

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation SUSAN B ANTHONY LIST INC		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2800 Shirlington Rd Suite 1200		
(c) City, State and ZIP Code Arlington VA 22206		3. FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers Only)		C C90011313

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report ☐ 24-Hour Report

☐ October 15 Quarterly Report ☒ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 23550.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Kania, Robert, , ,

Kania, Robert, , ,

09/13/2018

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 4
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INCFull Name (Last, First, Middle Initial) of Payee
American Marketing & Publishing

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018

Mailing Address 730 Sprout Springs Rd

Amount

City State Zip Code
Flowery Branch GA 30542Amount
3275.00

Transaction ID : F57.5112

Purpose of Expenditure
Door HangersCategory/
Type 006Office Sought: ☐ House State: MT
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TESTER, JON, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 16025.00Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
American Marketing & Publishing

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018

Mailing Address 730 Sprout Springs Rd

Amount

City State Zip Code
Flowery Branch GA 30542Amount
1637.50

Transaction ID : F57.5114

Purpose of Expenditure
Door HangersCategory/
Type 006Office Sought: ☐ House State: MT
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
ROSENDALE, MATT, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 17662.50Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
American Marketing & Publishing

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018

Mailing Address 730 Sprout Springs Rd

Amount

City State Zip Code
Flowery Branch GA 30542Amount
1637.50

Transaction ID : F57.5116

Purpose of Expenditure
Door HangersCategory/
Type 006Office Sought: ☒ House State: MT
☐ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
GIANFORTE, GREG, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 5887.50Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 6550.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 4
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INCFull Name (Last, First, Middle Initial) of Payee
Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018Mailing Address 421 Fayetteville Street
Suite 1020

Amount

City State Zip Code
Raleigh NC 27601Amount
7500.00

Transaction ID : F57.5098

Purpose of Expenditure
CanvassingCategory/
Type 001Office Sought: ☐ House State: MT
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TESTER, JON, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 7500.00Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018Mailing Address 421 Fayetteville Street
Suite 1020

Amount

City State Zip Code
Raleigh NC 27601Amount
3750.00

Transaction ID : F57.5100

Purpose of Expenditure
CanvassingCategory/
Type 001Office Sought: ☒ House State: MT
☐ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
GIANFORTE, GREG, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 3750.00Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018Mailing Address 421 Fayetteville Street
Suite 1020

Amount

City State Zip Code
Raleigh NC 27601Amount
3750.00

Transaction ID : F57.5103

Purpose of Expenditure
CanvassingCategory/
Type 001Office Sought: ☐ House State: MT
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
ROSENDALE, MATT, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 11250.00Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 15000.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 4
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
SUSAN B ANTHONY LIST INCFull Name (Last, First, Middle Initial) of Payee
Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018Mailing Address 421 Fayetteville Street
Suite 1020

Amount

City State Zip Code
Raleigh NC 27601Amount
1000.00

Transaction ID : F57.5105

Purpose of Expenditure
Mileage for canvassersCategory/
Type 002Office Sought: ☐ House State: MT
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
TESTER, JON, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 12250.00Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018Mailing Address 421 Fayetteville Street
Suite 1020

Amount

City State Zip Code
Raleigh NC 27601Amount
500.00

Transaction ID : F57.5107

Purpose of Expenditure
Mileage for canvassersCategory/
Type 002Office Sought: ☐ House State: MT
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
ROSENDALE, MATT, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 12750.00Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Headway Workforce Solutions

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 13 / 2018Mailing Address 421 Fayetteville Street
Suite 1020

Amount

City State Zip Code
Raleigh NC 27601Amount
500.00

Transaction ID : F57.5109

Purpose of Expenditure
Mileage for canvassersCategory/
Type 002Office Sought: ☒ House State: MT
☐ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
GIANFORTE, GREG, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 4250.00Disbursement For: ☐ Primary ☒ General
2018
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 2000.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 23550.00
(carry total from last page forward to Line 7)