

**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
REPORTNEW
(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
10 / 01 / 2024

through

M M / D D / Y Y Y Y
12 / 31 / 2024

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

Type or Print Name of Treasurer HOBBS, CABELL, , ,

Signature of Treasurer

HOBBS, CABELL, , ,

Date

M M / D D / Y Y Y Y
01 / 31 / 2025

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 03/2016)

Write or Type Committee Name

Matt Rosendale for Montana

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 01 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 2024

	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))....	0.00	772271.22
(b) Total Contribution Refunds (from Line 20(d))	0.00	284857.15
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	487414.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7618.80	1132000.98
(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))	7618.80	1132000.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	920092.80	
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

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:

MM / DD / YYYY
10 / 01 / 2024

To:

MM / DD / YYYY
12 / 31 / 2024**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).....

0.00

485436.44

(ii) Unitemized

0.00

98334.78

(iii) TOTAL of contributions
from individuals ▶

0.00

583771.22

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

188500.00

(d) The Candidate

0.00

0.00

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

0.00

772271.22

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

358939.28

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.)

6.23

23.89

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

6.23

1131234.39

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7618.80	1132000.98
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	243657.15
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	41200.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	284857.15
21. OTHER DISBURSEMENTS	2900.00	22017.50
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10518.80	1438875.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	930605.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6.23
25. SUBTOTAL (add Line 23 and Line 24).....	930611.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10518.80
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	920092.80

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

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☐ 20a	☐ 20b	☐ 20c	☐ 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

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2024

City
MOUNTAIN VIEWState
CAZip Code
94043

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

99.00

Transaction ID : SB.1

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2024

City
WASHINGTONState
DCZip Code
20005

FEC Identification Number

C

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

200.00

Transaction ID : SB.2

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2024

City
WASHINGTONState
DCZip Code
20005

FEC Identification Number

C

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20.00

Transaction ID : SB.3

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

319.00

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

A. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
BANK FEE

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
1	0		3	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB.5

☐ Memo Item**B. RED ROCK STRATEGIES**

Mailing Address 9500 W FLAMINGO RD #203

City
LAS VEGASState
NVZip Code
89147Purpose of Disbursement
DIGITAL CONSULTING

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
1	1		0	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1053.20

Transaction ID : SB.6

☐ Memo Item**C. 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:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5543.60

Transaction ID : SB.7

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

6611.80

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

A. IVERSON, DREW, , ,

Mailing Address 307 JESSE HALL

City
MISSOULAState
MTZip Code
59801Purpose of Disbursement
VOTER CONTACT SERVICES

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
1	1		0	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IVERSON, DREW, , ,

Mailing Address 307 JESSE HALL

City
MISSOULAState
MTZip Code
59801Purpose of Disbursement
VOID VOTER CONTACT SERVICES -CHECK LOST, REISSUED

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
1	1		0	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

- 500.00

Transaction ID : SB.8

☐ Memo Item ORIGINALLY ISSUED 9/5/2018

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
1	1		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB.19

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

99.00

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

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

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

A. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

City
WASHINGTONState
DCZip Code
20005Purpose 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
1	1		2	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

City
WASHINGTONState
DCZip Code
20005Purpose 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
1	1		2	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

City
WASHINGTONState
DCZip Code
20005Purpose 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
1	1		2	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB.25

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

235.00

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

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

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☒ 17	☐ 18	☐ 19a	☐ 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. INTUIT

Mailing Address 2700 COAST AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		06		2024

City
MOUNTAIN VIEWState
CAZip Code
94043

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

99.00

Transaction ID : SB.26

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2024

City
WASHINGTONState
DCZip Code
20005

FEC Identification Number

C

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20.00

Transaction ID : SB.27

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2024

City
WASHINGTONState
DCZip Code
20005

FEC Identification Number

C

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

200.00

Transaction ID : SB.28

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

319.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 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. TRUIST

Mailing Address 1445 NEW YORK AVE NW 4TH FL

City
WASHINGTONState
DCZip Code
20005Purpose 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
1	2		2	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB.29

☐ 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).....▶

15.00

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

7598.80

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

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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

A. GARSCHINA, KENNETH, , ,

Mailing Address 110 E 59TH ST

City
NEW YORKState
NYZip Code
10022Purpose of Disbursement
VOID CONTRIBUTION REFUND - CHECK LOST, REISSUED

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
11		04		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

- 2700.00

Transaction ID : SB.12

☐ Memo Item ORIGINALLY ISSUED 8/29/2018

Full Name (Last, First, Middle Initial)

B. GARSCHINA, KENNETH, , ,

Mailing Address 110 E 59TH ST

City
NEW YORKState
NYZip Code
10022Purpose 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
11		04		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LANGLAS, DAVID, , ,

Mailing Address 6132 SAM SNEAD TRAIL

City
BILLINGSState
MTZip Code
59106Purpose of Disbursement
VOID CONTRIBUTION REFUND - CHECK LOST, REISSUED

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

- 2900.00

Transaction ID : SB.11

☐ Memo Item ORIGINALLY ISSUED 11/18/2022**SUBTOTAL** of Disbursements This Page (optional).....▶

- 2900.00

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)

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☐ 17	☐ 18	☐ 19a	☐ 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. LANGLAS, DAVID, , ,

Mailing Address 6132 SAM SNEAD TRAIL

City
BILLINGSState
MTZip Code
59106Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2022

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2900.00

Transaction ID : SB.14

☐ 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).....▶

2900.00

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

0.00

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

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☐ 17	☐ 18	☐ 19a	☐ 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. LEAD ENCOURAGE ELECT PAC

Mailing Address PO BOX 183

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		08		2024

City
HUDSONState
WIZip Code
54016

FEC Identification Number

☐ C C00494302Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB.20

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. LEAD ENCOURAGE ELECT PAC

Mailing Address PO BOX 183

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		08		2024

City
HUDSONState
WIZip Code
54016

FEC Identification Number

☐ C C00494302Purpose of Disbursement
VOID CONTRIBUTION REFUND - CHECK LOST, REISSUED

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

- 5000.00

Transaction ID : SB.21

☐ Memo Item ORIGINALLY ISSUED 4/8/2024

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ 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).....▶

0.00

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

0.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Matt Rosendale for Montana

Full Name (Last, First, Middle Initial)

A. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE

Mailing Address PO BOX 631

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2024

City
ANNAPOLISState
MDZip Code
21404

FEC Identification Number

☒ C00120055Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB.4

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. VICKY HARTZLER FOR SENATE

Mailing Address PO BOX 531

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2024

City
HARRISONVILLEState
MOZip Code
64701

FEC Identification Number

☒ C00464602Purpose of Disbursement
VOID CONTRIBUTION - CHECK LOST, NOT REISSUED

Candidate Name

HARTZLER, VICKY, J, ,

Category/
Type

Amount of Each Disbursement this Period

- 2100.00

Transaction ID : SB.10

☐ Memo Item ORIGINALLY ISSUED 6/10/2022

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary	☐ General
☐ Other (specify) ▼	

State: MO

District: 00

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).....▶

2900.00

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

2900.00