip Code 77401-5324

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLIANTGROUP Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 18 2020

Transaction ID : SA11A.65708

Amount of Each Receipt this Period
- 1400.00

Memo Item
CONTRIBUTION
CHARGED BACK

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3405.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 22 2020

Transaction ID : SA11C.65712289

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

C. Full Name (Last, First, Middle Initial)
ORCUTT, CARLA, , ,

Mailing Address 316 SOUTH 9TH STREET

City HAMILTON State MT Zip Code 59840-2652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 16 2020

Transaction ID : SA11A.65730

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional) ▶ - 900.00

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

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 10 OF 32	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 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

A. Full Name (Last, First, Middle Initial)
SCOTT, HUGH, , , III

Mailing Address 147 MONTE CARLO DR

City PALM BEACH GARDENS	State FL	Zip Code 33418-1745
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2020

Transaction ID : SA11A.65711

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

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

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).....▶	250.00
TOTAL This Period (last page this line number only).....▶	2330.00

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

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

FOR LINE NUMBER: PAGE 11 OF 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
U.S. ISREAL PAC
 Mailing Address 6100 HOLLYWOOD BLVD
 City HOLLYWOOD State FL Zip Code 33024-7900
 FEC ID number of contributing federal political committee. **C** C00127811
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2020
Transaction ID : SA11C.65631
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

B. Full Name (Last, First, Middle Initial)
AMERICAN PRINCIPLES
 Mailing Address 20533 BISCAVNE BLVD #250
 City MIAMI State FL Zip Code 33180-1529
 FEC ID number of contributing federal political committee. **C** C00492579
 Name of Employer Occupation
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2020
Transaction ID : SA11C.65632
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

C. Full Name (Last, First, Middle Initial)
 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)..... ▶	1000.00
TOTAL This Period (last page this line number only)..... ▶	1000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
ROSENDALE VICTORY FUND 2020

Mailing Address 1390 CHAIN BRIDGE RD STE 515

City: MCLEAN State: VA Zip Code: 22101-3904

FEC ID number of contributing federal political committee: **C** C00749788

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
114454.20

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2020

Transaction ID : SA12.65710

Amount of Each Receipt this Period
18494.15

Memo Item
TRANSFER

B. Full Name (Last, First, Middle Initial)
BAKER, PAUL, , ,

Mailing Address 3333 E SPEEDWAY BL

City: TUCSON State: AZ Zip Code: 85716-3935

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2020

Transaction ID : SA.58691.1.#4

Amount of Each Receipt this Period
2800.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

C. Full Name (Last, First, Middle Initial)
BERARDINI, CHRIS, , MR,

Mailing Address 520 12TH STREET SOUTH

City: ARLINGTON State: VA Zip Code: 22202-4211

FEC ID number of contributing federal political committee: **C**

Name of Employer: IRON BRIDGE STRATEGIES LLC Occupation: CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA.60123.1.#4

Amount of Each Receipt this Period
500.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	18494.15
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
CRAWFORD, ROBERT, , ,

Mailing Address 676 LAKE ROAD

City LAKE FOREST State IL Zip Code 60045-2303

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA.58708.1.#4

Amount of Each Receipt this Period
250.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

B. Full Name (Last, First, Middle Initial)
DIAMOND, JAMES, , ,

Mailing Address 579 SAGAMORE AVE #21

City PORTSMOUTH State NH Zip Code 03801-5568

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation FINANCIAL SERVICES

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA.58895.1.#4

Amount of Each Receipt this Period
1700.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

C. Full Name (Last, First, Middle Initial)
FINK, TED, G., ,

Mailing Address 2541 MAGNOLIA PLACE

City BILLINGS State MT Zip Code 59102-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2020

Transaction ID : SA.58652.1.#4

Amount of Each Receipt this Period
100.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
PSRIN, MICHAEL, , MR,

Mailing Address 12930 OLD MARSH ROAD

City PALM BEACH GARDENS State FL Zip Code 33418-

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 30 2020

Transaction ID : SA.60266.1.#4

Amount of Each Receipt this Period
 2800.00

Memo Item
 TRANSFER
 TRANSFER FROM ROSENDALE VICTORY

B. Full Name (Last, First, Middle Initial)
RICHARDS, DAVID, M., ,

Mailing Address PO BOX 3111

City BOZEMAN State MT Zip Code 59772-3111

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 30 2020

Transaction ID : SA.65486.1.#4

Amount of Each Receipt this Period
 500.00

Memo Item
 TRANSFER
 TRANSFER FROM ROSENDALE VICTORY

C. Full Name (Last, First, Middle Initial)
SCOTT, STEVEN, , DR,

Mailing Address 528 EAST ALEXANDER PALM ROAD

City BOCA RATON State FL Zip Code 33432-7985

FEC ID number of contributing federal political committee. **C**

Name of Employer SCOTT HOLDINGS, LLC Occupation CHAIRMAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 28 2020

Transaction ID : SA.60116.1.#4

Amount of Each Receipt this Period
 2800.00

Memo Item
 TRANSFER
 TRANSFER FROM ROSENDALE VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
SEMRAU, DAVID, D., DR., DDS

Mailing Address 221 PARKWAY DRIVE

City KALISPELL	State MT	Zip Code 59901-3013
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PARKWAY FAMILY DENTAL	Occupation DENTIST
---	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA.60273.1.#4

Amount of Each Receipt this Period
500.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

B. Full Name (Last, First, Middle Initial)
SMITH, IRIS, , ,

Mailing Address 105 EDGEVIEW DRIVE, STE. 390

City BROOMFIELD	State CO	Zip Code 80021-8016
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation CREATIVE ARTS
--------------------------	-----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA.60117.1.#4

Amount of Each Receipt this Period
2800.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

C. Full Name (Last, First, Middle Initial)
SMITH, MICHAEL, , ,

Mailing Address 105 EDGEVIEW DRIVE, STE. 390

City BROOMFIELD	State CO	Zip Code 80021-8016
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer KAITAR RESOURCES	Occupation CONSULTANT
--------------------------------------	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA.60118.1.#4

Amount of Each Receipt this Period
2800.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

**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 16 OF 32
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
TRAITEL, DAVID, , ,

Mailing Address 6085 LAKE GENEVA DR

City RENO	State NV	Zip Code 89511-5067
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation MOTORSPORTS
--------------------------	---------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2020

Transaction ID : SA.58698.1.#4

Amount of Each Receipt this Period
2800.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

B. Full Name (Last, First, Middle Initial)
VIOLA, JOHN, , MR,

Mailing Address P.O. BOX 102017

City FORT WORTH	State TX	Zip Code 76185-2017
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer TARRANT MANAGEMENT, LLC	Occupation CFO
---	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA.60267.1.#4

Amount of Each Receipt this Period
1000.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

C. Full Name (Last, First, Middle Initial)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALIT

Mailing Address 1201 15TH STREET NW
SUITE 400

City WASHINGTON	State DC	Zip Code 20005-2899
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 09 / 2020

Transaction ID : SA.50782.1.#4

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. Full Name (Last, First, Middle Initial)
INDEPENDENT PHARMACY COOPERATIVE PAC ('IPC PAC')

Mailing Address 1550 COLUMBUS STREET

City SUN PRAIRIE State WI Zip Code 53590-3901

FEC ID number of contributing federal political committee. **C** C00508309

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2020

Transaction ID : SA.58654.1.#4

Amount of Each Receipt this Period
1000.00

Memo Item
TRANSFER
TRANSFER FROM ROSENDALE VICTORY

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

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

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

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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	18494.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. BRISLIN, SEAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2020	
Mailing Address PO BOX 4907			FEC Identification Number C	
City HELENA	State MT	Zip Code 59601	Amount of Each Disbursement this Period 3094.11	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17001	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WESTBERRY, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2020	
Mailing Address PO BOX 4907			FEC Identification Number C	
City HELENA	State MT	Zip Code 59601	Amount of Each Disbursement this Period 339.06	
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17002	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T BANK			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020	
Mailing Address 1901 FORT MEYER DR			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 17.00	
Purpose of Disbursement BANK FEE		Category/ Type	Transaction ID : SB17004	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3450.17
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 Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. MONTANA SECRETARY OF STATE		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2020
Mailing Address 1301 E 6TH AVE		FEC Identification Number C
City HELENA	State MT	Zip Code 59601
Purpose of Disbursement REGISTRATION FEE		Amount of Each Disbursement this Period 35.00
Candidate Name		Transaction ID : SB17003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2020
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 149.63
Candidate Name		Transaction ID : SB17005
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2020
Mailing Address 1593 SPRING HILL RD STE 400		FEC Identification Number C
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT SERVICE		Amount of Each Disbursement this Period 2555.40
Candidate Name		Transaction ID : SB17007
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	2740.03
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 Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. INTUIT		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2020
Mailing Address 2700 COAST AVE		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 70.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17006
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AP INTEGO		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2020
Mailing Address 333 W COMMERCIAL ST STE 2500		FEC Identification Number C
City EAST ROCHESTER	State NY	Zip Code 14445
Purpose of Disbursement INSURANCE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 50.03	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17010
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2020
Mailing Address 1593 SPRING HILL RD STE 400		FEC Identification Number C
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT SERVICE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 900.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17011
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1020.03
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 Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. IRS		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2020
Mailing Address PO BOX 12192		FEC Identification Number C
City COVINGTON	State KY	Zip Code 41012
Purpose of Disbursement PAYROLL TAXES		Amount of Each Disbursement this Period 981.08
Candidate Name		Transaction ID : SB17008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. MT DEPARTMENT OF REVENUE		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2020
Mailing Address 125 N ROBERTS 3RD FL		FEC Identification Number C
City HELENA	State MT	Zip Code 59620
Purpose of Disbursement PAYROLL TAXES		Amount of Each Disbursement this Period 184.00
Candidate Name		Transaction ID : SB17009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2020
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Amount of Each Disbursement this Period 12.07
Candidate Name		Transaction ID : SB17012
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1177.15
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 Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. BRISLIN, SEAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2020	
Mailing Address PO BOX 4907			FEC Identification Number C	
City HELENA	State MT	Zip Code 59601	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17013	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WESTERN CONSULTING INC			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2020	
Mailing Address 1820 N LAST CHANCE GULCH			FEC Identification Number C	
City HELENA	State MT	Zip Code 59601	Amount of Each Disbursement this Period 10000.00	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/Type	Transaction ID : SB17014	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. THE GOBER GROUP PLLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2020	
Mailing Address PO BOX 341016			FEC Identification Number C	
City AUSTIN	State TX	Zip Code 78734	Amount of Each Disbursement this Period 579.50	
Purpose of Disbursement LEGAL CONSULTING		Category/Type	Transaction ID : SB17015	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	15579.50
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 Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. THE MONTANA GROUP			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2020	
Mailing Address 1820 N LAST CHANCE GULCH			FEC Identification Number C	
City HELENA	State MT	Zip Code 59601	Amount of Each Disbursement this Period 241.65	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type	Transaction ID : SB17016	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ULTRA GRAPHICS			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2020	
Mailing Address PO BOX 81691			FEC Identification Number C	
City BILLINGS	State MT	Zip Code 59108	Amount of Each Disbursement this Period 627.63	
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : SB17017	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH PAC			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2020	
Mailing Address 2001 L ST NW STE 600			FEC Identification Number C C00432260	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Disbursement this Period 0.60	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type	Transaction ID : SB17018	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	869.88
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 Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. BB&T BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2020
Mailing Address 1901 FORT MEYER DR		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 1.00
Candidate Name		Transaction ID : SB17020
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. HOLLOWAY CONSULTING INC		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2020
Mailing Address 1530 WILSON BLVD STE 440		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement FINANCE CONSULTING		Amount of Each Disbursement this Period 23711.24
Candidate Name		Transaction ID : SB17019
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BB&T VISA		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020
Mailing Address PO BOX 580340		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28258
Purpose of Disbursement CREDIT CARD PAYMENT-SEE DETAIL		Amount of Each Disbursement this Period 2995.23
Candidate Name		Transaction ID : SB17021
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	26707.47
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 Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. BOOKING.COM			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 7 MARKET ST			FEC Identification Number C	
City STAMFORD	State CT	Zip Code 06902	Amount of Each Disbursement this Period 216.20	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC008	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CAPITOL HILL SUITES			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 200 C ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 258.84	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC003	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CONOCO			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address PO BOX 2197			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77252	Amount of Each Disbursement this Period 187.74	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC009	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. DELTA AIR			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 1901 TERMINAL CIRCLE			FEC Identification Number C	
City BILLINGS	State MT	Zip Code 59105	Amount of Each Disbursement this Period 977.20	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC007	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. EXXON MOBILE			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 5959 LAS COLINAS BLVD			FEC Identification Number C	
City IRVING	State TX	Zip Code 75039	Amount of Each Disbursement this Period 85.40	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC005	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 1600 AMPHITHEATRE PARKWAY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 192.00	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	Transaction ID : SB17CC001	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. KALISPELL GRAND HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 100 S MAIN ST			FEC Identification Number C	
City KALISPELL	State MT	Zip Code 59901	Amount of Each Disbursement this Period 196.24	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC002	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SUNCLAUR FRIENDLY'S			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 1831 11TH AVE			FEC Identification Number C	
City HELENA	State MT	Zip Code 59601	Amount of Each Disbursement this Period 90.48	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC006	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. UBER			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2020	
Mailing Address 182 HOWARD STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 97.42	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17CC004	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. BB&T BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 1901 FORT MEYER DR		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 45.00
Candidate Name	Category/ Type	Transaction ID : SB17022
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BB&T BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 1901 FORT MEYER DR		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 20.00
Candidate Name	Category/ Type	Transaction ID : SB17023
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BB&T BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2020
Mailing Address 1901 FORT MEYER DR		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 200.00
Candidate Name	Category/ Type	Transaction ID : SB17024
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	265.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2020	
Mailing Address 1776 WILSON BLVD STE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 24.89	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/Type	Transaction ID : SB17025	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2020	
Mailing Address 1776 WILSON BLVD STE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 6.09	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/Type	Transaction ID : SB17026	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	30.98
TOTAL This Period (last page this line number only).....▶	51840.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 32	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

Full Name (Last, First, Middle Initial) A. ROSENDALE, MATT, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2020	
Mailing Address PO BOX 4907			FEC Identification Number C H4MT00050	
City HELENA	State MT	Zip Code 59604	Amount of Each Disbursement this Period 97831.00	
Purpose of Disbursement LOAN PAYMENT		Category/ Type	Transaction ID : SB19002	
Candidate Name ROSENDALE, MATT, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MT	District:			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....▶	97831.00
TOTAL This Period (last page this line number only).....▶	97831.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 32	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Matt Rosendale for Montana

A. GEORGIANS FOR KELLY LOEFFLER

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 20036

City ATLANTA State GA Zip Code 30325

Purpose of Disbursement CONTRIBUTION RUNOFF 2020

Candidate Name LOEFFLER, KELLY, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: GA District:

Date of Disbursement: 12 / 09 / 2020

FEC Identification Number: C C00729608

Amount of Each Disbursement this Period: 2800.00

Transaction ID : SB21001

Memo Item

B. PERDUE FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 12077

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement CONTRIBUTION RUNOFF 2020

Candidate Name PERDUE, DAVID, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: GA District:

Date of Disbursement: 12 / 09 / 2020

FEC Identification Number: C C00547570

Amount of Each Disbursement this Period: 2800.00

Transaction ID : SB21B002

Memo Item

C.

Full Name (Last, First, Middle Initial)
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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	5600.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.51518_B_B**
Matt Rosendale for Montana

LOAN SOURCE Full Name (Last, First, Middle Initial) ROSENDALE, MATT, , ,		<input type="checkbox"/> Memo Item	Election: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 4907			
City HELENA	State MT	ZIP Code 59604-4907	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 97831.00	Cumulative Payment To Date 97831.00	Balance Outstanding at Close of This Period 0.00
-------------------------------------	--	---

TERMS	Date Incurred M 10 / D 19 / Y 2020	Date Due M M / D D / Y NONE	Interest Rate (If none, enter 0) NONE % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	0.00

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