

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 820 OF 1008	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input 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)
Montanans for Tester

Full Name (Last, First, Middle Initial)

Wilson, Bernadette, , ,

Mailing Address 711 E 13Th St
Ste 101

City Whitefish	State MT	Zip Code 59937-2982
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FEC ID number of contributing
federal political committee.

C

Name of Employer
Kalispell Regional Healthcare

Occupation
Oral Surgeon

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 13 / 2017

Transaction ID : VR05HKG6ZA3

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

468887.64

Date of Receipt

MM / DD / YYYY
03 / 19 / 2017

Transaction ID : VR05HKG6ZA3E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Wilson, Kendrick, R., , III

Mailing Address 55 E 52Nd St

City New York	State NY	Zip Code 10055-0002
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FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Chairman

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Date of Receipt

MM / DD / YYYY
03 / 27 / 2017

Transaction ID : VR05HKGACV9

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)