

**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 393 OF 3100
	<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

A. Full Name (Last, First, Middle Initial)
Carpenter, Donna, , ,

Mailing Address 80 Industrial Pkwy

City Burlington	State VT	Zip Code 05401-5434
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FEC ID number of contributing federal political committee. **C**

Name of Employer Burton Snowboards	Occupation Business Owner
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
 1 2 3 4 5 6 7 8 9 0
 5400.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 18 / 2018

Transaction ID : VR05HN0FGY2

Amount of Each Receipt this Period
 1 2 3 4 5 6 7 8 9 0
 2700.00

Memo Item

* Earmarked Contribution: See Below

B. 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
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
 1 2 3 4 5 6 7 8 9 0
 488780.82

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 21 / 2018

Transaction ID : VR05HN0FGY2E

Amount of Each Receipt this Period
 1 2 3 4 5 6 7 8 9 0
 2700.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Carpenter, Janet, M., ,

Mailing Address 10 Heatherwood Ln

City Billings	State MT	Zip Code 59102-2449
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FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker	Occupation Homemaker
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
 1 2 3 4 5 6 7 8 9 0
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2018

Transaction ID : VR05HN2A4M1

Amount of Each Receipt this Period
 1 2 3 4 5 6 7 8 9 0
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 0 3700.00
TOTAL This Period (last page this line number only).....▶	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 0

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