

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
Blackwolf for Montana

ADDRESS (number and street) PO Box 210
 Check if different than previously reported. (ACC) Hays MT 59527

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00919936

3. IS THIS REPORT **NEW (N)** **OR** **AMENDED (A)**

STATE ▼ DISTRICT
MT

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 / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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 Azure, Jarrett, , ,

Signature of Treasurer Azure, Jarrett, , ,

Date / /

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									
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SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Blackwolf for Montana

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 2026

	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))....	11046.00	26144.00
(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)).....	11046.00	26144.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20694.05	25616.21
(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)).....	20694.05	25616.21
8. Cash on Hand at Close of Reporting Period (from Line 27).....	527.79	
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

Blackwolf 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).....	7850.00	21150.00
(ii) Unitemized.....	2746.00	4452.00
(iii) TOTAL of contributions from individuals ▶	10596.00	25602.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	450.00	542.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11046.00	26144.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
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.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	11046.00	26144.00

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.....	20694.05	25616.21
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	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	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20694.05	25616.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10175.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11046.00
25. SUBTOTAL (add Line 23 and Line 24).....	21221.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20694.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	527.79

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N
Transaction ID :

Please note: the starting cash on this report is greater than the closing cash on the previous report. We will amend the prior report as soon as we are able to address a technical error.

Form/Schedule:
Transaction ID:

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 6 OF 29
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<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)
Blackwolf for Montana

A. Full Name (Last, First, Middle Initial)
Carr, Drury, , ,

Mailing Address 2004 Missoula Avenue

City Missoula	State MT	Zip Code 59802
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FEC ID number of contributing federal political committee.

Name of Employer MAPS Media Institute	Occupation Filmmaker and filmmaking instructor
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4398

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Fort Belknapp Insurance Company

Mailing Address PO Box 146

City Harlem	State MT	Zip Code 59526
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4449

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Fort Belknapp Insurance Company

Mailing Address PO Box 146

City Harlem	State MT	Zip Code 59526
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FEC ID number of contributing federal political committee.

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="7100.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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 29
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

A. Full Name (Last, First, Middle Initial)
Powell, Margaret, , ,

Mailing Address 137 Cohosset Drive

City Missoula State MT Zip Code 59803

FEC ID number of contributing federal political committee.

Name of Employer National Forest Foundation Occupation Facilitator

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2026

Transaction ID : SA11AI.4370

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 8 West Harrison

City Bozeman State MT Zip Code 59715

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 30 / 2026

Transaction ID : SA11AI.4322

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.

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).....▶	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="7850.00"/>

**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 9 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Blackwolf, Michael, James, ,		Date of Disbursement MM / DD / YYYY 02 / 26 / 2026
Mailing Address 625 Pine Grove Road		FEC Identification Number C S6MT00246
City HAYS	State MT	Zip Code 59527
Purpose of Disbursement Candidate Reimbursement		Amount of Each Disbursement this Period 1020.00
Candidate Name		Transaction ID : SB17.4478
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MT	District: 00	

Full Name (Last, First, Middle Initial) B. Cmon Inn		Date of Disbursement MM / DD / YYYY 03 / 13 / 2026
Mailing Address 6139 E Valley Center Rd		FEC Identification Number C
City Bozeman	State MT	Zip Code 59718
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 119.56
Candidate Name		Transaction ID : SB17.4498
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Conoco		Date of Disbursement MM / DD / YYYY 02 / 28 / 2026
Mailing Address 925 N Eldridge Pkwy		FEC Identification Number C
City Houston	State TX	Zip Code 77079
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 30.00
Candidate Name		Transaction ID : SB17.4514
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	1169.56
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 10 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Conoco			Date of Disbursement MM / DD / YYYY 02 / 28 / 2026	
Mailing Address 925 N Eldridge Pkwy			FEC Identification Number C	
City Houston	State TX	Zip Code 77079	Amount of Each Disbursement this Period 42.98	
Purpose of Disbursement Transportation		Category/ Type	Transaction ID : SB17.4515	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Conoco			Date of Disbursement MM / DD / YYYY 03 / 08 / 2026	
Mailing Address 925 N Eldridge Pkwy			FEC Identification Number C	
City Houston	State TX	Zip Code 77079	Amount of Each Disbursement this Period 6.98	
Purpose of Disbursement Transportation		Category/ Type	Transaction ID : SB17.4516	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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 MM / DD / YYYY 03 / 13 / 2026	
Mailing Address 925 N Eldridge Pkwy			FEC Identification Number C	
City Houston	State TX	Zip Code 77079	Amount of Each Disbursement this Period 8.18	
Purpose of Disbursement Transportation		Category/ Type	Transaction ID : SB17.4517	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	58.14
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 11 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Conoco		Date of Disbursement MM / DD / YYYY 03 / 20 / 2026
Mailing Address 925 N Eldridge Pkwy		FEC Identification Number C
City Houston	State TX	Zip Code 77079
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 25.85
Candidate Name		Transaction ID : SB17.4518
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Conoco		Date of Disbursement MM / DD / YYYY 03 / 22 / 2026
Mailing Address 925 N Eldridge Pkwy		FEC Identification Number C
City Houston	State TX	Zip Code 77079
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 28.19
Candidate Name		Transaction ID : SB17.4519
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Conoco		Date of Disbursement MM / DD / YYYY 03 / 23 / 2026
Mailing Address 925 N Eldridge Pkwy		FEC Identification Number C
City Houston	State TX	Zip Code 77079
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 6.27
Candidate Name		Transaction ID : SB17.4520
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	60.31
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 12 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Conoco		Date of Disbursement MM / DD / YYYY 03 / 23 / 2026
Mailing Address 925 N Eldridge Pkwy		FEC Identification Number C
City Houston	State TX	Zip Code 77079
Purpose of Disbursement Transportation	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 84.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4521 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Conoco		Date of Disbursement MM / DD / YYYY 03 / 25 / 2026
Mailing Address 925 N Eldridge Pkwy		FEC Identification Number C
City Houston	State TX	Zip Code 77079
Purpose of Disbursement Transportation	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4522 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Doubletree		Date of Disbursement MM / DD / YYYY 02 / 02 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 221.72	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4533 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	325.72
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 13 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Doubletree		Date of Disbursement MM / DD / YYYY 02 / 26 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 286.71
Candidate Name		Transaction ID : SB17.4534
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Doubletree		Date of Disbursement MM / DD / YYYY 03 / 05 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 144.56
Candidate Name		Transaction ID : SB17.4535
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Doubletree		Date of Disbursement MM / DD / YYYY 03 / 05 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 125.00
Candidate Name		Transaction ID : SB17.4536
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	556.27
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 14 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Doubletree		Date of Disbursement MM / DD / YYYY 03 / 06 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 55.00
Candidate Name		Transaction ID : SB17.4537
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Doubletree		Date of Disbursement MM / DD / YYYY 03 / 06 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 144.56
Candidate Name		Transaction ID : SB17.4538
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Doubletree		Date of Disbursement MM / DD / YYYY 03 / 06 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 137.80
Candidate Name		Transaction ID : SB17.4539
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	337.36
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 15 OF 29			
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Doubletree		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2026
Mailing Address 7930 Jones Branch Dr		FEC Identification Number C
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 289.12
Candidate Name		Transaction ID : SB17.4540
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Exxon		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 78.75
Candidate Name		Transaction ID : SB17.4544
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Exxon		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 16.58
Candidate Name		Transaction ID : SB17.4545
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	384.45
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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Exxon		Date of Disbursement MM / DD / YYYY 02 / 02 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 58.00
Candidate Name		Transaction ID : SB17.4546
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Exxon		Date of Disbursement MM / DD / YYYY 02 / 03 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 71.10
Candidate Name		Transaction ID : SB17.4547
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Exxon		Date of Disbursement MM / DD / YYYY 02 / 16 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 33.00
Candidate Name		Transaction ID : SB17.4548
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	162.10
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 17 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Exxon		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 61.05
Candidate Name		Transaction ID : SB17.4549
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Exxon		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 33.80
Candidate Name		Transaction ID : SB17.4550
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Exxon		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number C
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		Amount of Each Disbursement this Period 23.50
Candidate Name		Transaction ID : SB17.4551
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	118.35
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 18 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Exxon		M M / D D / Y Y Y Y 02 / 27 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	11.06
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4552
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Exxon		M M / D D / Y Y Y Y 03 / 03 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	72.70
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4553
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Exxon		M M / D D / Y Y Y Y 03 / 03 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	6.99
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4554
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	90.75
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 29			
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Exxon		M M / D D / Y Y Y Y 03 / 05 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	75.50
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4555
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Exxon		M M / D D / Y Y Y Y 03 / 09 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	25.83
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4556
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Exxon		M M / D D / Y Y Y Y 03 / 11 / 2026
Mailing Address 22777 Springwoods Village Pkwy		FEC Identification Number
City Spring	State TX	Zip Code 77389
Purpose of Disbursement Transportation		<input type="checkbox"/> Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought:	Disbursement For: 2026	58.00
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Transaction ID : SB17.4557
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	159.33
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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Innonative Solutions		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2026
Mailing Address 4545 East River Rd Suite 100		FEC Identification Number C
City West Henrietta	State NY	Zip Code 14586
Purpose of Disbursement Web Design		Amount of Each Disbursement this Period 2000.00
Candidate Name		Transaction ID : SB17.4580
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Innonative Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2026
Mailing Address 4545 East River Rd Suite 100		FEC Identification Number C
City West Henrietta	State NY	Zip Code 14586
Purpose of Disbursement Web Design		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.4581
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Jaker's Food Great Falls		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2026
Mailing Address 1500 10th Ave S		FEC Identification Number C
City Great Falls	State MT	Zip Code 59405
Purpose of Disbursement Catering		Amount of Each Disbursement this Period 105.00
Candidate Name		Transaction ID : SB17.4584
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	2605.00
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 21 OF 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Lance Fourstar		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2026
Mailing Address 428 Fallon Street		FEC Identification Number C
City Wolf Point	State MT	Zip Code 59201
Purpose of Disbursement Campaign Management consulting		Amount of Each Disbursement this Period 2020.00
Candidate Name		Transaction ID : SB17.4589
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Little River Trading		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 27.50
Candidate Name		Transaction ID : SB17.4595
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Little River Trading		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 32.65
Candidate Name		Transaction ID : SB17.4596
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	2080.15
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 29			
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Little River Trading		Date of Disbursement MM / DD / YYYY 02 / 19 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 29.50
Candidate Name		Transaction ID : SB17.4597
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Little River Trading		Date of Disbursement MM / DD / YYYY 02 / 26 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 31.00
Candidate Name		Transaction ID : SB17.4598
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Little River Trading		Date of Disbursement MM / DD / YYYY 02 / 28 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 75.00
Candidate Name		Transaction ID : SB17.4599
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	135.50
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 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Little River Trading		Date of Disbursement MM / DD / YYYY 03 / 08 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 67.00
Candidate Name		Transaction ID : SB17.4600
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Little River Trading		Date of Disbursement MM / DD / YYYY 03 / 11 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 73.05
Candidate Name		Transaction ID : SB17.4601
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Little River Trading		Date of Disbursement MM / DD / YYYY 03 / 11 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 19.00
Candidate Name		Transaction ID : SB17.4602
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	159.05
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 29			
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Little River Trading		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 75.00
Candidate Name		Transaction ID : SB17.4603
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Little River Trading		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2026
Mailing Address 148 Assiniboine Ave		FEC Identification Number C
City Harlem	State MT	Zip Code 59526
Purpose of Disbursement Transportation - gas		Amount of Each Disbursement this Period 40.00
Candidate Name		Transaction ID : SB17.4591
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. McDonalds		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2026
Mailing Address 110 N Carpenter St		FEC Identification Number C
City Chicago	State IL	Zip Code 60607
Purpose of Disbursement Catering		Amount of Each Disbursement this Period 17.19
Candidate Name		Transaction ID : SB17.4766
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	132.19
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 29			
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. McDonalds		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2026
Mailing Address 110 N Carpenter St		FEC Identification Number C
City Chicago	State IL	Zip Code 60607
Purpose of Disbursement Catering		Amount of Each Disbursement this Period 24.25
Candidate Name		Transaction ID : SB17.4767
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. McDonalds		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address 110 N Carpenter St		FEC Identification Number C
City Chicago	State IL	Zip Code 60607
Purpose of Disbursement Catering		Amount of Each Disbursement this Period 24.80
Candidate Name		Transaction ID : SB17.4768
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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. Montana Democratic Legislative Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2026
Mailing Address 303 N. Ewing St.		FEC Identification Number C
City Helena	State MT	Zip Code 59601
Purpose of Disbursement Event tickets		Amount of Each Disbursement this Period 250.00
Candidate Name		Transaction ID : SB17.4462
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" 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).....▶	299.05
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 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial)
A. Montana Democratic Legislative Campaign Committee

Mailing Address 303 N. Ewing St.

City Helena State MT Zip Code 59601

Purpose of Disbursement
Event tickets

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 27 / 2026

FEC Identification Number
C

Amount of Each Disbursement this Period
540.00

Transaction ID : SB17.4463

Memo Item

Full Name (Last, First, Middle Initial)
B. Montana Democratic Legislative Campaign Committee

Mailing Address 303 N. Ewing St.

City Helena State MT Zip Code 59601

Purpose of Disbursement
Event tickets

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 02 / 2026

FEC Identification Number
C

Amount of Each Disbursement this Period
170.00

Transaction ID : SB17.4464

Memo Item

Full Name (Last, First, Middle Initial)
C. Montana Democratic Legislative Campaign Committee

Mailing Address 303 N. Ewing St.

City Helena State MT Zip Code 59601

Purpose of Disbursement
Event tickets

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 08 / 2026

FEC Identification Number
C

Amount of Each Disbursement this Period
25.00

Transaction ID : SB17.4465

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 735.00

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 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial)
A. Montana Democratic Party

Mailing Address 303 N Ewing St

City Helena State MT Zip Code 59601

Purpose of Disbursement
Event Costs

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 15 / 2026

FEC Identification Number
C

Amount of Each Disbursement this Period
3500.00

Transaction ID : SB17.4615

Memo Item

Full Name (Last, First, Middle Initial)
B. Montana Secretary of State

Mailing Address 1301 E 6th Ave

City Helena State MT Zip Code 59601

Purpose of Disbursement
Filing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 02 / 2026

FEC Identification Number
C

Amount of Each Disbursement this Period
1743.00

Transaction ID : SB17.4617

Memo Item

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

Mailing Address 106 E Broadway St

City Helena State MT Zip Code 59601

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 25 / 2026

FEC Identification Number
C

Amount of Each Disbursement this Period
60.00

Transaction ID : SB17.4621

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 5303.00

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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Blackwolf for Montana

A. Safeway

Full Name (Last, First, Middle Initial)

Mailing Address 250 Parkcenter Blvd

City Boise State ID Zip Code 83706

Purpose of Disbursement Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 74.98

Transaction ID : SB17.4641

Memo Item

B. Springhill Suites

Full Name (Last, First, Middle Initial)

Mailing Address 10400 Fernwood Rd

City Bethesda State MD Zip Code 20817

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 120.80

Transaction ID : SB17.4650

Memo Item

C. Springhill Suites

Full Name (Last, First, Middle Initial)

Mailing Address 10400 Fernwood Rd

City Bethesda State MD Zip Code 20817

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 131.80

Transaction ID : SB17.4651

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 327.58

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 29	
	<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)
Blackwolf for Montana

Full Name (Last, First, Middle Initial) A. Texas Roadhouse		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2026
Mailing Address 6040 Dutchmans Ln		FEC Identification Number C
City Louisville	State KY	Zip Code 40205
Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 233.28	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4664 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Victory First Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2026
Mailing Address 8124 Bonaire Ct		FEC Identification Number C
City Silver Spring	State MD	Zip Code 20910
Purpose of Disbursement Compliance Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4676 <input type="checkbox"/> Memo Item
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
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	Memo Item <input type="checkbox"/>
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	733.28
TOTAL This Period (last page this line number only).....▶	15932.14